

# SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION



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**London N. Breed**

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Marylyn Tesconi, MA, Chair  
Carletta Jackson-Lane, JD, Vice Chair  
Judy Zalazar Drummond, MA, Secretary  
Terezie "Terry" Bohrer, RN, MSW, CLNC  
Arthur Curry  
Marcus Dancer  
Judith Klain, MPH  
Gregory Ledbetter  
Toni Parks  
Harriette Stallworth Stevens, Ed D  
Richelle Slota, MA  
Ulash Thakore-Dunlap, MFT  
Idell Wilson

## MINUTES

Behavioral Health Commission Meeting  
Wednesday, June 17, 2020  
6:00 PM – 8:00 PM  
**REMOTE MEETING CALL-IN**

**BOARD MEMBERS PRESENT:** Marylyn Tesconi, Chair; Carletta Jackson-Lane, JD, Vice-Chair; Judy Z. Drummond, MA, Secretary; Terry Bohrer, RN, MSW, CLNC; Marcus Dancer; Judith Klain, MPH; Richelle Slota, MA; Ulash Thakore-Dunlap, MFT; and Harriette Stevens, Ed D.

**BOARD MEMBERS ABSENT:** Arthur Curry; Gregory Ledbetter; Toni Parks; Idell Wilson.

**OTHERS PRESENT:** Helynna Brooke (Executive Director); Loy M. Proffitt, MBA (Assistant Director); Michelle Long, MHA, Director of Contract Development & Technical Assistance (CDTA), Behavioral Health Services (BHC); Lisa Williams, San Francisco Mental Health Education Funds, Inc. (SFMHEF); Winship Hillier; and [members of the public](#).

**Commissioner Tesconi** called the meeting to order at 6:05 PM.

### Roll Call

**Ms. Brooke** called the roll.

### ITEM 1.0 COMMISSIONER'S REPORTS.

#### 1.1 Report from Executive Director of the Behavioral Health Commission

**Ms. Brooke** stated, "I will retire on July 3rd. That's my report."

**Commissioner Bohrer** asked, “Are there any BHC updates?”

**Ms. Brooke** stated, “No.”

**Commissioner Klain** stated, “Congratulations on your retirement and for your years of service.”

**Commissioner Drummond**, “Is there any update on budget?”

**Ms. Brooke** replied, “It’s not ready yet.”

**Commissioner Bohrer** asked, “When will it be ready?”

**Commissioner Stevens** asked, “Which budget?”

**Commissioner Bohrer** stated, “We only have one Commission budget.”

**Ms. Brooke** explained, “Generally, we submit that at the end of the fiscal year.”

**Commissioner Stevens** stated, “We appreciate your work.”

**Commissioner Drummond** asked, “What about the Annual Report?”

**Commissioner Tesconi** stated, “I’m working on it with some other folks, and if anyone wants to help, we can always use the help and support.”

**Commissioner Slota** said, “I’ll help.”

**Commissioner Bohrer** said, “I’ll help.”

**Commissioner Drummond** said, “I’ll help with final edits.”

## **1.2 Report from Chair of the Commission and the Executive Committee.**

Discussion regarding Chair’s meetings with Behavioral Health Services staff, meetings with members of the Board of Supervisors and community meetings about mental health or substance use.

**Commissioner Tesconi** said, “I will not comment on the article. Supervisor Catherine Stefani has resigned, and the San Francisco Mental Health Education Funds, Inc. (SFMHEF) Board is working hard to resolve all the issues.

There is a maximum of 13 members, five from the Commission, and eight from the community.

We have seven vacant seats on the BHC, seven waiting to be confirmed, three currently filled. Helynna, can you send out an email about the vacant seats. Any questions?”

None

**Commissioner Stevens** mentioned, “The letterhead still has names of people who have left. What is the process to get those names removed?”

**Ms. Brooke** responded, “We do have one. I will check.”

**Commissioner Tesconi** mentioned, “We also need to change the BHC and SFMHEF websites. How can we do that, Helynna?”

**Ms. Brooke** replied, “We just got the domain name, so the items need to be transferred to that. Loy can speak to that.

**Mr. Proffitt** replied, “We’re working with the City to do the name change.”

**Commissioner Tesconi** inquired, “Any other questions or comments?”

None

### **1.3 Reports from Committees**

#### **Discussion regarding committee meetings, goals and accomplishments**

##### **1.3 a) Information Committee**

**Commissioner Dancer** stated, “I’m going to have to step down from the Commission. I’ve been escaping COVID-19 here in Texas. Our timetable is moved up. We’re looking for more property. I’m not a SF resident anymore but will continue to work with the mental health community and the relationship with Tele-Medicine. I’m still working with Peter Hanes from Big Health to get him in front of you guys.

