



**City and County of San Francisco**  
**London N. Breed, Mayor**  
**Department of Public Health**

**Business Office Contract Compliance**  
**1380 Howard Street**  
**San Francisco, CA 94103**

## Monitoring Report Fiscal Year 21-22 Behavioral Health Services

**Section: BHS-MH**

**Target Population: Adult/Older Adult**

**Agency:** Richmond Area Multi-Services, Inc.

**Site Visit Date:** July 17, 2023

**Program Reviewed:** RAMS Street Crisis Response Team

**Report Date:** September 13, 2023

**Program Code(s):** SCRTOCC

**Review Period:** July 1, 2021-  
June 30, 2022

**Site Address:** 1282 Market Street, San Francisco, CA 94102

**Finalized Date:**

**CID/MOU#:** 20032 **Appendix #:** A-1

**Funding Source(s):** General Fund

**On-Site Monitoring Team Member(s):** Michelle O'Neal, Melissa Ta

**Program/Contractor Representatives:** Angela Tang, Richard Zevin, Michele Alexia, Sonya Scott

**Overall Program Rating:** 4 - Commendable/Exceeds Standards

**Category Ratings:**

4 = Commendable/Exceeds Standards		3 = Acceptable/Meets Standards					
2 = Improvement Needed/Below Standards		1 = Unacceptable					
4	Program Performance	2	Program Deliverables	4	Program Compliance	2	Client Satisfaction

**Sub-Categories Reviewed:**

Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Achievement of Performance Objectives	Units of Service Delivered Unduplicated Clients (Unscored)	Declaration of Compliance Administrative Binder Site/Premise Compliance Chart Documentation Plan of Action (if applicable)	Satisfaction Survey Completed and Analyzed

## **MONITORING REPORT SUMMARY**

**Agency/Program:** Richmond Area Multi-Services, Inc./RAMS Street Crisis Response Team

- Findings/Summary:**
- The services provided by this program were funded by the Sources listed on page 1.
  - The program met 100.0 percent of its contracted performance objectives.
  - The program met 64.5 percent of its contracted units of service target.
  - A review of the administrative binder evidenced 100.0 percent of required compliance items.
  - A review of site premise evidenced 100.0 percent of required items.
  - The program was exempt of Chart Documentation compliance.
  - The program did not complete its client satisfaction survey.
  - The program analyzed the client satisfaction results.

RAMS Street Crisis Response Team (SCRT) program is administered under the Behavioral Health Services (BHS) Adult and Older Adult (AOA) System of Care (SOC). Program goal is to hire, train, and integrate Peer Counselors into teams composed of behavioral health clinicians, paramedics, and peer providers as an alternate to law enforcement response to non-violent, behavioral health crisis in public settings in San Francisco.

The target population are adult peers who are individuals with personal lived experience who are consumers of mental health and/or substance abuse services, former consumers, family members, or significant others of consumers.

A site visit was conducted on 7/17/23 to generate findings in this report. Additional information was collected via email.

SCRT is a collaborative team composed of SF Fire Department (SFFD), SF Department of Public Health (SF DPH), RAMS, and HR360. Each SCRT unit is comprised of 3 team members: a community paramedic from SFFD, a behavioral health clinician from HR360, and a behavioral health peer specialist/counselor from RAMS. The teams go out together on rigs (vans). There are 7 units in the field who provide coverage 24/7/365.

The pilot program launched on November 30, 2020. SCRT is a direct response to the crisis team called for in the Mental Health San Francisco (MHSF) legislation as well as Mayor Breed's commitment to identifying alternatives to law enforcement to response to unmet needs in the community. Instead of dispatching law enforcement, SCRT responds to 911 calls that can be better served by a specialized team with a behavioral health focus. The units are further supported by a team of clinicians and health workers through the Office of Coordinated Care (OCC).

Program is proud to help improve safety in the streets and have staff with experience who are instrumental in providing services to clients. This is a new concept to have a peer provider on the team who can assist with making quick assessments and providing compassion to those in crisis.

