Community Services Area Planning Gains Momentum

By: Stephen Kaplan, BHRS Director

Many of you received an email recently updating the work we have been doing on the Community Service Areas as a follow up to the “listening sessions” that were held earlier this year. During the week of November 5th, we brought together a group of 35 individuals representative of our diverse community of stakeholders and of the geographic breadth of our county, which included staff, partners, clients, family members, and advocacy organizations. The week was dedicated to investigating how our current processes work, thinking of new ways to examine and conceive a “future state” system of care; and to identify what it would take to realize this vision, and outline what our next steps should be.

During this planning week the presidential election was decided and with it the future of “Obamacare” was also determined. Our moving toward Community Services Areas is in great part related to the goals of health care reform and the important role that mental health and substance use prevention and treatment has in achieving what is called the “triple aim”—improving care for individuals, improving the health of communities and controlling costs.

We are now planning the next step of our process which will be to engage staff and stakeholders in the Fair Oaks/Redwood City area to build upon the work that has been done to date and tailor it to the needs of this community. The target date to complete this work is the end of February.

During the intense work that occurred in November there were a number of specific and significant areas that drew particular attention from the participants.

1. Improving how those seeking our services can be engaged. Gaining entry into our system of care for client/consumers is often difficult, complicated, and confusing. A panel of consumers poignantly shared how this has complicated their paths to recovery and wellness.

2. How to improve family involvement. A panel of family members reinforced the significant role that family members can have, but that the system and laws oftentimes present formidable barriers.

3. Finding ways to more fully utilize consumers/clients and family members in the delivery of services by increasing their visibility and responsibilities.

4. Accurately measuring the work we are doing. Is the quality of life for those receiving our services, improving? Do they believe our services are relevant and meaningful? Are we contributing to the overall health of the community? And are we using our resources efficiently and helping to reduce more costly care?

Work groups have been convened to look more deeply into each of these areas and make recommendations on how these can be incorporated into the design of the Community Services Area. The group of stakeholders that were together in November would like me to share with you the tag line they developed, which we are now adopting for BHRS and our Community Services Area planning: “Your Wellness, Your Way, Your Community.”

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Annual Change Agent Holiday Potluck
Thursday, December 13th, 11 am - 2 pm

El Centro de Libertad
500 Allerton St., Redwood City
RSVP: AOD Main Line 650.802.6400
My wife and I keep saying to each other “I cannot believe how fast this year has gone by!” And it really has. At the end of the year, I like to reflect on the challenges we have faced, the successes achieved, the problems not yet solved, the great work of our staff and providers, and the stories of extraordinary courage from consumers/clients and family members.

This year I went back and reread all of the Wellness Matter editions to journey through 2012 and be reminded of all the amazing things that have happened. It was a great way of taking time to “see the trees instead of just the forest” and appreciate the dedication and effort that so many of you have made in pursuit of supporting people in their recovery.

So you can experience this 2012 reflection I have listed below many of the programs and initiatives that were highlighted in Wellness Matters. I want to express my gratitude to Diane Tom, the Wellness Matters editor for the great job she has done in making sure that the BHRS story gets told.

- **January:** Pathways Mental Health Court, Veterans Court, College scholarships for consumers, Service Connect, Photovoice, Parent Project, Chinese Health Initiative, African-American Initiative, PRIDE Initiative, and Consumer Hall of Fame.
- **February:** Homeless services, Total Wellness, Advancing Recovery Project, Neuro-Sequential Model of Therapies (NMT)
- **March:** Voices of Recovery, Heart and Soul, Lived Experience Academy, College of San Mateo AOD Certification Program, Peer to Peer Total Wellness, Psychiatry Residency, and Change Agents.
- **April:** Prevention and Recovery in Early Psychosis (PREP), Drug Court, Spirituality Initiative, Achieve 180, Latino Collaborative, and Stamp Out Stigma.
- **May:** High School Career Pathways, SMART, NAMI, HOPE Awards, Student Art Show, Tony Hoffman Awards, Anti-Stigma Initiative, Asian-Pacific Islander Heritage Month, Mindfulness, and Day of Partnering.
- **June:** Lean Quality Improvement, Cedar Street apartments opening, and Filipino Health Initiative
- **August:** School based Mental Health services, Health Care Reform, Community Workers/Family Partner retreat, North County Prevention Partnership.
- **September:** Bay Area Services Network (BASN), David Lewis Award, Avatar to AOD providers, Mental Health First Aid, Recovery Month, Housing Heroes
- **October:** El Camino apartments opening.
- **November:** Puente Clinic, Healthy Families, Trauma Informed Care, Suicide Prevention, and Resource Fair for Young People.