**Commissioner Tesconi** stated, “You will be missed.”

##### **1.3 b) Implementation Committee**

**Commissioner Jackson-Lane** shared, “I’m in the car delivering Chrome books to the kids. I don’t have the resolution in front of me.

We will miss you, Marcus, and I would like to help with the Tele-Medicine resolution.

I would like the Commissioners to look over our resolutions and see where you can make contact with Supervisors and other folks. We’re trying to move forward.

Black to the future, working with African Americans all over the City. I’d like to commend Judith Klain for her work in the Bayview.”

**Commissioner Tesconi** said, “Thank you. Any comments or questions?”

**Commissioner Bohrer** asked, “Could each of the Commissioners write a few paragraphs for the Annual Report? What they did for this year, the purpose of their committee. Do it in the next week and send it to Richelle, Marylyn, or me.”

**Commissioner Tesconi** said, “Any other comments or questions?”

None

### **1.4 People or Issues Highlighted by BHC: Suggestions of people and/or programs that the board believes should be acknowledged or highlighted by the Behavioral Health Commission**

**Commissioner Klain** mentioned, “I would like to commend the United Council of Human Services (or Mother Brown’s Kitchen). 600 people were tested for COVID-19 in the Bayview. There were less than six who tested positive. Incredible work, with a focus on the homeless and those with substance use. They really stepped it up this past few months.”

**Commissioner Bohrer** suggested, “Felton Institute for their suicide intervention program. Every counselor had to set up complex systems in their homes. Amazing.”

**Commissioner Drummond** said, “Is there any way to formally recognize these people?”

**Commissioner Tesconi** replied, “In the past, they came to our meetings and got a certificate.”

**Commissioner Bohrer** said, “We can arrange through the Board of Supervisors to get commendations because they’ve done outstanding work. I’ll look into it and see what we can do.”

**Commissioner Tesconi** asked, “Anyone else?”

None

### **1.5 Report by members of the Commission on their activities on behalf of the Commission**

**Commissioner Bohrer** said, “I’m also attending the Police Commission. Their Annual Report is being presented. There is a culture change in the use of force. I represent the Commission on the City workgroup. I’ll send you the site, and it’s an extraordinary document compared to what’s been happening in the past. In the last month, May, there were only two uses of force: a white male and a female. I’m proud to be part of this group representing you.”

**Commissioner Stevens** said, “I’m on the Mental Health Governing Board, seeing the outcomes of behavioral health services in CA. We’re talking about the Data Notebook. The guidelines will be coming out. The emphasis is on tele-health and the impact of COVID 19.”

**Commissioner Bohrer** said, “We already sent it in for last year.”

**Commissioner Stevens** inquired, “Are you currently working on the Report?”

**Commissioner Bohrer** said, “We didn’t get anything from the State yet.”

**Commissioner Stevens** reported, “The Planning Council is working on guidelines for the Data Notebook for 2020 - 2021, but the State wants it slanted more towards COVID in our delivery of services.”

### **1.6 New business - Suggestions for future agenda items to be referred to the Executive Committee**

**Commissioner Tesconi** said, “Are there any ideas for new business to refer to the Executive Committee?”

**Commissioner Klain** stated, “No item right now. In the past, I’ve submitted several items. Can we go back in the minutes and look them up?”

**Commissioner Tesconi** asked, “We could try to go back in the minutes.”

**Ms. Brooke** shared, “They’re all on-line.”

**Commissioner Tesconi** asked, “Are they accessible?”

**Ms. Brooke** replied, “[www.sfgov.org/mental\\_health](http://www.sfgov.org/mental_health), or [www.mhbsf.org](http://www.mhbsf.org) with the link at the bottom.”

**Commissioner Tesconi** stated, “Our bylaws should be reviewed and updated; they’re from 2007. We should have had an election in February for new officers. Since we can’t do site visits, can we create some questionnaire for people who run residential programs to see the COVID impact?”

**Commissioner Klain** said, “Good, since that will give us something to put into the Data Notebook since we haven’t done anything in the past year.”

**Commissioner Bohrer** stated, “I volunteer, Judy, and Marylyn does, too. It would have been so much easier to survey over the phone.”

**Commissioner Tesconi** said, “I’d like to initiate that.”

### **1.7 Public comment**

**Mr. Hillier** stated, “The notice for this meeting was not posted within the past 72 hours per Brown and Sunshine Acts. Any action you take will be in violation of the Brown Act. I’ve been trying to get people reappointed. Can I hear from Commissioner Drummond?”

