



SAN MATEO COUNTY HEALTH

**SAN MATEO
MEDICAL CENTER**

BOARD OF DIRECTORS MEETING

Monday, November 4, 2024
8:00 AM – 10:00 AM

Atrium Conference Room
2000 Alameda de las Pulgas
San Mateo, CA 94403



AGENDA

Board of Directors	Monday, November 4, 2024	8:00 AM
--------------------	--------------------------	---------

Atrium Conference Room, 2000 Alameda del las Pulgas, San Mateo, CA 94403

This meeting of the San Mateo Medical Center Board of Directors will be held in-person in the Atrium Conference Room, 2000 Alameda de las Pulgas, San Mateo, CA. Remote participation of this meeting will not be available. To observe or participate in the meeting, please attend in-person.

*Written public comments may be emailed to mlee@smcgov.org by 9:00 AM on the business day before the meeting and such written comments should indicate the specific agenda item on which you are commenting.

A. CALL TO ORDER

B. CLOSED SESSION

Items Requiring Action

- | | |
|---------------------------------------|----------------------|
| 1. Medical Staff Credentialing Report | Dr. Frank Trinh |
| 2. Quality Report | Dr. Scott Oesterling |

Informational Items

- | | |
|--------------------------------|-----------------|
| 3. Medical Executive Committee | Dr. Frank Trinh |
|--------------------------------|-----------------|

C. REPORT OUT OF CLOSED SESSION

D. PUBLIC COMMENT

Persons wishing to address items on the agenda and not on the agenda.

E. FOUNDATION REPORT

John Jurow

F. CONSENT AGENDA

Approval of:

1. October 7, 2024 SMMC Board Minutes
2. Diversity, Equity, and Inclusion Report

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Frank Trinh

H. ADMINISTRATION REPORTS

- 1. Compliance Update Gabriela Behn Verbal
- 2. Financial Report Enitan Adesanya..... TAB 2
- 3. CEO Report Dr. CJ Kunnappilly..... TAB 2

I. COUNTY HEALTH CHIEF REPORT

- County Health Snapshot Louise Rogers..... TAB 2

J. COUNTY EXECUTIVE OFFICER REPORT

Mike Callagy

K. BOARD OF SUPERVISOR REPORT

Supervisor David Canepa

L. ADJOURNMENT

ADA Requests

Individuals who require special assistance or a disability-related modification or accommodation to participate in this meeting, or who have a disability and wish to request an alternative format for the meeting, should contact Michelle Lee, at mlee@smcgov.org, as early as possible but not later than 9:00 AM on the business day before the meeting. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting, the materials related to it, and your ability to comment.

###

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES

Monday, October 7, 2024

Atrium Conference Room, 2000 Alameda de las Pulgas, San Mateo, CA

Board Members Present

Supervisor David Canepa
Mike Callagy
Louise Rogers
Dr. CJ Kunnappilly
Dr. Frank Trinh
Dr. Scott Oesterling
Judith Guerrero

Staff Present

Carlton Mills	Priscilla Romero	Janette Gomez
Enitan Adesanya	Jennifer Stalzer	Jacki Rigoni
Dr. Alpa Sanghavi	Robert Blake	
Dr. Yousef Turshani	Roberta Larcina	
Emily Weaver	Chad Below	
Gabriela Behn	Alexandra Hoppis	

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Canepa called the meeting to order at 8:00 AM and the Board adjourned to Closed Session.	
Reconvene to Open Session	The meeting was reconvened at 8:16 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for September 30, 2024. QIC Minutes from July 23, 2024 and August 27, 2024. Medical Executive Committee Minutes from August 13, 2024 and September 10, 2024.	Jennifer Stalzer reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report John Jurow	None	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from August 5, 2024.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Frank Trinh	Dr. Trinh announced Dr. Bryan Gescuk' s retirement and Dr. Michael Trinidad's departure. He also updated the credential report, including new additions to the medical staff.	FYI

	<p>The surgeries discussed during the August and September meetings included updates on staffing, potential recruitment efforts with UCSF and Stanford, and future fellows. He also addressed initiatives related to the provider wellness survey. Additionally, there were updates on the implementation of EPIC and the ongoing hospital construction.</p>	
<p>Laboratory Chad Below, Clinical Services Manager</p>	<p>The San Mateo Medical Center laboratory offers various services, including chemistry, hematology/coagulation, pathology, microbiology/molecular testing, point-of-care testing, serology, and a blood bank.</p> <p>In FY24, the laboratory performed 1.93 million tests, an increase from 1.65 million in FY23. Chemistry tests accounted for 56% of the total labs, covering analyses such as glucose, electrolytes, thyroid, and liver function tests.</p> <p>The department employs forty-five staff members with diverse skill sets, including clinical laboratory scientists, medical laboratory technicians, and lab assistants/phlebotomists. Approximately 50% of the staff are clinical laboratory scientists (CLS). Currently, laboratories nationwide are facing staff shortages due to an aging workforce, increased demand for laboratory services, and vacancy rates that surpass the number of graduates in medical laboratory science (MLS) and medical laboratory technology (MLT). To address these challenges, the laboratory has invested in automation to free up CLS time. Last year, they purchased an automated blood bank instrument for quicker testing. They also employ contract staff and create a positive work environment to retain employees, including some contract travelers.</p> <p>Regarding quality indicators, the lab monitors blood culture contamination rates during tests for sepsis. This summer, the specimen rejection rate was 0%.</p> <p>The laboratory has faced challenges related to supply chain disruptions, including a worldwide shortage of blood culture bottles in July 2024. Although the San Mateo Medical Center struggled initially, they contacted peers and other organizations for solutions. By implementing various strategies, the organization successfully reduced blood culture bottle usage by 75%, all while maintaining patient care standards.</p> <p>Since 2020, the lab distribution chain has experienced significant disruptions. The aging equipment is another concern, as lab instruments typically have a lifespan of about eight years. A replacement is expected in March 2025. Despite these obstacles, the department has stabilized staffing and improved workflows to enhance testing efficiency and optimize the EPIC system.</p> <p>Successes in the department include reducing blood culture contamination by approximately 2.5%, now averaging less than 1%. This achievement contributes to financial savings by decreasing false positives and minimizing potential patient harm.</p>	<p>FYI</p>