We are so fortunate that we have so many “trees” to make up a beautiful “forest.”

I want to wish you all the best for the upcoming holidays, and I look forward to 2013 and the challenges and opportunities that will come our way.

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**Congratulations BHRS Office of Consumer and Family Affairs**

Winner of the San Mateo County STARS Customer Service Award, recognizing their efforts in areas such as: increasing client/family member engagement in the system, simplifying and streamlining the grievance process and developing helpful consumer-friendly publications.

Jairo Wilches, Linford Gayle (back), Claudia Saggese and Suzanne Aubry.

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**BHRS Adult Resource Management Team** is collecting the following items to assemble survival kits for the homeless in San Mateo County:

- Toothbrushes
- Toothpaste
- Small toiletries
- Washcloths
- Gently used towels
- Razors
- Combs
- Used fanny packs or backpacks
- Pocket tissues
- Socks
- Rain ponchos
- Gently used or new items for holiday gifts (for adults)

Drop off items in the collection box located in the lobby of 2000 Alamedada de las Pulgas, San Mateo, through December 21st. Items may also be dropped off at Suite 240 throughout the year.
Wellness Matters

I hope you had a wonderful Thanksgiving holiday. As the holiday season continues to unfold, “gratitude” remains the dominant theme when thinking about 2012. What has been a tough few years of constant budget cuts and declining MHSA (and other) revenues, seems to be giving way to more hopeful times. 2012 has found us undertaking modest but significant expansions of some of our MHSA services, as well as the continuation of a process to rethink our entire service delivery model to respond to a transformed healthcare environment brought about by the imminent full implementation of health care reform.

The process that the Behavioral Health and Recovery Services Division undertook early in the year is grounded in a SAMHSA paper called “A Good and Modern Addictions and Mental Health System of Care,” and kick-started in more than one way our MHSA community planning process for the next fiscal year. Over 1,000 stakeholders have already offered input into the idea of developing “Community Service Areas” (for everything there is to know about this, please see the link below). This proposed model couldn’t align better with the Mental Health Services Act. Indeed, the similarities of the two frameworks are striking: While the MHSA calls for community collaboration, wellness, recovery and resilience, cultural competence, consumer and family-driven services, and the pursuit of a seamless, integrated service experience for our clients and their loved ones across the lifespan and for all levels of acuity (including people not yet in need of services but at risk), the vision behind a “Good and Modern” behavioral health system of care calls for system and service coordination, health promotion, prevention, screening and early intervention, treatment, and resilience and recovery support to promote social integration and optimal health and productivity. Both philosophies promote a system that is accountable, organized, a system that controls costs and improves quality, a system that is accessible, equitable, and effective.

We are fortunate to be in a county that adheres to these values. For that I’m grateful, too.

For any questions regarding MHSA, please contact me.

email: SSantana-mora@smcgov.org
Phone: 650.573.2889
Mailing Address: Behavioral Health and Recovery Services Division 225 W. 37th Avenue 3rd floor, San Mateo, CA 94403

The Mental Health Services Oversight and Accountability Commission has released instructions for the development of FY 13/14 MHSA Annual Update. Our continued planning process will resume very soon. Stay tuned!