**Commissioner Drummond** said, “I sent my application to Supervisor’s Clerk Victor Young and Supervisor Mandelman.”

**Mr. Hillier** said, “I’ll be in touch with Supervisor Mandelman. They did not appoint three Commissioners on June 3<sup>rd</sup>. I got a call back from Supervisor Haney regarding Carletta, but not in time. I’ve been in contact with Peskin, but they haven’t gotten back.”

**Ms. Brooke** explained, “The Rules Committee did not appoint Terry.”

**Commissioner Bohrer** said, “I volunteered. I assumed the responsibility when David Elliott Lewis’s term expired.”

## **ITEM 2.0 ACTION ITEMS**

For discussion and action.

### **2.1 Public comment**

**2.2 Proposed Resolution:** Be it resolved that the minutes for the Behavioral Health Commission meeting of May 20, 2020 be approved as submitted.

**Commissioner Tesconi** mentioned, “The Executive Director has not completed the minutes of May 20th. We have to table this until the next meeting in July.”

## **ITEM 3.0 PRESENTATION: DISCUSSION: HOW TO STRENGTHEN THE BEHAVIORAL HEALTH COMMISSION’S RELATIONSHIP WITH THE BOARD OF SUPERVISORS**

For discussion

### **3.1 Discussion: How to Strengthen the Behavioral Health Commission’s Relationship with the Board of Supervisors**

**Commissioner Jackson-Lane** stated, “I feel that we should have an open relationship with our Supervisors. Since Supervisor Stefani resigned, Helynna, what is the process to get another Supervisor on the Commission?”

**Ms. Brooke** stated, “We need to look for a Supervisor with an interest in mental health. We need to lobby for them, then get the full Board to nominate them.”

**Commissioner Jackson-Lane** added, “A group of us need to work on that.”

**Commissioner Drummond** said, “We can’t go forward on this until we have our financial problems cleaned up. We should table this until our issues are resolved.”

**Commissioner Klain** stated, “I’m concerned we have basically stalled our work for many issues out of our control. I don’t believe we need to stop doing our work. We should continue to do the work we need to do.”

**Commissioner Drummond** said, “We can lobby for a new Supervisor or do visits.”

**Commissioner Klain** stated, “We can look for new Commissioners and do the work we need to do as Commissioners on this Commission.”

**Commissioner Stevens** said, “I understand what Judith and Carletta are talking about. Judy has concerns about the budget. I’m in agreement that we need to continue our work. A few Commission members are on the SFMHEF Board, and their responsibility is to resolve that situation. We’re trying to sort through what is happening with the budget. As Carletta says, how do we go about asking Supervisors to participate? We have to update the bylaws and then train Commission members on those bylaws. There’s a lot of groundwork we need to do before we talk to the Supervisors. We can do that right now. We should have things settled with the budget by the end of June. The Commission has to proceed. We need a plan. We can’t just ask.”

**Commissioner Klain** said, “I agree with Harriette. We’ll just make fools of ourselves.”

**Commissioner Jackson-Lane** said, “That was just something we can focus on. Just trying to get a feel about how we can set a plan with the ultimate goal of getting a Supervisor on the Commission.”

**Commissioner Tesconi** said, “It’s very important we get the seats filled, including the Supervisor’s seat. I’d be willing to work together on how we can work with a Supervisor to get them on this Commission. My Supervisor, Gordon Mar, is great.”

**Commissioner Bohrer** shared, “There are many issues that have not been addressed in a long time.

It has to be done through a strategic plan. We need to update the bylaws - there are many other things we need to accomplish.

There are 16 steps the WIC needs to have done. We never follow through. I would be willing to work on that plan. Judith would be great. Where do we want to go for the next year? This year has been an abomination. Resolutions and Annual report are a waste.

This is an opportunity to look at what the State says. It says we get appointed for three years. There are a lot of things that need to be done with people on a strategic plan. Volunteers can work on this. Who volunteers?”

**Commissioner Jackson-Lane** mentioned, “Judith, Marylyn, Richelle, and Judy volunteer.”

**Commissioner Bohrer** stated, “I’ll send a skeleton by the end of the week. We had one before, but nobody followed it.”

**Commissioner Klain** asked, “When is the Annual Retreat?”

**Ms. Brooke** said, “December.”

**Commissioner Klain** stated, “For a future meeting, we can show changes with staff and new Commissioners and present a plan for December.”

**Commissioner Bohrer** suggested, “We can do it for the July meeting.”

**Commissioner Drummond** asked, “Can we agree on that?”

**Commissioner Stevens** asked, “Terry, you mentioned a survey, can that be part of the plan?”

**Commissioner Bohrer** mentioned, “I want the Commission to be the best. Even smaller little counties are doing better than we are.”