	<p>Key Challenges: -Aging equipment: Lab instruments are due for replacement in March 2025.</p> <p>Opportunities for the Department: - Stabilized staffing - Improved workflows for efficient testing - Lab Clinical Laboratory Improvement Act (CLIA) reaccreditation inspection scheduled for Q2 2025 - EPIC optimization: Understanding how to best use EPIC for improved efficiencies and quality metrics is crucial.</p>	
<p>CARE Court Alexandra Hoppis, Clinical Services Manager</p>	<p>CARE Court is a new state law that provides community-based Behavioral Health Services and support through a civil court process. Eligible participants are connected to a CARE agreement or plan, and this pertains to adults living with untreated schizophrenia spectrum or other psychotic disorders. Care Court launched in San Mateo County on July 1, 2024, and will be available statewide by December 2024.</p> <p>Care Court is a referral process made via written petition to the Court, and Behavioral Health and Recovery Services (BHRS), CARE Court accepts direct referrals. To be eligible, the diagnoses are schizophrenia spectrum disorders, and other psychotic disorders, such as brief psychotic disorder, delusional disorder, schizotypal personality disorder, substance/medication-induced psychotic disorder, Catatonia associated with another mental disorder, and unspecified Catatonia.</p> <p>There are multiple paths to receive services through CARE Court, which include: Voluntary engagement; CARE agreement; CARE plan</p> <p>After a respondent is petitioned, the Court later designates BHRS as a petitioner and continues the remainder of the court process. The state requires a large amount of data on CARE respondents. As of July 1, 2024, CARE Court has received twenty-three referrals to BHRS, eight of which were eligible, and eleven petitions. They had their first CARE Court hearing on August 27. Supportive Services provided through BHRS: Mental health and alcohol and other drug treatment; Case management; and Housing</p> <p>Highlights of CARE: CARE is an outpatient treatment, it cannot force medication on participants, it does not guarantee housing for the homeless, it's not a criminal court, services will continue after graduation, and CARE is not an emergency response. Individuals get legal representation and a Care supporter who acts as an advocate. BHRS accepts direct referrals and the community can reach out.</p>	<p>FYI</p>
<p>Financial Report Enitan Adesanya, interim CFO</p>	<p>The September FY 23/24 financial report was included in the Board packet and Enitan answered questions from the Board.</p> <p>Chief of Health Louise Rogers indicated that ACE membership has declined due to the expansion of Medicaid. The current ACE program employs various funding sources to support its initiatives effectively.</p>	<p>FYI</p>

	Starting in January, Kaiser will launch a comprehensive care program aimed at individuals who do not qualify for medical assistance despite having a high income.	
CEO Report Dr. CJ Kunnappilly	<p>Dr. Kunnappilly informed the Board they have been preparing for EPIC's go-live on November 2nd, 2024. Although the retail pharmacy will experience some delays, all major functionalities are scheduled to launch.</p> <p>At midnight on November 2, the old system will go offline, marking the final transition to EPIC. The goal is for the system to be operational by 4 a.m. on Monday, November 4. This transition will primarily occur at the hospital, and weekend staff will be on hand to identify any potential challenges. By November 4, the system should be fully up and running.</p> <p>During the 30-day readiness event, the EPIC Project Lead praised the Medical Center for successfully integrating their improvement system. The design involved collaboration between various teams and staff, an approach that is not commonly seen nationwide. They noted that this is the first time they have witnessed such an organized effort between improvement work and implementation.</p>	FYI
County Health Chief Report Louise Rogers	<p>Through county efforts, forty-six additional facility beds have been added to Hopkins Manor, an assisted living center in Redwood City. In collaboration with operators, these beds have been upgraded on-site to accommodate county clients, primarily those facing complex conservatorships, homelessness, medical and behavioral issues, and addiction.</p> <p>Furthermore, progress is being made on the Cordilleras project. The state and Fire Marshal are nearing approval for the move in of patients, which is expected to occur in November 2024.</p>	FYI
County Executive Officer Mike Callagy	As the Chief of Health Louise Rogers's retirement approaches, the County Executive Officer has provided an update on the applicant pool for The Chief of Health position. There were initially one hundred and four applicants. The Human Resources department has narrowed it down to six qualified candidates. The goal is to have a new Chief of Health in place by January 2025 to work alongside Louise Rogers and assist with the transition.	FYI
Board of Supervisors Supervisor David Canepa	No report.	FYI

Supervisor Canepa adjourned the meeting at 9:12 AM. The next Board meeting will be held on November 7, 2024.

Minutes recorded by:
Janette Gomez

Minutes approved by:
Dr. Chester Kunnappilly, Chief Executive Officer

Office of Diversity, Equity, and Inclusion

November 2024 Board Presentation

The blueprint for San Mateo County Medical Center’s continued journey to operationalize equity has been driven by a variety of considerations, including expectations of regulatory bodies such as Centers for Medicare and Medicaid Services and The Joint Commission. Both governing bodies have similar equity related requirements which are similarly structured and require periodic updates to stakeholders, one being the hospital board for each respective system. The requirements for each body compared against our existing equity blueprint will be the focus of this report.

The Joint Commission

The Joint Commission requires healthcare delivery systems to have processes around provision of care, but in this past year has made an optional certification program for systems who are interested. The equity blueprint that has been previously presented to the Board has been created and modified to meet the requirements of the equity certification. The Joint Commission Equity Certification has domains healthcare delivery systems must meet and they are reflected below:

Certification Domains



Office of Diversity, Equity, and Inclusion

Centers for Medicare and Medicaid Services (CMS)

CMS also has a framework for health equity and their priorities outline systems focus on five priorities to be in alignment. The priorities are below:

- 1) Data Collection.
- 2) Assessment of the cause of disparities within CMS programs/address inequities in policies and operations to close gaps.
- 3) Build capacity of health care organizations and the workforce to reduce health and health care disparities.
- 4) Advancement of language access, health literacy, and the provision of culturally tailored services.
- 5) increase all forms of accessibility to health care services and coverage.

CMS also has a specific requirement for inpatient units that is being prioritized and the domains and requirements for inpatient units are below:

Domain	Required Elements
Domain 1: Equity is a Strategic Priority	<ul style="list-style-type: none"> • Strategic plan identifies priority populations who currently experience health disparities. • Strategic plan identifies healthcare equity goals and discrete action steps dedicated to achieving our equity goals. • Strategic plan outlines specific resources which have been dedicated to achieving our equity goals. • Strategic plan describes our approach for engaging key stakeholders, such as community based organizations.
Domain 2: Data Collection	<ul style="list-style-type: none"> • Health care delivery systems must collect demographic information and/or social determinants of health information on majority of patients. • Health care delivery systems must offer training for staff in culturally sensitive

Office of Diversity, Equity, and Inclusion

	<p>collection of demographic and/or social determinant of health information.</p> <ul style="list-style-type: none"> • Health care delivery systems must input demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified EHR technology.
Domain 3: Data Analysis	<ul style="list-style-type: none"> • Health care delivery systems must stratify key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information on hospital performance dashboards.
Domain 4: Quality Improvement	<ul style="list-style-type: none"> • Health care delivery systems must participate in local, regional, or national quality improvement activities focused on reducing health disparities.
Domain 5: Leadership Engagement	<ul style="list-style-type: none"> • Senior leadership of healthcare delivery systems, including chief executives and the entire hospital board of trustees, annually review the strategic plan for achieving health equity. • Senior leadership, including chief executives and the entire hospital board of trustees, annually reviews key performance indicators stratified by demographic and/or social factors.

Office of Diversity, Equity, and Inclusion

Updates

Health Care Disparity Elimination:

With Integr8 Health on the horizon, two new social work students have been identified and are currently learning on inpatient units. In addition to learning processes to support with coordination of care in inpatient units, in January 2025 they will resume targeted outreach for depression screening and hypertension control.