Behavioral Health Services in a Transformed Healthcare Environment: www.smchealth.org/BHRSGoodModern

Congratulations Pathways Mental Health Court Program, Honorable Mention in the San Mateo County STARS Program Performance category for efforts in areas that include reducing recidivism, decreasing jail days and successfully housing clients upon admission to the program.

Front: Yahaira Ortega, Terry Wilcox-Rittgers, Hannah Kahn, Tennille Tucker.
Back: Bob Durazzo, Talia McClure, Theresa Bassett-McConnell, Michael Beyer, Michael Leon
Prevention Partnership Leads to Implementation of TRACE Program

As part of the AOD Prevention Strategy, the Redwood City Prevention Partnership, Redwood City Police Department, and California Alcohol Beverage Control (ABC) implemented the TRACE program.

The Redwood City Police Department and California Alcohol Beverage Control (ABC) Agents conducted a joint “Minor Decoy” and “Shoulder Tap” operation to conduct compliance checks at local businesses that sell alcoholic beverages.

The operation is designed to reduce the availability of alcohol to people under 21. The program utilizes minors who are supervised and monitored by police officers. The decoys are directed to enter establishments and attempt to purchase alcohol. The decoys also “tap” adults they come into contact with to see if the adults will purchase alcohol for them.

This operation is an ongoing collaboration between the Redwood City Police Department, California Alcohol Beverage Control, Redwood City 20/20, Redwood City, Prevention Partnership and Sequoia Teen Resource Center’s Youth Advisory Board. Several Sequoia High School Youth Advisory students presented data regarding businesses selling alcohol to minors. The students not only identified the problem but wanted to be part of the solution. The solution the youth advisory came up with was the implementation of TRACE.

TRACE, or Target Responsibility for Alcohol-Connected Emergencies, is a rapid response program for incidents involving minors and alcohol which resulted in major injury or death. The participating agency contacts the TRACE unit coordinator for their area as they respond to major injury incidents or fatal crashes involving minors and alcohol. ABC agents respond immediately to conduct a ‘backtrack’ investigation to gather evidence and information that helps trace how the minors obtained the alcohol.

The Redwood City Police Department values the contribution made by the youth in the community and is committed to taking all measures that ensure their safety, and hold accountable those that provide alcohol to minors.

Visit Redwood City’s website at www.redwoodcity.org for information.

- Yadhira Christensen

First Chance Sobering Station and Outpatient Treatment Services

826 Maher Road
Burlingame
(650) 595-8165

Winners of the Amazing Dialogue Celebrate

The Amazing Dialogue is an interactive, informational and “fun” way for mental health interns to learn about the different BHRS Health Equity initiatives, on day two of the Intern Orientation.

Amber McDowell Reese, Carla Haggard, Regina Moreno (CCC Co-Chair), Casey Zandona, Jei Africa (ODE Director), Andre Zandona.

First Chance Sobering Station and Outpatient Treatment Services

StarVista’s First Chance Sobering Station and First Chance Outpatient Services proudly announces the new location of their central site at 826 Mahler Road, Burlingame which opened for business on November 26. The Quarry Road, San Carlos location closed on the same day.

The new Sobering Station location is designed for easy central county access, available to all the Northern, Southern, Coastal and Central County Police Department’s, Sheriff’s Department and California Highway Patrol.

First Chance Sobering Station services are also available for all San Mateo County BHRS Mental Health and AOD providers who need a short term respite for a client in relapse.

First Chance Outpatient Services, offering moderate to intensive outpatient services for both genders, will be relocating as well. Please feel free to contact the staff to schedule a site visit, and please remember the First Chance referral system is simply a phone call away. They can be reached at the same phone number: 650.595.8165.

- Clarise Blanchard, StarVista
El Centro & InnVision Shelter Network: Partnership for Recovery

Recent collaboration between a substance abuse treatment center, El Centro de Libertad/The Freedom Center, Inc. (El Centro), and a homeless services provider, InnVision Shelter Network (IVSN), has resulted in increased recovery program enrollment amongst shelter residents at IVSN’s Maple Street Shelter.