**Commissioner Stevens** asked, “Who do you submit that to?”

**Commissioner Bohrer** stated, “It goes to the Supervisors and the Mayor. I’d bet neither the Supervisors nor the Mayor has ever read them.”

**Commissioner Stevens** asked, “Is it possible to do a synopsis?”

**Commissioner Bohrer** mentioned, “We did that on the last three reports.”

**Commissioner Tesconi** stated, “Ask your Supervisor if she read it.”

**Commissioner Stevens** mentioned, “Getting a Supervisor on the Commission means they have to read the Annual Report and the Data Notebook.”

**Commissioner Klain** said, “One suggestion: usually they include short and long-term goals.”

**Commissioner Bohrer** mentioned, “One year we included goals.”

**Commissioner Tesconi** said, “Chances of them reading it is low. We need a relationship with the Supervisors.”

### **3.2 Public Comment**

**Mr. Hillier** stated, “It’s a total waste of time to get a Supervisor on this commission. Roberts Rules say you may not submit a proxy to sit on this Commission as Stefani did. You’re not going to get a Supervisor to sit on this board. Bylaws say you have to meet 11 times a year, so no more August break or Retreat.

There is no appropriate discussion of financial issues here. You need to make a motion to establish an ad hoc meeting, not the way we just did.

You can’t meet without public knowledge. You need to double down on the procedure on these meetings. The number of people coming in and out of this meeting needs to be watched, because you always need a quorum.”

Roll call: quorum was present.

## **ITEM 4.0 MENTAL HEALTH SERVICE ACT UPDATES AND PUBLIC HEARINGS**

For discussion

The passage of Proposition 63 (now known as the [Mental Health Services Act](#) or MHSA) in November 2004, provides increased annual funding to support county mental health programs. The Act addresses a broad continuum of prevention, early intervention and service needs and the necessary infrastructure, technology and training elements that will effectively support this system. This Act imposes a 1% income tax on personal income in excess of \$1 million. One of the requirements of the Act is that the county must provide annual updates as well as hearings for changes in the way the county implements the funding.

### **4.1 Mental Health Service Act Updates and Public Hearings**

*Please see the director's report.*

## **ITEM 5.0 REPORT FROM BEHAVIORAL HEALTH SERVICES DIRECTOR**

*The full director's report can be viewed at the end of the minutes or on the internet.*

**5.1 Discussion regarding Behavioral Health Services Department - Communication, a report on the activities and operations of Behavioral Health Services (BHS), including a budget, planning, policy, and programs and services.**

*Please see the director's report.*

### **5.2 Public Comment**

No public comments

## **ITEM 6.0 PUBLIC COMMENT**

### **6.1 Public Comment**

**Mr. Hillier** asked, "Who is on the ad hoc committee? I'd like to be on that committee. Report back with instructions to complete the motion. Roberts allows you to add to a motion. We can report back at the July meeting."

**Commissioner Tesconi** stated, "Terry is the chair, with Judy, Richelle, Carletta, Judith, and Marylyn."

**Adjournment** 7:29 pm.



## Behavioral Health Services - *Communications*

### Supporting our LGBTQIA+ Black Youth: Celebrating Pride at this time calls for Reflecting Back to its Roots

These are just a few stories from our youth clients who identify as Black/African-American and LGBTQIA+. Their stories underscore difficulties that cut across multiple marginalized intersected identities. This past week intensified the narrative that amidst the COVID-19 pandemic, we are also living in a racism pandemic. One can just imagine how this is taking a heavy psychological toll on these youth and the larger Black/African-American community. In fact, the [Trevor Project](#) has already reported that, over the last several days, ‘they have been supporting many Black LGBTQIA+ youth in crisis expressing a wide range of emotions over the senseless and unjust violence against Black/African-Americans.’

In celebrating Pride month this year, the LGBTQIA+ community is standing in solidarity with the Black/African-American community. More than a hundred LGBTQIA+ organizations have released [statements](#) in support of the #BlackLivesMatter protests. Many advocacy groups have also [re-envisioned](#) planned Pride programming. All of these efforts are bringing back the Pride Movement to its roots – on how it began with the Stonewall riots (1969) to combat police brutality and oppression. And noteworthy, how it was spearheaded by LGBTQIA+ people of color (i.e., Stormé DeLarverie, Marsha P. Johnson, Sylvia Rivera to name a few), and thus highlighting how intersectionality is at the heart of Pride from the outset.

If you are helping our Black/African-American LGBTQIA+ youth celebrate Pride, more importantly, be sensitive and respond to how the present events are impacting their multiple marginalized identities. Perhaps, [recommendations](#) by the Trevor Project are a good place to start in supporting them. For questions, reach out to [ritchie.rubio@sfdph.org](mailto:ritchie.rubio@sfdph.org).