Provision of Care:

Patient – Provider Communication

The Red Label Certification Program is SMMC's effort to ensure staff who support in care appointments via interpretation have understanding of best practices. Since August 2023, when we initially revisited this program, 74 members of the workforce are certified to support communication in care encounters.

Sexual Orientation/Gender Identity (SOGI) Data Collection

In preparation for Integr8 Health, a team comprised of staff from all over the system met for a two-day improvement event geared towards identifying opportunities to strengthen how SOGI data is collected across the system. Interventions identified to support this effort include improving workflows used by care teams and seeking training opportunities to support with the workforce's ability to provide responsive care to our patient population. These improvements are currently being piloted in the Daly City Clinic, with hopes to coordinate training, including technical assistance and support. This team will be meeting again in early 2025 to assess effectiveness of improvements and to assess if these new processes are ready to be shared and implemented with other departments and clinics.

Conclusion

San Mateo Medical Center has continued to make progress towards meeting regulatory requirements outlined by The Joint Commission and The Centers for Medicare and Medicaid Services. There will



Office of Diversity, Equity, and Inclusion

continue to be a variety of updates provided to the Board, including highlighted progress and learnings.

Kacie Patton, MSSW

ADMINISTRATION REPORTS

September Financial Performance Update to SMMC Board November 4th, 2024



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

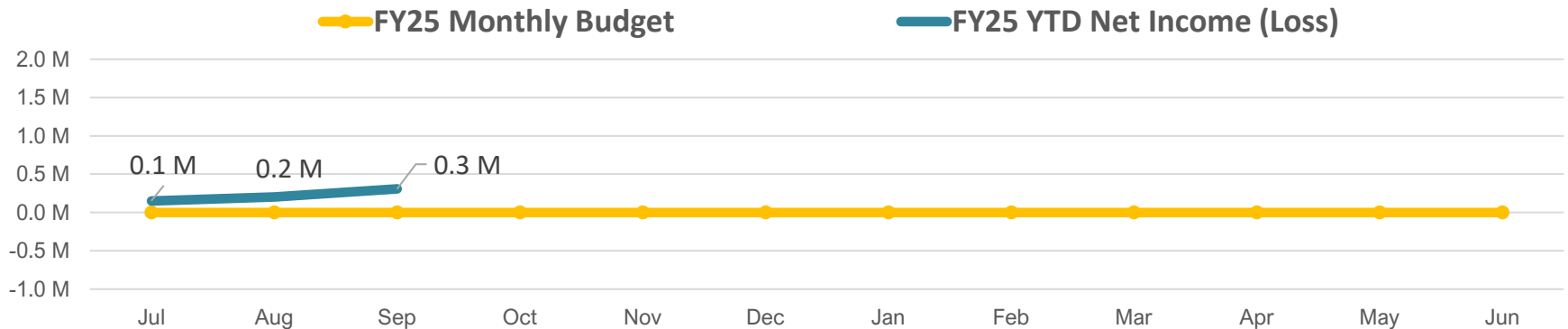
Agenda

1. Operating Results Summary
2. Cash Position and Forecast
3. Patient Accounts Receivable Key Performance
4. Appendix

Operating Results Summary

Statement of Operations

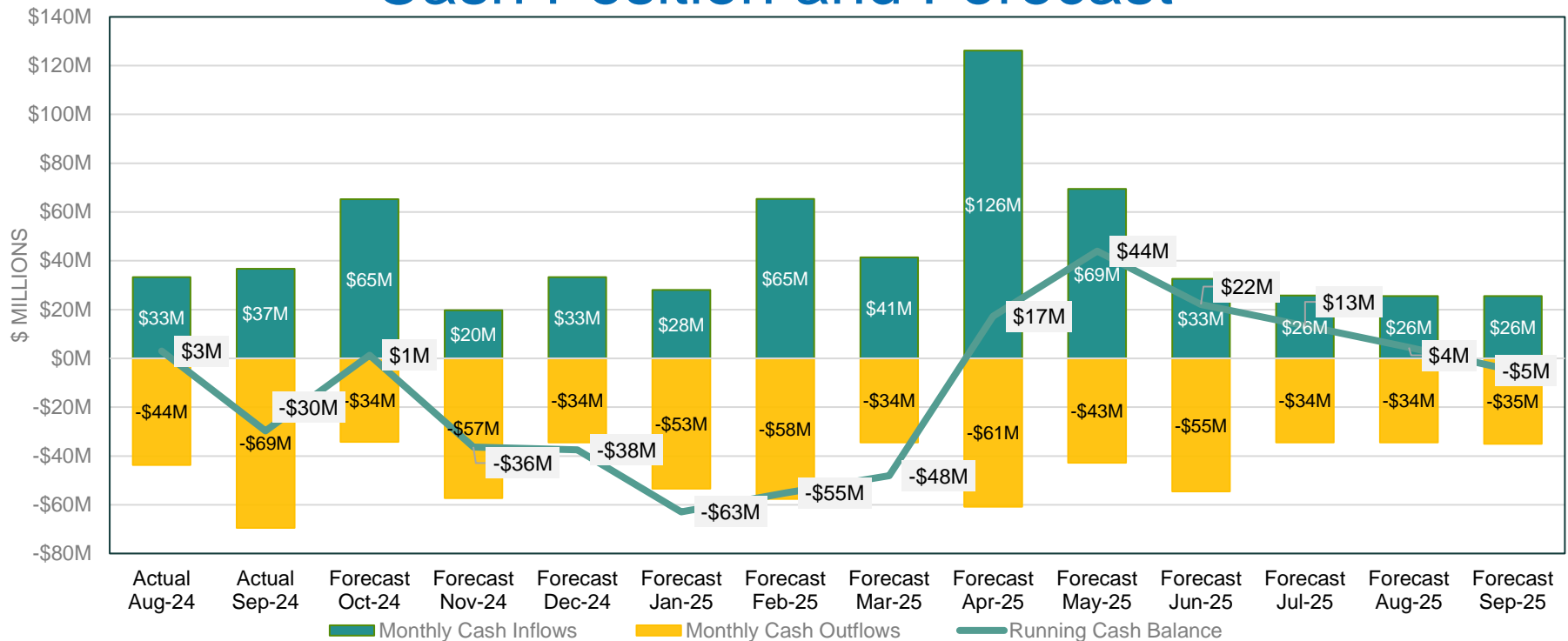
September	Year-to-Date
\$105K	\$307K



Key budget performance areas

- We are ahead of budget for the first quarter of the year
- **FTE & Labor cost** – Staff count was 4% favorable. Labor cost was favorable by \$2.3M and \$4.8M year to date
- **Other fees/services** was unfavorable by \$1.5M due to increased software and IT related expenses.