In October 2011, El Centro’s outpatient program in Redwood City, formed a collaborative with IVSN’s Maple Street Shelter, a 76-bed “dry” shelter, also located in Redwood City. The shelter houses 26 women and 50 men, and runs at near 100% capacity throughout the year.

As a “dry” shelter, Maple Street prioritizes the safety of clients and staff, and identifies clients suspected to be under the influence via breathalyzer, urine toxicity screening, and self-identification. At many shelters across the country, a client who tests positive for alcohol and other drugs will be immediately exited from the program (or conversely, not tested for illicit drugs or alcohol at all). IVSN partnered with El Centro in order to continue to work with actively-using clients, and to provide them with the option of enrolling in outpatient treatment at El Centro as an alternative to program termination.

El Centro and IVSN understand addictive disorders to be chronic and frequently relapsing conditions, and are committed to providing clients with the stability and support necessary to engage in rehabilitative programming. Many shelter staff members are Alcohol and Other Drug (AOD) certified counselors, and are familiar with AOD support and intervention. The recent collaboration with El Centro has provided IVSN clients with a direct line to recovery resources as well as an additional push to engage in treatment.

Beginning last October, Maple Street residents attended orientation sessions provided on-site at Maple Street by El Centro, describing the treatment modality. Ancillary services, including domestic violence counseling and education, anger management, and other services that are provided in conjunction with recovery services are also described.

Interested clients had the opportunity to attend an orientation at El Centro. Of the 39 who attended El Centro’s orientation, 77% enrolled in treatment (30 clients). Of the 30 clients enrolled in the outpatient program at El Centro this past year, 16 either already completed treatment, or continue to attend regular sessions. The remaining 14 either dropped out with an unknown outcome, or left substance abuse treatment following a relapse.

Given the prevalence of relapse, clients with addictive disorders benefit from coordinated and ongoing care. Maple Street shelter staff and El Centro recovery services staff maintain a close working collaborative on behalf of each shared client’s relapse prevention plan.

This collaboration was made possible in part as a result of the San Mateo County Medical Coverage Expansion Program (MCE). This coverage is available for San Mateo County residents who earn under 133% of Federal Poverty Level, and specifically targets consumers of behavioral health services. Notably, persons with MCE coverage do not pay a co-fee for services. Prior to MCE, co-payments for recovery services discouraged many shelter residents from accessing these services.

We believe this collaborative effort is a model for helping shelter residents identify permanent exits from homelessness, and begin an enduring recovery. As the program progresses, we hope to work to better develop the client’s recovery and social support network early in their recovery, so as to best support their recovery as they complete both the shelter and recovery services program. It is critical that individuals have an established support network as they work to maintain both their housing and their recovery.

Brian Greenberg, Kristen Cronon, Robert Vernon
InnVision Shelter Network
Mariana Garcia, El Centro de Libertad/The Freedom Center

Halloween Spirit Shines at East Palo Alto Community Counseling Center

Lupe Ramirez, Renee Harris, Anna Tran and Mary Stavn celebrate Halloween!
**Training & Education**

**Psychiatric Grand Rounds**
12:15 - 1:30 pm
Health Services Building, 225 37th Avenue, Room 100, San Mateo

*Substance Abuse in the VA Population*
Tuesday, December 11
Presented by Venessa de la Curz, MD, Psychiatrist and Director of Addiction Treatment Services, VA Palo Alto Health Care System, Palo Alto.

**Monthly Live Avatar Trainings for Mental Health—New!**
Trainings will be held from 9 am – 3 pm on the first Friday of each month.