17-year old youth is comfortable identifying as a gay male... he does not have many gay associations in the community... struggles with his low socio-economic situation and is ashamed of his dark skin color.

13-year old teen’s family has been impacted by gentrification in the city... reports a lot of stress around the way her parents view her gender identification and sexual orientation... she identifies as female and lesbian... parents do not fully accept her identities.

15-year old’s family has been greatly impacted by institutionalized racism, oppression, and discrimination... he has previously struggled with feelings of ambivalence around his identity... currently client demonstrates increased pride and felt sense of safety around his sexual orientation and gender identity... caregivers are particularly supportive of client’s gender nonconforming expression and his process of self-affirmation.





## Engaging Children and Youth in Conversations about Race and the Racism Pandemic

The events of the past week and months, with the tragic deaths of George Floyd, Breonna Taylor, Ahmaud Arbery, and many other Black/African Americans, make us realize that ‘we are living in a [racism pandemic](#) (Shullman, APA president).’ Many adults wonder whether to talk to children and youth about this at all, given that many are already struggling with fear, anxiety, and the uncertainty of the COVID-19 crisis. More than ever, this is the right time to do it. Racism persists because we keep avoiding these conversations. ‘Silence will not protect you or them ([Tatum](#), 2020).’

As behavioral health providers, we are in a unique position for efforts to interrupt and stop racism in our work with children, youth, and their families. ‘There can be no spectators. Addressing racism is a core part of everyone’s work ([Bennet](#), DPH Equity Director).’ Please find below some resources to strengthen your work on this:

- [Embracerace](#). (a) [I \[STILL\] can’t breathe”: Supporting kids of color amid racialized violence](#); (b) Supporting Kids of Color in The Wake of Racialized Violence [Part 1](#) and [Part 2](#); (c) [Tips for Talking to Your Child About Racial Injustice](#).
- [RESilience](#). (a) [Racial Stress and Self-care](#), and (b) [Engaging My Child](#).
- [Talking With Youth about Racism, Police Brutality and Protests](#) and [They’re Not too Young to Talk about Race](#).
- [Coming Together: Standing Up to Racism](#). CNN/Sesame Street Town Hall on Saturday, June 6.
- Bibliotherapy is a powerful medium to start these conversations. See [APA's RESilience](#); [Embracerace](#); [Social Justice Books](#); [Charis Books and More](#).  
Example: [Something Happened in Our Town](#) with a recording [here](#).



For consult or other resources, contact Ritchie Rubio at [ritchie.rubio@sfdph.org](mailto:ritchie.rubio@sfdph.org).



## Mental Health Services Act (MHSA) FY2020-23 Program and Expenditure Integrated Plan Approval

The Mental Health Services Act (MHSA) FY2020-23 Program and Expenditure Integrated Plan was approved by the Behavioral Health Commission on May 20, 2020. MHSA Interim Director, Teresa Yu, presented a summary of the plan for the Commission, which was posted for a period of 30 days from February 6, 2020 to March 9, 2020 for public comment. A public hearing was initially scheduled on April 15, 2020 however, this Behavioral Health Commission Hearing was cancelled due to the COVID-19 pandemic. The Behavioral Health Commission reconvened on May 20, 2020 in order to provide a hearing for this plan.



The FY2020-2023 Three Year Program and Expenditure Integrated Plan showcases MHSA program outcomes achieved in Fiscal Year 2018-2019 and gives an overview of future program plans for the coming three years. **Program improvements, implementation and evaluation plans were informed by community input and feedback, pictured here.**



The Mental Health Services Act has funded innovative and traditional mental health programs and services across San Francisco since its introduction in 2005. The principles that guide the MHSA program include community collaboration, recovery & wellness, health equity, client & family member involvement, and integrated client-driven services. **Services are provided in wellness categories such as prevention & early intervention, vocational, housing, peer-to-peer, workforce development, information technology, capital facilities, recovery-oriented treatment and intensive case management services.**

The FY2020-2023 Three Year Program and Expenditure Integrated Plan will be available online shortly. For more information, please contact [MHSA@sfdph.org](mailto:MHSA@sfdph.org).



