

# San Francisco Department of Public Health

## Behavioral Health Services Director's Update for San Francisco Health Commission

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City & County of San Francisco  
**Department of Public Health**

# Agenda

- Mission and Vision
- Mental Health SF Implementation Update
- Overdose Response Update
- Oversight of BHS-Funded Treatment Providers
- Crisis Response



# Our Vision, Mission, and Key Tactics

## Vision

For all San Franciscans to experience **mental and emotional well-being** and **participate meaningfully** in the community across lifespans and generations.

## Mission

To provide **equitable**, effective substance use and mental health care and promote **behavioral health and wellness** among all San Franciscans.



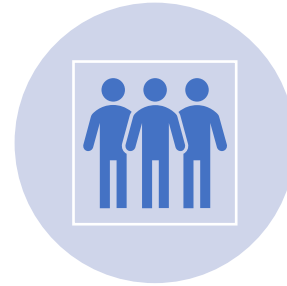
# Mental Health SF Implementation Update



# Mental Health SF Overview



Legislated in 2019, Mental Health SF (MHSF) built upon existing behavioral health services and programs in San Francisco to increase support and care for people with behavioral health needs.



MHSF prioritizes people experiencing homelessness (PEH) who have a serious mental health and/or substance use diagnosis.



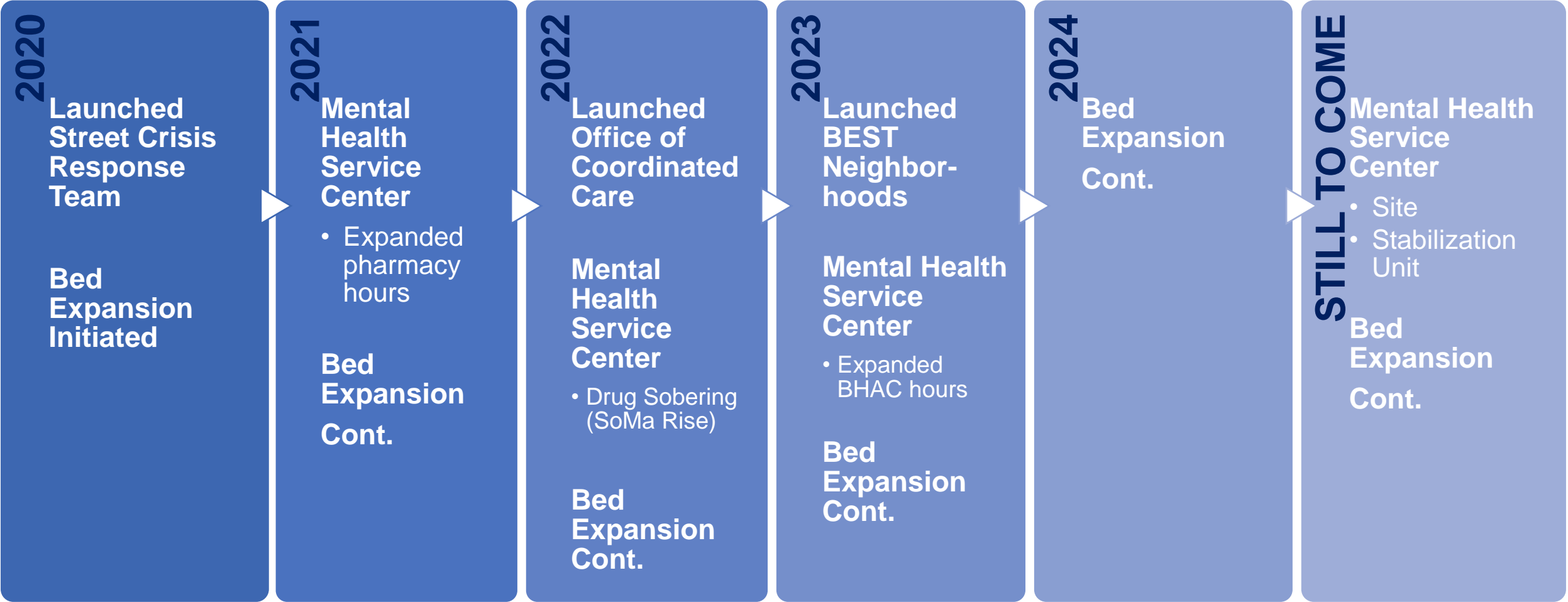
MHSF components include: the Office of Coordinated Care, the Street Crisis Response Team, a Mental Health Service Center, and an expansion of new beds and facilities.