Cash Position and Forecast



Cash flow challenges & opportunities

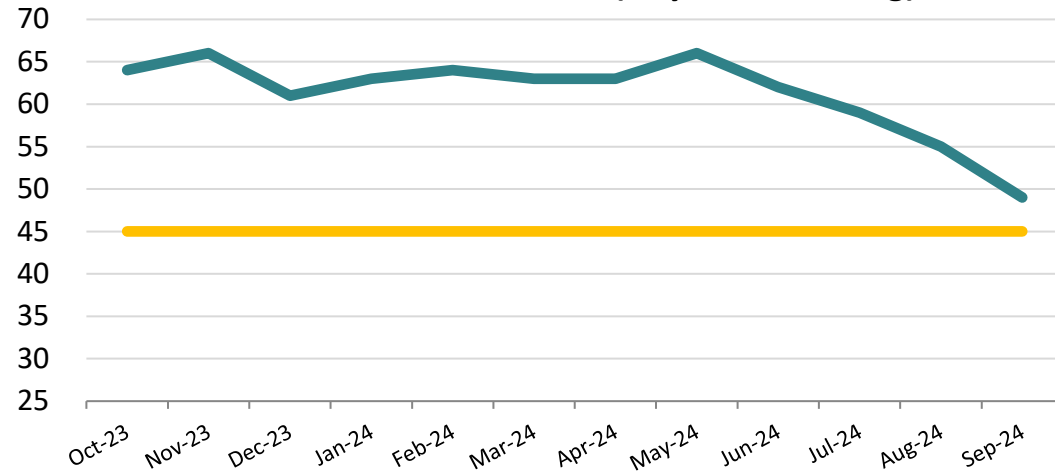
- Cash inflows forecasted to decrease through January
- Projections indicate our highest use of the \$80M County line of credit is in Q4, through January 2025
- Efforts to manage the risk of maximizing the use of the County line of credit
 - Focus on patient receivable cash collection is yielding positive results
 - Managing timing of cash disbursements to better align with timing of cash inflows.

Patient Accounts Receivable Key Performance

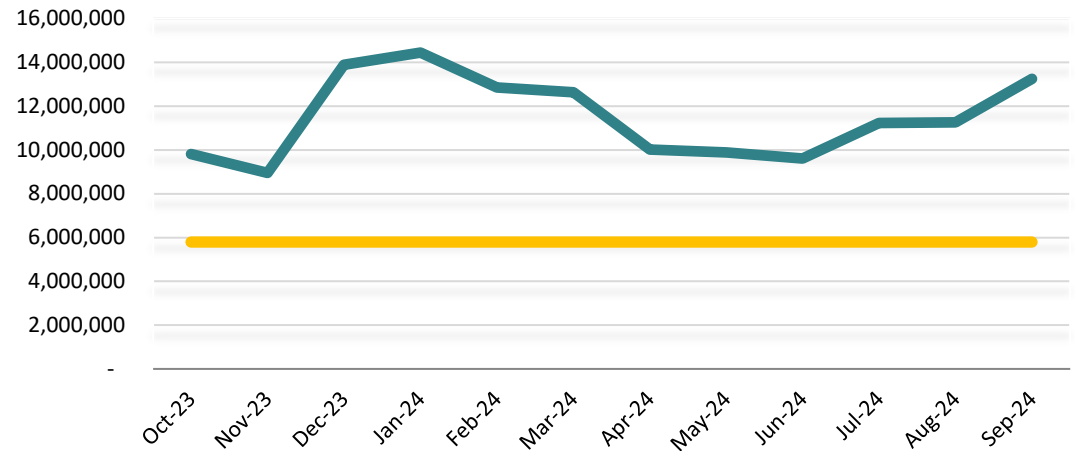
Patient Receivable Performance

- Outstanding receivable has dropped from 55 to 49 days in the past one year
 - Resulting in increased cash inflow
- There's an uptick in unbilled receivables
 - Partnership with HPSM to clean up patient records resulting in increased patient billing opportunity.

Patient Account Receivable (Days Outstanding)