**December Training:**
Friday December 7
2000 Alameda de las Pulgas, 1st Floor Computer Training Room

**Topics:**
9:00 - 10:00 am
Avatar Basics/Getting Around Avatar

10:00 - 11:00 am
Get help solving problems/correcting errors

12:00 - 1:00 pm
Drop-In, Q&A-Bring Your Questions, Brown Bag

1:00 - 2:00 pm
Focus on Treatment Plans/Progress Notes

2:00 - 3:00 pm
Overview of Auditing the Chart (Bring audit tool- if used at your program).

**Sign up only for the sessions you need!**

**Location:**
1st floor Computer Training Room
2000 Alameda de las Pulgas
San Mateo

Contact Michele Friedman at MFriedman@smcgov.org or 650.573.2668 to register.

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**Employee News**

**Welcome**
- Gretchen Petersen, MH Nurse, South County
- Kayla Huss, Counselor, Canyon Oaks Youth Center
- Michael Mouton, Counselor, Canyon Oaks Youth Center
- Nicole Scruggs, Counselor, Canyon Oaks Youth Center

**Congratulations**
- Elizabeth Alvarez, promoted to Program Specialist for the Interface Team.
- Jeannine Mealy, Aurora Pena and Lorrie Sheets, nominated for the Women In County Government Award.

**Employee Service Awards**
- Christine O’Kelly, AOD

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**Motivational Interviewing for Children and Youth**
Wednesday, January 30
9:00 am - 4:00 pm
Silicon Valley Community Foundation
1300 S. El Camino Real
San Mateo

Registration to be announced.
Q-Tip for Quality - Michele Friedman, RN/BSN

Take Charge of Avatar: Work Faster, Smarter, Better...
BHRS Quality Management is happy to announce monthly drop in, hands on, *live Avatar trainings* for Mental Health in the 1st floor Computer Training Room at 2000 Alameda de Las Pulgas, San Mateo. The trainings will be held from 9 am – 3 pm on the first Friday of each month.

**December Training:**
Friday December 7th

**Topics:**
- 9:00- 10:00 am
  Avatar Basics/Getting Around Avatar
- 10:00- 11:00 am
  Get help solving problems/correcting errors
- 12:00 - 1:00 pm
  Drop-In, Q&A- Bring Your Questions, Brown Bag
- 1:00 - 2:00 pm
  Focus on Treatment Plans/Progress Notes
- 2:00 - 3:00 pm
  Focus on Treatment Plans/Progress Notes

Overview of Auditing the Chart (Bring audit tool- if used at your program).
The calendar for the monthly drop in trainings will be sent via e-mail; then posted on [www.smchealth.org](http://www.smchealth.org). No need to sign up for all sessions in an entire day. Only sign up for the day/session(s) you are interested in or need. You can mix days/sessions if needed.

Quality Management is also pleased to report the Guide to BHRS Resources located at [www.smchealth.org](http://www.smchealth.org) (the County Health System’s external website designed for BHRS staff, contractors, clients/families and the public) has been updated with the following additions:

- **Required Online Training Menu:** new online training, Avatar Assessments, Discharges and Transfers for Mental Health.

New document, “The Best Way To”:
- A comprehensive description of Mental Health Avatar documents/reports with an explanation of how the document/report is used; why you should use it and the path to find it. **Check it out!** (We’ll be referring to this document in our monthly trainings). A similar “Best Way To” is being developed for AOD Avatar documents/reports and will be added soon.

Contact me at: MFriedman@smcgov.org or 650.573.2668 to sign up for the trainings or for more information.

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**Employee Spotlight**

Michelle Patterson
Community Health Planner

**Years at BHRS:**
4 out of last 6 years. The other two were at grad school at UCLA.

**Years at San Mateo County:**
11 out of the last 13 years.

**Hometown:** San Mateo, CA

**What do you do?**
I spend half of my time working for the Total Wellness program where I coordinate health education programming, supervise Peer Wellness Coaches, and facilitate Breathe California’s Ash Kickers group. The other half of my time I spend working on projects related to the Mental Health Services Act (MHSA).