**FY20-21 Plan of Action required?**        **Yes**        **No**

**If "Yes", describe program's implementation.**

**FY21-22 Plan of Action required?**        **Yes**        **No**

Signature of Author of This Report

DocuSigned by:

*Melissa Ta*

Name and Title: Melissa Ta, Business Office Contract Compliance Manager

Signature of Authorizing Departmental Reviewer

DocuSigned by:

*Jenna Reyes*

Name and Title: BOCC designee

Signature of Authorizing System of Care Reviewer

DocuSigned by:

*Maximilian Rocha*

Name and Title: SOC Director

PROVIDER RESPONSE: (please check one and sign below)

- I have reviewed the Monitoring Report, acknowledge findings, no further action is necessary at this time.
- I have reviewed the Monitoring Report, acknowledge findings, and attached a Plan of Action in response to deficiencies and recommendations with issues addresses and timelines for correction stated.
- I have reviewed the Monitoring Report, disagree with findings, response to recommendations attached.

DocuSigned by:

*Angela Tang*

10/23/2023

Signature of Authorized Contract Signatory (Service Provider)

Date

Angela Tang, CEO

Print Name and Title

<b>RESPONSE TO THIS REPORT DUE:</b>	<b>October 25, 2023</b>
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If applicable, please submit any supplemental materials by clicking on the attachment icon below.

## Program Performance & Compliance Findings

### Rating Criteria:

4	3	2	1
<b>Over 90% = Commendable/ Exceeds Standards</b>	<b>71% - 90% = Acceptable/Meets Standards</b>	<b>51% - 70% = Improvement Needed/ Below Standards</b>	<b>Below 51% = Unacceptable</b>

### Overall Score:

<b>Total Points Given:</b> 77/85=91%
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### 1. Program Performance (30 points possible):

<b>Achievement of Performance Objectives (0-30 pts):</b>	30	10 total points out of 10 points (from 2 Objectives) = 100%
<b>Program Performance Points:</b>	30	
Points Given:	30/30	Category Score: 100%
		Performance Rating: Commendable/ Exceeds Standards

### Performance Objectives and Findings with Points

Ind.1	25% of individuals contacted will be connected to ongoing services.	According to the program data, 1,977 individuals registered in SCRTOCC in FY21-22. Of those, 644 (33%) were connected to ongoing services.	Points: 5
Ind.2	There will be a 10% reduction in PES contacts for individuals contacted by the program during FY21-22.	Waived by SOC.	Points:
Ind.3	In FY 21-22 program will ensure staffing for 6 teams to be operational 12 hours a day/7 days a week.	According to program data, program maintained adequate staffing for 7 teams to be operational 12 hours a day, 7 days a week.	Points: 5

### Commendations/Comments:

Program is commended for exceeding its performance objective targets.

The SOC waived objective #2 as it is not appropriate as a RAMS standalone metric and is working on new metrics for FY23-24.

SCRTOCC is a shared program code between HR360 and RAMS.

### Identified Problems, Recommendations and Timelines:

None noted.

**2. Program Deliverables (20 points possible):**

<b>Units of Service Deliverables (0-20 pts):</b>		14	65% of Contracted Units of Service		
<b>Program Deliverables Points:</b>		14			
Points Given:	14/20	Category Score:	70%	Performance Rating:	Improvement Needed/ Below Standards

**Units of Service Delivered**

Program Code	Service Description	Contracted/Actual	
SCRTOCC	10/30-39 DS-Vocational	48,984	31,608

**Unduplicated Clients by Program Code**

Program Code	Contracted/Actual
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**Commendations/Comments:**

Based on the final cost reimbursement invoice #M11JU22 Supplemental, the program delivered 64.5% of its contracted units of service. Program started in 11/2020, thus making this the first full fiscal year of the pilot. Program did not utilize ADM units. According to the contract, unduplicated client count is not applicable.