Unbilled Patient Accounts

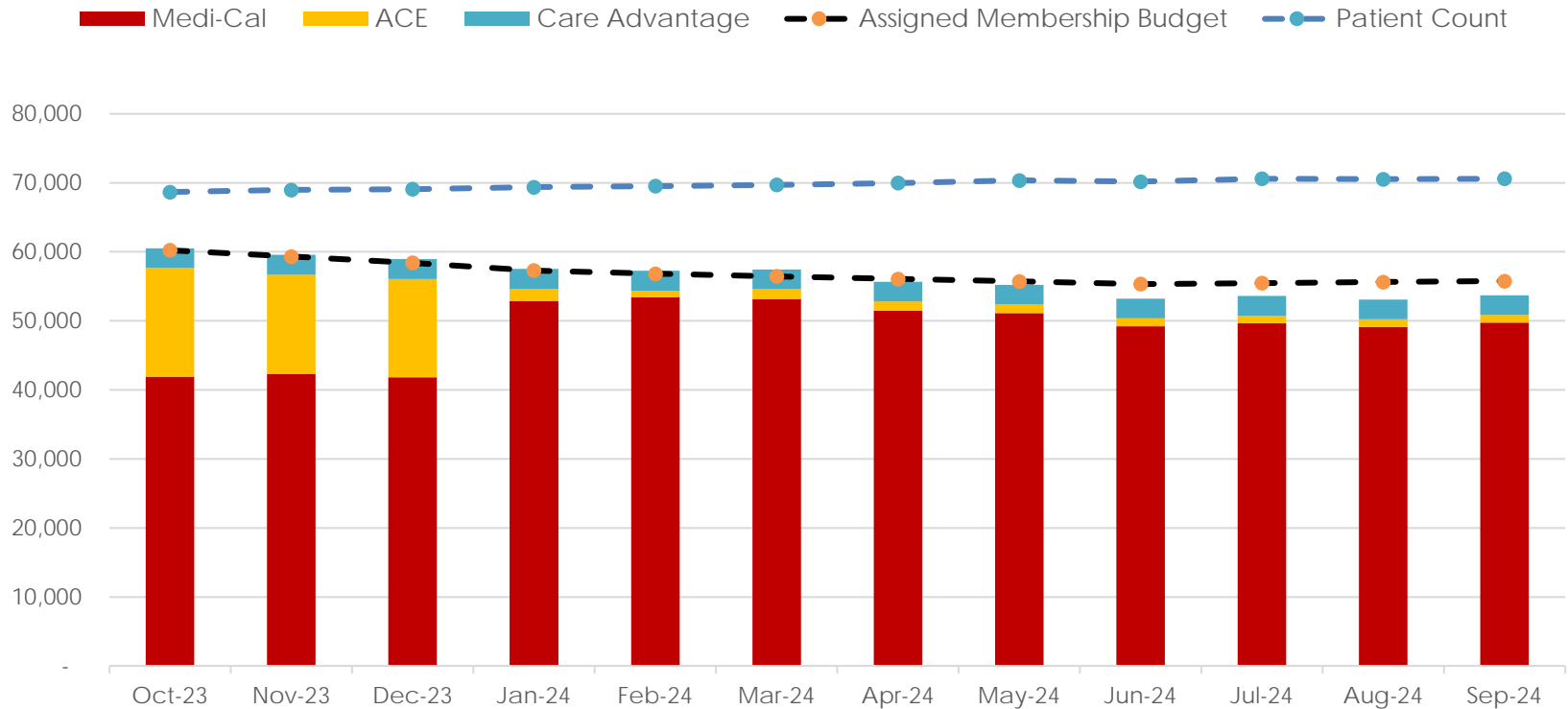


Appendix



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

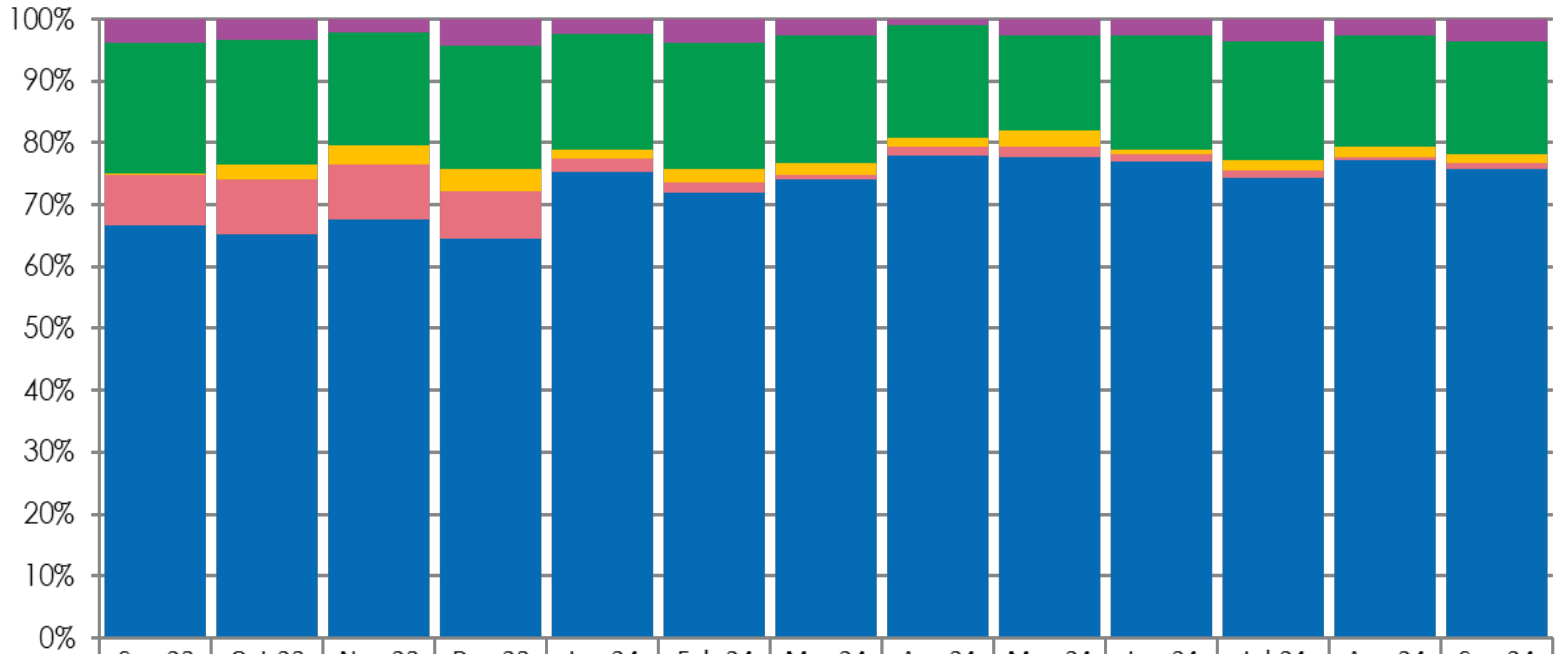
Managed Care Membership Trend



2024 Highlights

- Assigned membership mix has stabilized since July
- Patient count also appears to be stabilizing after a period of increases