**What do you enjoy most about your job?**
The variety of challenging projects that come my way, my co-workers, the many opportunities for professional growth and development, and knowing that the work we do makes a difference in peoples’ lives.

**Favorite hobbies/activities:**
I have infant twin boys and three dogs at home who keep me quite busy when I’m not at work. I love playing with all five of them! When I do have some “me” time, I like to work on craft projects, read, and spend time with friends and family.

“If I weren’t a Community Health Planner, I’d be a...”

Winery owner/operator.
Update a Most Useful Tool:
Motivational Interviewing - Helping People Change, 3rd Edition

I was fortunate to participate as a learner at the 2012 Motivational Interviewing Network of Trainers meeting in Fort Wayne, Indiana, this past September. In addition to presenting on the use of Motivational Interviewing in the creation of a Comprehensive, Continuous, Integrated System of Care (along with my fellow San Diego Change Agents Diego Rodgers, PhD and Ian Schere, PhD), and Motivational Interviewing and Mindfulness, I was able to witness the much awaited unveiling of the 3rd Edition of the Motivational Interviewing Manual, Motivational Interviewing: Helping People Change.

The highly anticipated new edition was released in October, and Guilford Publishers managed to create a mild amount of hysteria by bringing only a few dozen books at a time to the throngs of eager trainers waiting to absorb the latest updates. The wait was truly worth it. Although the co-author and developer of the MI approach, William Miller, advised against the group viewing the book as “The Oracle,” many highly anticipated changes were made to the approach which was influenced by the research and experience of the hundreds of participating trainers. What follows are a couple of examples of some of the changes. In order to learn more, I recommend viewing the book and/or taking advantage of the multitude of Motivational Interviewing trainings offered throughout the year. The next training on Motivational Interviewing for Youth and Adolescents will be held on January 30th from 9 am to 4 pm at the Silicon Valley Foundation. – Kristin Dempsey

registration will be announced soon.

Resist Your Attachment to Resistance

Rolling with Resistance was a common mantra in the earlier Motivational Interviewing work. The new edition avoids focusing on identifying a person as resistant, and instead identifies whether or not they are speaking sustain talk or if we are experiencing discord in the relationship. How are these items distinct from resistance? Discord is simply dis-harmony in the collaborative relationship that can be caused by an inability to properly engage, focus, evoke or plan with a person (Miller and Rollnick, 204-7). Sustain Talk is simply talk against change, or stated another way, talk that reinforces the status quo (Miller and Rollnick, p. 164). The concept of resistance places a certain label on the client as being difficult – pathological or oppositional. If someone is ambivalent and focused on the status quo, this is a normal part of ambivalence. If we listen long enough, we’ll typically hear the other side – the change talk – we typically are hoping to foster.

Discord means there is someone amiss in the helper/helpee relationship. Discord can typically be resolved through a change in attitude, behavior or approach on the part of the helper (Miller and Rollnick, p. 197). In either case, reflection, curiosity, respect, reframing, among other client-centered techniques and attitudes, can get the person moving toward change. A label of “resistance” tends to provide a sense of helplessness and generally leads to a dead end.

Got Compassion and Acceptance?

These two concepts, fundamental as components of mindfulness, have also become central to the spirit of Motivational Interviewing. The intention of the spirit is to position ourselves in such a way that we are always flexible and that the services are truly client-centered. Partnership and evocation are also tenants of the spirit, and internalizing these concepts will help ensure that the process is as client-driven as possible (Miller and Rollnick, p. 14-23). The helper will provide facilitation, support and necessary guidance, but it is the helper acting with the intention of promoting these components of spirit – compassion, acceptance, partnership and evocation – that allows for the safety and builds the internal motivation to fuel movement for change. Being understood, accepted and able to speak is inherently motivating!

Stay tuned for the Four Processes of Motivational Interviewing—new to the 3rd edition—in the January issue of Wellness Matters.

- Kristin Dempsey