**Identified Problems, Recommendations and Timelines:**

None noted.

**3. Program Compliance (40 points possible):**

<b>A. Declaration of Compliance Score (5 pts):</b>	5	Submitted Declaration			
<b>B. Administrative Binder Complete (0-10 pts):</b>	10	100% of items in compliance			
<b>C. Site/Premises Compliance (0-10 pts):</b>	10	100% items in compliance			
<b>D. Chart Documentation Compliance (0-10 pts):</b>	N/A				
<b>E. Plan of Action (if applicable) (5 pts):</b>	5	<input checked="" type="checkbox"/> No FY20-21 POA was required <input type="checkbox"/> FY20-21 POA was submitted, accepted and implemented <input type="checkbox"/> FY20-21 POA submitted, not fully implemented <input type="checkbox"/> FY20-21 POA required, not submitted			
<b>Program Compliance Points:</b>	30				
Points Given:	30/30	Category Score:	100%	Compliance Rating:	Commendable/ Exceeds Standards

**Commendations/Comments:**

Program is commended for maintaining an organized admin binder.

**Identified Problems, Recommendations and Timelines:**

When reviewing staff trainings, some certificates (aerosol transmittable disease, site specific emergency response plan, exposure to blood borne pathogens, and harm reduction) were unavailable or missing. BOCC recommends that the program develop a process or tracking mechanism to maintain a training log. BOCC also provided technical assistance to the program regarding the harm reduction training institute (HRTI) and BHS online training websites.

**4. Client Satisfaction (10 points possible): Program-Specific Client Satisfaction Survey**

Scoring Category	Scoring Criteria	Points
Completed Program Specific Survey	Yes = 2, No = 0	0
Results Analyzed	Yes = 3, No = 0	3
Program Performance as Rated by Clients	50-59% of clients satisfied = 1 60-69% of clients satisfied = 2 70-79% of clients satisfied = 3 80-89% of clients satisfied = 4 90-100% of clients satisfied = 5	N/A
<b>Client Satisfaction Points:</b>		<b>3</b>

Points Given:	3/5	Category Score:	60%	Client Satisfaction Rating:	Improvement Needed/ Below Standards
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**Commendations/Comments:**

Program states it is challenging to have a satisfaction survey component of this service due to the program mode. The program has a multidisciplinary team from three different organizations responding to 911 emergency calls and assessing urgent service needs. The client engagements are typically one-time encounters.

A Street Crisis Response Team Pilot final report conducted by Harder + Company was released in May 2022. From this report, some highlights from clients include:

- "They came to me because I'm schizophrenic and bipolar, and I was having some mental health issues. They were very polite [asked] how I was feeling, if I was suicidal, if I have any weapons, and if I was dangerous to the community. [They were] knowledgeable, friendly, professional, and approachable."
- "A clinician - she helped me out exponentially. She changed my life. Everything I needed, she did for me."

Monthly dashboards are posted online (<https://sf.gov/street-crisis-response-team>). During FY21-22, a total of 3,920 client engagements were conducted by the SCRT team.

Program did not conduct a client satisfaction specific survey but references the pilot final report as a comprehensive summary and analysis of the services provided. This report can be found under the Downloadable Resources section in the link provided above. Key takeaways from the pilot final report showcased:

- The types of mental health histories and lived experiences by clients provided further evidence the SCRT skills are well matched to client needs.
- SCRT's geographic focus rather than dispatch model, allowed units to develop relationships and expertise to responding to calls within designated community. Thus allowing for a faster response time.

Through the work of the Mental Health San Francisco Implementation Working Group (MHSF IWG), ongoing review and evaluation of recommendations are implemented to expand and better support the work of SCRT units.

**Identified Problems, Recommendations and Timelines:**

According to the contract, the program will conduct an annual client satisfaction survey to solicit program feedback. However, given the challenges described above, BOCC recommends that the program work with the SOC on how to best address this requirement or revise as necessary to support the multidisciplinary service model.