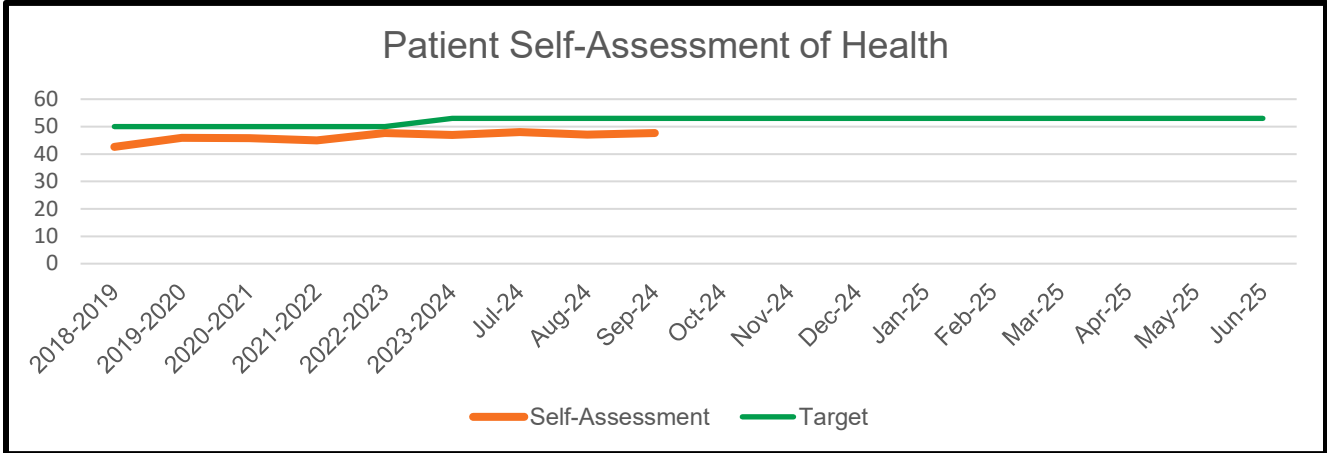
Payer Mix



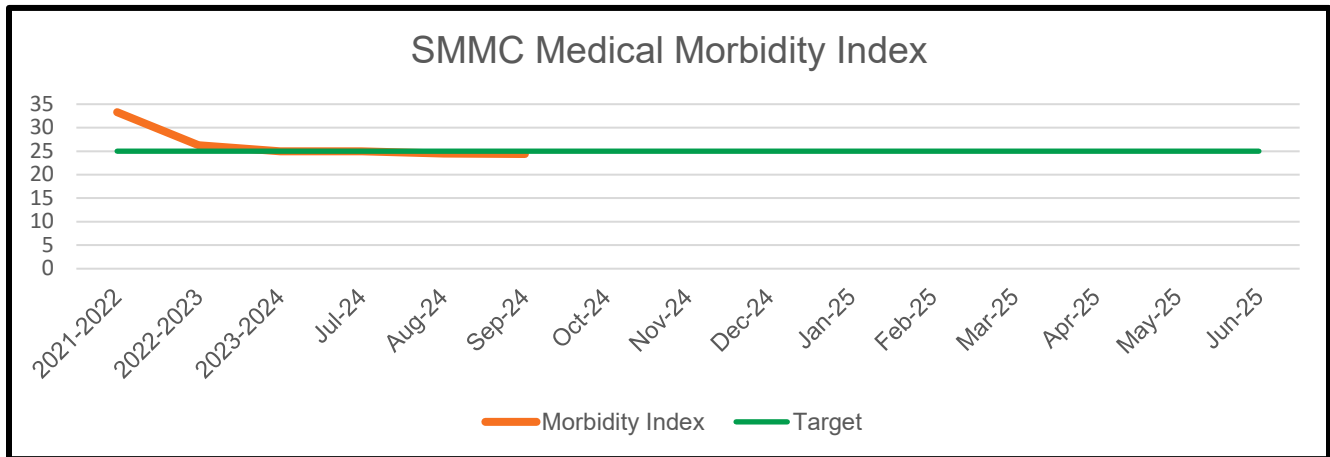
	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24
Other	3.8%	3.4%	2.1%	4.4%	2.4%	3.9%	2.7%	1.0%	2.7%	2.7%	3.6%	2.7%	3.6%
Medicare	21.1%	20.2%	18.3%	19.9%	18.7%	20.4%	20.7%	18.2%	15.2%	18.4%	19.2%	17.9%	18.2%
Self Pay	0.2%	2.2%	3.2%	3.4%	1.5%	2.1%	1.7%	1.6%	2.8%	0.8%	1.7%	1.6%	1.4%
ACE/ACE County	8.3%	9.0%	8.9%	7.8%	1.9%	1.6%	0.9%	1.4%	1.5%	1.2%	1.1%	0.7%	1.0%
Medi-Cal	66.6%	65.2%	67.5%	64.4%	75.4%	72.0%	74.0%	77.9%	77.7%	76.9%	74.4%	77.1%	75.8%

CEO Report

November 2024



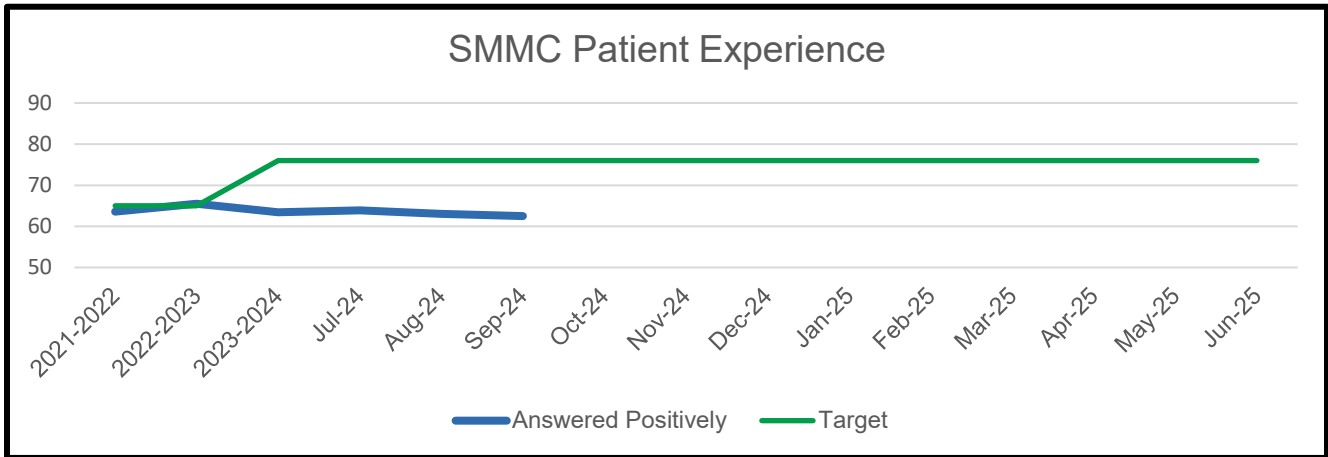
Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. **Higher is better.**



Medical Morbidity Index: This represents the percentage of SMMC patients who meet one or more of the following criteria: Inadequately Controlled Diabetes, Inadequately Controlled Hypertension, Obesity, or a Positive Depression Screen. **Lower is better.**



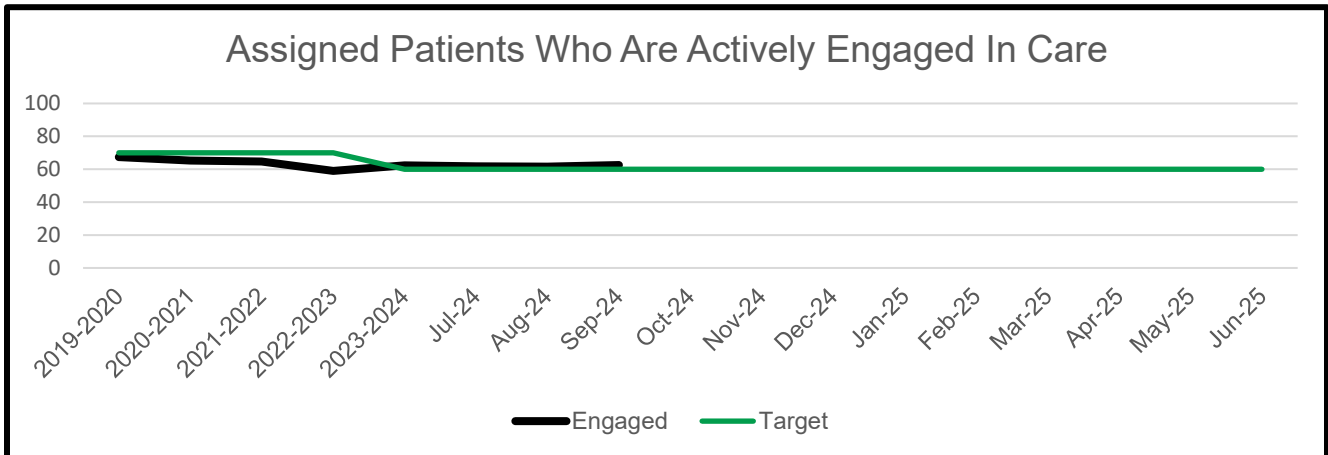
Patient Experience



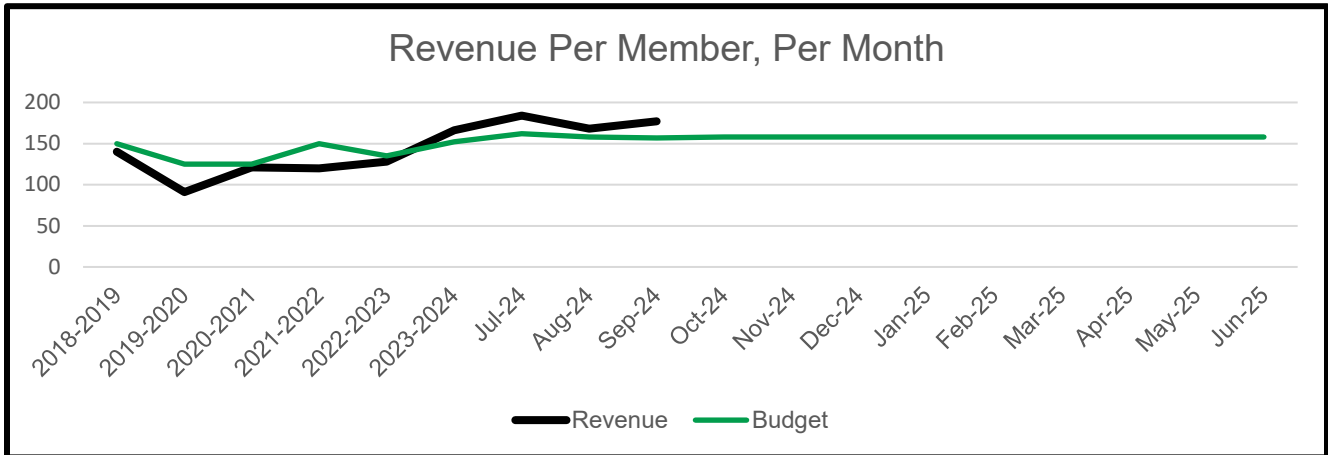
Patient Experience: Percentage of patients who answered affirmatively to the patient experience survey question: “Did the staff work together to meet your needs?” **Higher is better.**