## Behavioral Health Services' Training Unit Update



**The following training materials and recordings have been uploaded to [BHS' COVID-19 public Google Drive](#)**

- Information for Opioid Treatment Programs Regarding COVID-19 | Judith Martin, MD
- Telecare for Opioid Use Disorders | David Kan, MD
- Staff Wellness (Part 1) | Nia Hamilton-Ibu, LCSW
- Telehealth for SFDPH Behavioral Health Services: Essential Elements and Tips for Treatment | Hamilton Holt, MD
- Keeping You and Your Family Safe from COVID-19 | David Pating, MD and Michelle Truong, RN
- Law and Ethics for Public Entity Healthcare Providers (with a COVID-19 Update) | Linda Garrett, JD
- Culturally-Adapted Suicide Prevention in Age of COVID-19 | Brandon Hoeflein, MS
- Staff Wellness (Part 2) with a Focus on Sleep | Nia Hamilton-Ibu, LCSW
- *Coming Soon:* Revitalizing Interrupted Lives: Treating Trauma with Acceptance and Commitment Therapy | Robyn Walser, PhD (May 29 and June 4)

**If you have feedback including future training suggestions, please contact Michelle Meier, LCSW, BHS Training and Internship Manager ([Michelle.Meier@sfdph.org](mailto:Michelle.Meier@sfdph.org))**



## June 2020 BHS Trainings

	Time	Training	Location	Trainer	CE's Offered
Wed 6/3	8:45am – 12:00pm	ASAM Criteria Training: Understanding the ASAM Criteria in the Context of the California Treatment System (ASAM - A)	<a href="https://ucla.zoom.us/meeting/register/tJkCOutpzkvH92XrnRmXgMoxr6GQymRB_DsE">https://ucla.zoom.us/meeting/register/tJkCOutpzkvH92XrnRmXgMoxr6GQymRB_DsE</a>	Grant Hovik, MA	3 CE available for LMFT, LCSW, LPCC, and drug counselors
Wed 6/3	10:00am – 11:30am	Telehealth with Traumatized Children and Adolescents	<a href="https://attendee.gotowebinar.com/register/1171987442765169163">https://attendee.gotowebinar.com/register/1171987442765169163</a>	Jennifer Wilgocki, MS, LCSW	Pending
Thu 6/4	10:00am – 12:00pm	Advanced Motivational Interviewing	<a href="https://www.eventbrite.com/e/advanced-motivational-interviewing-sfdph-hrti-online-training-tickets-106810862164">https://www.eventbrite.com/e/advanced-motivational-interviewing-sfdph-hrti-online-training-tickets-106810862164</a>	Charles Hawthorne	2 CE available for RN, LMFT, LCSW, LPCC, LEP
6/4 6/11 6/18 6/25	3:00pm – 5:00pm	Supporting & Learning about the MH Needs of LGBTQIA+ Community during COVID-19 Webinar Series	<a href="https://tinyurl.com/y7bf3cuz">https://tinyurl.com/y7bf3cuz</a>	Tuquan Harrison	N/A
Thu 6/4	1:30pm – 4:45pm	Revitalizing Interrupted Lives: Treating Trauma with ACT- Part 2	<a href="https://bit.ly/367P8b9">https://bit.ly/367P8b9</a>	Robyn Walsler, PhD	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC, CCAPP)
6/8 6/11 6/16 6/19 6/24	Consults by Appt.	Strengthening Supervision in the Midst of a Global Health Emergency	<a href="https://bit.ly/3g40hwe">https://bit.ly/3g40hwe</a>	Scott Migdole, MSW	N/A
Mon 6/8	11:00am – 12:00pm	Making Zoom Sessions Trauma-informed, Engaging, and Playful for CYF clients	<a href="https://bit.ly/3drvv0C">https://bit.ly/3drvv0C</a>	Ritchie Rubio, PhD	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC, CCAPP)
Mon 6/8	1:00pm – 3:00pm	Dismantling Drug-related Stigma	<a href="https://www.eventbrite.com/e/dismantling-drug-related-stigma-sfdph-hrti-online-training-tickets-106815770846">https://www.eventbrite.com/e/dismantling-drug-related-stigma-sfdph-hrti-online-training-tickets-106815770846</a>	Charles Hawthorne	2 CE available for RN, LMFT, LCSW, LPCC, LEP
Mon 6/8	5:00pm – 6:30pm	The State of Reentry During COVID-19	<a href="https://forms.gle/jbAJsMsNV5htfhDBA">https://forms.gle/jbAJsMsNV5htfhDBA</a>	Susan Burton Lexus Bowmen Eleanor Reed	N/A
Tue 6/9	1:30pm – 4:45pm	Improving Skills and Systems to Implement the ASAM Criteria: Part 1	<a href="https://bit.ly/36j4Gc7">https://bit.ly/36j4Gc7</a>	David Mee-Lee, MD	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC, CCAPP)
Wed 6/10	10:00am – 11:30am	Effective Suicide and Crisis Intervention Using Telehealth	<a href="https://attendee.gotowebinar.com/register/2614509315011952395">https://attendee.gotowebinar.com/register/2614509315011952395</a>	Kristin Dempsey, EdD, LMFT, LPCC	Pending
Tue 6/16	1:30pm – 4:45pm	Improving Skills and Systems to Implement the ASAM Criteria: Part 2	<a href="https://bit.ly/36j4Gc7">https://bit.ly/36j4Gc7</a>	David Mee-Lee, MD	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC, CCAPP)
Wed 6/17	10:00am – 11:30am	Self-Management Supports in a Virtual Setting	<a href="https://attendee.gotowebinar.com/register/1073161138637437707">https://attendee.gotowebinar.com/register/1073161138637437707</a>	Kellie Spencer, EBP	Pending
Thu 6/18	10:00am – 12:00pm	Safer Drug Use in the COVID-19 Era	<a href="https://www.eventbrite.com/e/safer-drug-use-in-the-covid-19-era-sfdph-hrti-online-training-tickets-106816852080">https://www.eventbrite.com/e/safer-drug-use-in-the-covid-19-era-sfdph-hrti-online-training-tickets-106816852080</a>	Charles Hawthorne	2 CE available for RN, LMFT, LCSW, LPCC, LEP
Wed 6/24	10:00am – 11:30 am	Harm Reduction in a Virtual Environment	<a href="https://attendee.gotowebinar.com/register/5655688108696225035">https://attendee.gotowebinar.com/register/5655688108696225035</a>	Eric Haram, LADC	Pending
Wed 6/24	8:45am – 12:00pm	ASAM Criteria-(B) Integrated Treatment Planning and Documentation	UCLA Zoom link to be posted on <a href="http://www.sfdph.org/training">www.sfdph.org/training</a>	Grant Hovik, MA	3 CE available for LMFTs, LCSWs, LPCCs, and drug counselors
Fri 6/26	12:00pm – 1:00 pm	Drumming for Staff Wellness	Virtual- link to be posted on <a href="http://www.sfdph.org/training">www.sfdph.org/training</a>	Sal Nunez, PhD	N/A
Tue 6/30	9:00am – 10:30am	ELS Latinx Community Wellness: Sugerencias para su Bienestar y Salud	Virtual- link to be posted on <a href="http://www.sfdph.org/training">www.sfdph.org/training</a> (Will be held in Spanish)	Sal Nunez, PhD	N/A