MHSF activities are primarily funded through the voter-supported "Our City, Our Home" (Proposition C).



# MHSF Implementation Timeline To-Date



# Mental Health SF Accomplishments: At-A-Glance

Added approximately 400 new residential care and treatment beds.

Created the Office of Coordinated Care to deliver centralized access to care and strengthen coordination of care for priority populations.

Fully implemented citywide 24/7 Street Crisis Response Team, with the Fire Department and the Department of Emergency Management, and added SFDPH follow up teams.

Increased access to services envisioned for the Mental Health Service Center, including increasing pharmacy and buprenorphine clinic availability.

# Office of Coordinated Care Summary

Launched in 2022, the Office of Coordinated Care (OCC) provides access to behavioral health services and strengthens coordination of care for priority populations.

Priority populations include people leaving the hospital or jail; people who received behavioral health crisis services or experienced involuntary holds (5150); people experiencing homelessness; people with high utilization of multiple systems and high behavioral health needs; and people served in shelters, navigation centers, and permanent supportive housing.

The OCC has two main types of programs: access and eligibility services; and care coordination services.



# Office of Coordinated Care: Some Key Outcomes

## Overall

- Served 8500+ distinct individuals in FY 23-24

## Workforce

- Hired >45 new SFDPH behavioral health clinicians, case managers, and staff

## Central Access & Eligibility

- 5,000+ requests seeking treatment in FY 23-24
- 1500+ additional non-enrolled service and eligibility inquiries

## Triage Team

- 2500+ distinct clients connected to follow-up teams, BHS services, and provided care coordination in FY 23-24

## BEST Care Management

- Provided care management services to 454 distinct clients leaving hospital, jail, or crisis in FY 23-24

## BEST Neighborhoods

- 9,000+ engagements
- 1,300+ direct connections to services in FY 23-24

## Shelter Behavioral Health

- Offered 881 distinct clients outreach, engagement, care coordination, and connection to care in FY 23-24

## Permanent Housing Advanced Clinical Services (PHACS)

- Served 928 distinct PSH residents in FY 23-24
- In 2024, expanded to provide health services at all 144 PSH buildings

# Mental Health Service Center and Outpatient Service Expansions

Site acquisition for the **Mental Health Service Center (MHSC)** continues. Key services envisioned for the MHSC are being met through the behavioral health continuum of care.

- SFDPH added 70 service hours weekly for the Behavioral Health Access Center (BHAC), BHS Pharmacy, Office-based Buprenorphine Clinic (OBIC), and Opioid Treatment Programs.
- BHAC and BHS Pharmacy now open evenings and weekends.
- Over 1,700 people visited BHAC and BHS Pharmacy during expanded hours in FY 23–24.
- Overall, BHAC and Behavioral Health Access Line served 5,411 people seeking treatment in FY 23-24.

# MHSF Programs to Come



## Mental Health Service Center

Site acquisition in progress  
Stabilization Unit under construction



## Bed Expansion

Additional dual diagnosis treatment  
Expanded residential care facilities  
Transitional housing for unhoused people with behavioral health needs



## All programs

Ongoing refinement and improvement to better meet the needs of MHSF priority populations and the public

# Overdose Response Update



# Strengthening Efforts to Lower Fatal and Non-fatal Overdoses and Reduce Overdose Disparities

- Aligning and coordinating existing and new approaches to maximize the impact of medications for opioid use disorder, naloxone, contingency management, and community engagement
- Centering equity in all strategies and addressing gaps in existing interventions
- Deepening partnerships in the community
- Advancing local, state, and federal policy
- Strengthening data tracking and reporting to maximize and demonstrate impact



# Key Overdose Reduction Objectives

## Expanding and strengthening substance use services continuum of services

- Key Objective: Improve access and retention of medications for opioid use disorder.
- Key Objective: Expand availability and participation of Contingency Management.
- Key Objective: Review and improve overdose response interventions.