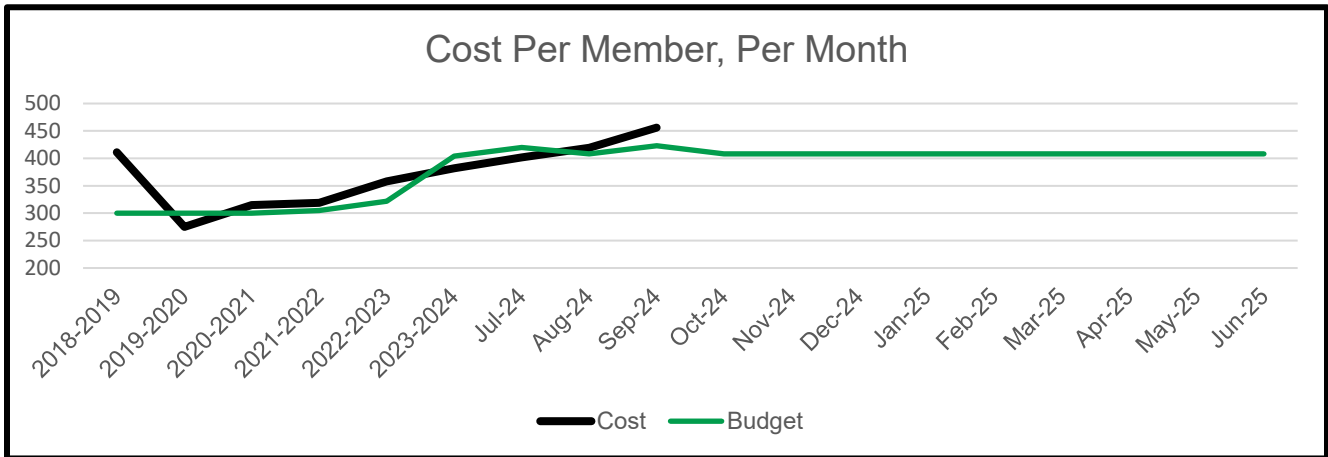
Access to Care



Assigned and Engaged: Percentage of patients assigned to SMMC by the Health Plan of San Mateo who are actively engaged in Care. **Higher is better.**

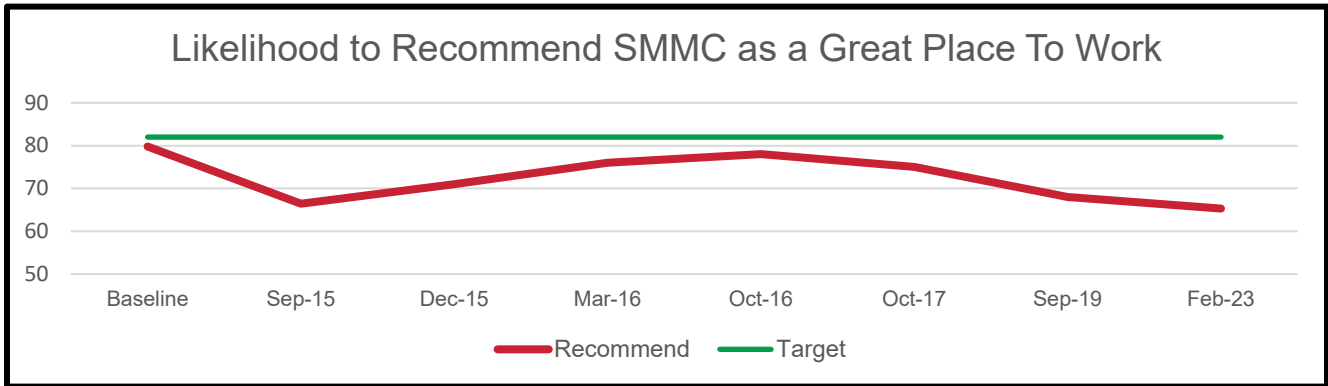


Revenue Per Member, Per Month: Total patient revenue divided by total number of assigned members. **Higher is better.**

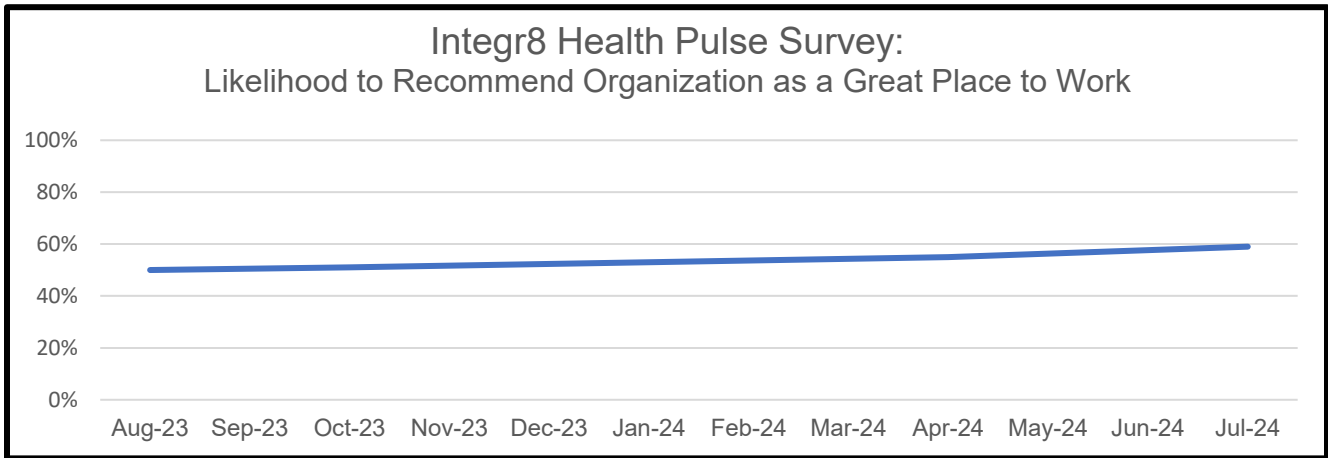


Cost Per Member, Per Month: Total cost divided by total number of assigned members. **Lower is better.**

 Staff Engagement



Likelihood to Recommend SMMC: Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. *-Awaiting next County survey.* **Higher is better.**



SMMC Integr8 Health Pulse Survey: As part of Integr8 Health (SMC Health's Epic implementation), we are performing quarterly pulse surveys to evaluate staff engagement during the effort. This graph represents the percentage of staff who agree or strongly agree that they would recommend the organization as a great place to work. **Higher is better.**

Strategic Updates, Recognitions & Awards



Dr. Rakhi Singh (seated to the right of podium) participating in a panel discussion at the County Health Executives Association of California

Dr. Rakhi Singh Shares Food Insecurity Work at California Conference

The County Health Executives Association of California (CHEAC) invited Dr. Rakhi Singh, Supervising Physician at Fair Oaks Health Center, to speak at their annual meeting October 2-4. Dr. Singh was part of a breakout session panel sharing how SMMC has addressed patient food insecurity through strategic partnerships.