## From the Frontlines: Providing Behavioral Health Essential Services During the COVID-19 Pandemic

The Edgewood Therapeutic Behavioral Services (TBS) program serves the most vulnerable populations by providing in home intensive therapeutic behavioral services. When the shelter in place started, the addition of the Telehealth option to provide services challenged us as a team to grow and get creative. We have several very young clients (4-6 years old). How would we get the little ones to sit still in front of a screen?



It occurred to us that Sesame Street has been engaging young children in social emotional learning through a screen for over 40 years. With Kermit serving as inspiration, coaches engaged our youngest clients by making it fun with interventions like picking up a guitar and playing/teaching songs about feelings and copings skills. Teaching “sharing” to a child who struggles with physical aggression by asking him to share his snack. Imagine a tiny four-year old’s hand holding up a cookie to the screen offering to share and the coach taking the imaginary cookie and enjoying it with the gusto of Cookie Monster (positive reinforcement accomplished!).

With the older kids, we found inspiration from places they already like to go on their devices, such as YouTube. Coaches created “challenges” for clients to complete during the week which involved trying new coping skills, practicing them IRL and reporting back. Some coaches shared their screen on Zoom and went on “outings” connecting their clients to soothing places to take space, such as the live jellyfish feed from Monterey Bay Aquarium and museum tours. The clients we were most surprised about were the clients that had been historically resistant to in person services but responded very positively to Telehealth. The sessions through a screen actually allowed enough of a buffer for some clients with attachment challenges to feel safer, open up, and build trust.

These are just a few examples of how the TBS team has been able to meet the moment. I’m hopeful and excited to see what innovations and new tools these challenging times will bring.



For more information please contact  
Angela Buelow at [AngelaB@edgewood.org](mailto:AngelaB@edgewood.org).