Joining Rakhi on the panel were Justin Watkins, Senior Community Health Planner in Public Health, Policy and Planning, Talie Cloud, Population Health Program Specialist at the Health Plan of San Mateo, and Katie Ettman, Deputy Director of Medical Supportive Food and Nutrition.

Congratulations and thank you to Dr. Singh and all our partners for presenting this great work.

Integr8 Health Update

It has been a busy month as we remain on target for a successful Phase I implementation of Epic on 11/2/2024. We had our final Go Live Readiness Assessment (GLRA) on October 2nd. While there continued to be identified areas of concern, they all had solid action plans and enthusiasm across the team was high.

This month has been all about “getting ready.” Within the “Technical Dress Rehearsals”, equipment, new and old, was tested to ensure it was ready for go-live. Users have been moving through the final stages of training as all users will need to complete training and pass necessary assessments before they can be allowed to access the system.

Unit and role-specific “Day in the Life” activities have rolled out giving staff specific scenarios and instructions to practice.

On October 19th and 20th (Saturday and Sunday), we held our “Appointment Conversion Weekend.” Over 100 volunteers supported by various leaders, HIT specialists, contracted support and Epic staff, convened on the 5th floor of 455 County Center for a weekend of collaboration. The focus was scheduled appointments beyond November 2nd. The vast majority of these appointments (over 90%) electronically transferred from legacy systems to Epic, but those that did not needed to be manually scheduled in Epic. In addition, this was an opportunity to practice the eligibility and pre-registration processes. The team was also able to input orders for diagnostic imaging appointments scheduled for

after November 2nd. This was a great opportunity for our staff to practice their skills while surrounded by colleagues and support staff. Enthusiasm and camaraderie were extremely high as people not only learned but also laughed and joked together. It was a highly productive weekend and here are a few key statistics:

- Scheduled 3,236 appointments
- Pre-registered 1,427 patients
- Placed 2,080 orders
- Created 1,505 financial assistance cases

Thank you to everyone who made this a successful event.

As we approach our Go-Live, there is appropriate nervousness, but the level of excitement is palpable. We look forward to sharing our success with the board as we progress.

###



October 2024

SNAPSHOT: **San Mateo County Health**

TO: SMMC Board Members | FROM: Louise F. Rogers, Chief

INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	1,258 (September)	-1.6%	-91.9%
SMMC Emergency Department Visits	3,484 (September)	-0.6%	9.8%

Disaster Service Workers Train for Mass Casualty Event

Staff from nearly every County Health division came together in October for an exercise to test the response to a mass casualty event. The **state’s Disaster Service Worker program** calls for all public employees to serve in major incidents, with preparedness and training managed locally. Emergency Medical Services (EMS), which runs the Health Emergency Preparedness program, organized an activation of a Department Operations Center to coordinate gathering information and responding to a simulated bioterrorism event in the Bay Area, with many local casualties. The exercise enabled staff to become more familiar with the Incident Command System, which are the workflows followed by first responders and emergency managers that allow agencies to coordinate. County Health staff practiced public communications, the distribution of personal protective equipment (PPE) to responders, deploying medical countermeasures and setting up points of distribution to the public. EMS Director Travis Kusman said that the external observers evaluating the exercise **were impressed with** “the collaboration, poise, professionalism and seriousness with which the entire group that participated took on the challenge.”



California Conference Highlights Food Insecurity Work

The County Health Executives Association of California (CHEAC) invited County Health staff to speak at their annual meeting October 2-4 in a breakout session about how San Mateo Medical Center and other programs address patient food insecurity through strategic partnerships such as screening for food insecurity and linking patients to resources. Presenting were Dr. Rakhi Singh, supervising physician at Fair Oaks Health Center; Justin Watkins, senior community health planner for Public Health, Policy and

Planning; Talie Cloud, population health program specialist at the Health Plan of San Mateo; and Katie Ettman, deputy director of Medical Supportive Food and Nutrition at SMMC.

BHRS Office of Consumer and Family Affairs Celebrates 20th Anniversary



Behavioral Health and Recovery Services (BHRS) staff and partners celebrated the 20th anniversary of the Office of Consumer and Family Affairs (OCFA) and Global Peer Support Appreciation Day on October 17 at the San Mateo Garden Center. Led by OCFA Director Jana Spalding, the office is entirely staffed by people who have lived experience as consumers and family members. Twenty years after its founding, valuing lived experience and peer roles is now part of the language and culture of BHRS. The team's responsibilities include managing all BHRS grievances, processing stipends for clients throughout the system,

supporting peers and family partners with the recent rollout of the Medi-Cal peer support specialist certification, managing contracts with community based organizations, training organizations, and other agencies. [pictured: Sam Aval, Advocacy Council member; Renee Harris, peer support specialist; Jairo Wilches, OCFA; Claudia Saggese, OCFA; Norma Naser, family peer specialist; Nancy Liu, OCFA; Jana Spalding, OCFA; Melissa Troche, peer support specialist; Maria Lorente-Foresti, director of BHRS Office of Diversity and Equity; Iliana Solis, family peer specialist]

Louise Rogers Honored with SMC Equity Award



County Health Chief Louise Rogers was recently honored with the SMC Equity Award for her work in advancing diversity, equity, inclusion and belonging (DEIB) initiatives across the department. Some of her key contributions include promoting participation in **County Health's** Government Alliance on Race and Equity and Social and Racial Equity Action Plan, guiding the development of a policy to outline behavioral expectations for clients, patients and visitors to ensure that staff, partners and clients feel

welcome and safe, supporting efforts to apply an equity lens to hiring practices through the use of an inclusive hiring checklist and questions and fostering open dialogue about the challenges and opportunities related to DEIB work. **Rogers thanked the** “many champions who have contributed to our progress” **such as** the members of the GARE Seed Lab whose creative talents lift up Health Equity Champions throughout County Health in their *What the HEC* series on YouTube at the [SMC Health GARE playlist](#).

“In my experience working with many counties, I have seen how having a leader who values and actively works toward DEIB goals can make a tremendous difference,” **said Maria Lorente Foresti**, director of the Office of Diversity & Equity at Behavioral Health and Recovery Services. “We are fortunate to have a leader like Louise, who has made a steadfast commitment to DEIB for our health care system and the county.”

###