*\*Please consider submitting your “From the Frontlines” stories to [alicia.st-andrews@sfdph.org](mailto:alicia.st-andrews@sfdph.org) about how services have changed as a result of COVID-19, including the adversities and resilience experienced by clients and staff who are adapting and responding to this evolving crisis.*

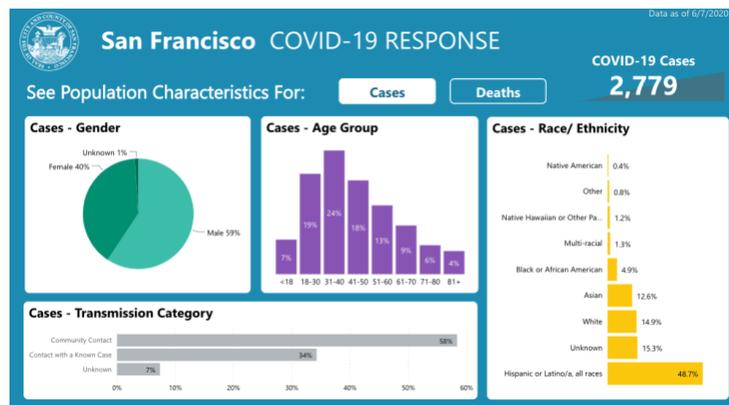


## Staff Shout Out to Dr. Tom Bleecker

Dr. Tom Bleecker is the Assistant Director of the BHS Quality Management Research and Evaluation Unit. As a clinical and research psychologist, Tom has led program evaluation studies and outcomes management over the 18 years he's been with BHS. During COVID-19, his expertise in developing data dashboards for management decision making has been drawn on in two separate deployments. He was first deployed for 4 weeks to the Epidemiology and Surveillance Branch, where he helped develop the [SF Data Tracker](#) dashboard displaying the metrics the city uses to monitor the number of COVID-19 tests and other key metrics. His tremendous data skills were then tapped by the Containment Branch, where he has been deployed for the past 4 weeks helping to develop a dashboard for tracking referrals and bed use at the Isolation and Quarantine sites.



While still deployed, Tom has developed a Tableau dashboard for BHS leadership to monitor trends in service utilization and numbers of clients served (in person and via telehealth/phone) prior to and during the COVID-19 emergency. These data have been instrumental in helping BHS leaders plan for the next phase of system recovery. Tom's excellent data skills are matched by his humility, kindness and genuine desire to be of service to BHS and the clients we serve.



**Thank you, Tom, for all you do to enable leaders to have accessible data on which to base their decisions during this uncertain time!**



## Mental Health Leader Draws on His Immigrant Experience to Serve California’s Diverse Communities

Imo Momoh, our former Director of BHS Office of Equity, Social Justice, and Multicultural Education (OESM), recently transferred to Alameda County Behavioral Health Care Services to serve as Deputy Director, and is featured in [California State of Mind](#).



Here is an excerpt:

*Imo Momoh was just a teenager when he came to the United States from Nigeria to attend college and join his older sister, a student at Golden Gate University in San Francisco. Three months later, in the Fall of 2000, his sister left, and Imo was on his own. “It was hard,” he says. “I was by myself...”*

*...He stuck it out through those tough times, and has used those experiences — and the trials of coming from another country and culture — to create a well of empathy and understanding that has informed his work as a leader in community mental health programs up and down the state.*

[Full story here.](#)





## Welcome to the Newest Member of the BHS Family!

### *Naomi Wahyudi Lara*

May 29, 2020, 8:51am

6 pounds, 6 ounces

Daughter of Kristalia Wahyudi Williams Lara  
BHS Office of Equity, Social Justice, and Multicultural Education



Naomi is the first born of Borys Edwardo Lara and Kristalia Wahyudi Williams Lara.

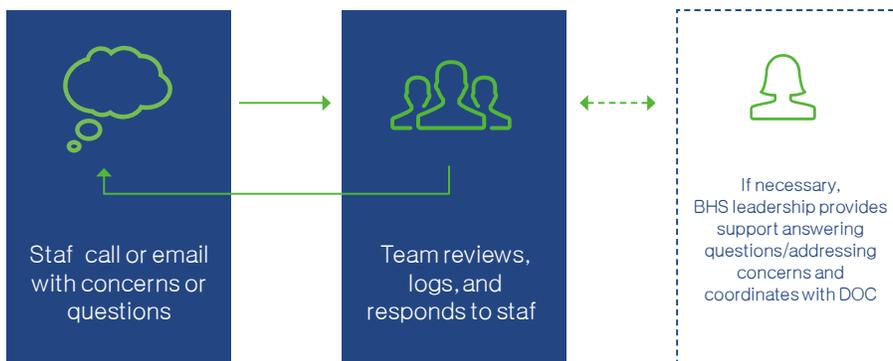
Naomi is Salvadorian, Chinese, Indonesian, and Black/African American.  
She is strong, healthy and loves music.



## BHS Civil Service and Contractor Staff

Do you have general questions about being a Disaster Service Worker (DSW) or are you currently deployed and have concerns you need help getting answers for?

The BHS Clearinghouse team is available to support you regarding your deployment needs.



415-255-3427



bhsclearinghouse@sfdph.org



San Francisco Health Network  
Behavioral Health Services

Version 5/1/20