## Community engagement for priority populations

- Key Objective: Build the capacity of Black/African American-led organizations to address overdose in their communities
- Key Objective: Increase overdose prevention and connections to treatment in PSH

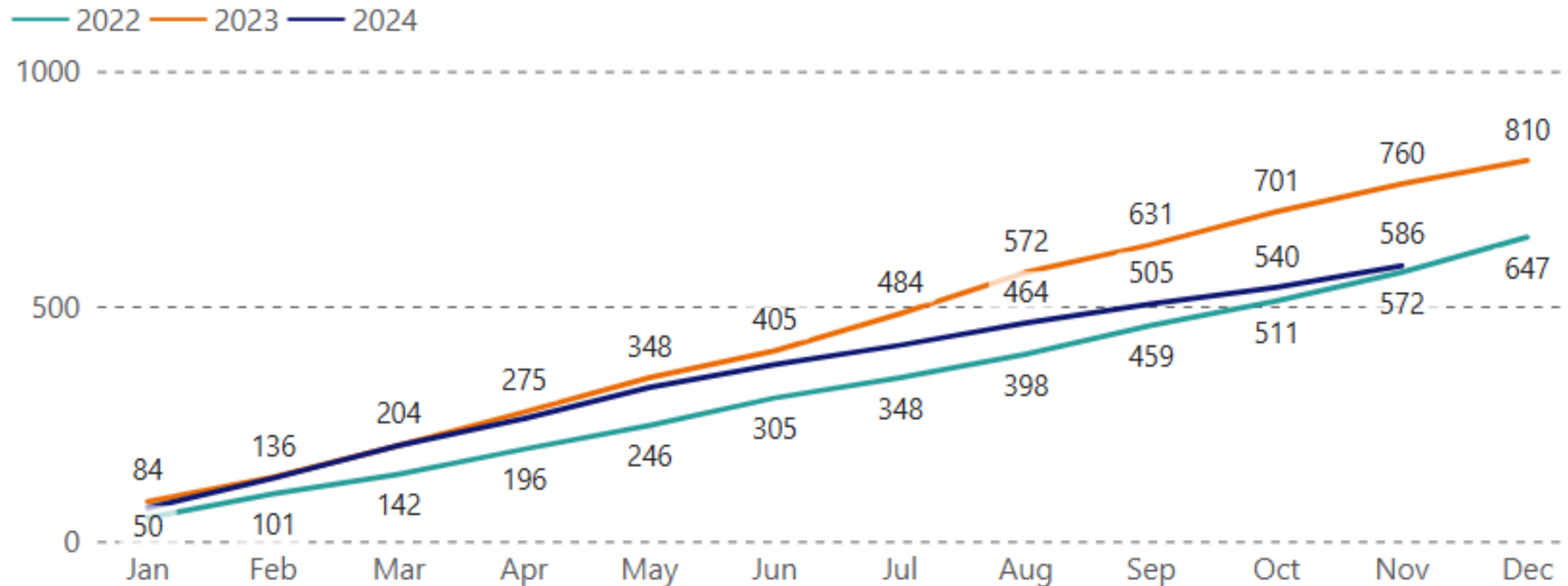
## Public awareness

- Key Objective: Launch media campaigns aimed at increasing awareness about the availability of services and reducing stigma



# Cumulative Overdose Deaths by Month

Cumulative preliminary unintentional drug overdose deaths by year



>20%

FEWER DEATHS

Through November 2024, overdose deaths are down >20% in San Francisco compared to through the same time period in 2023.

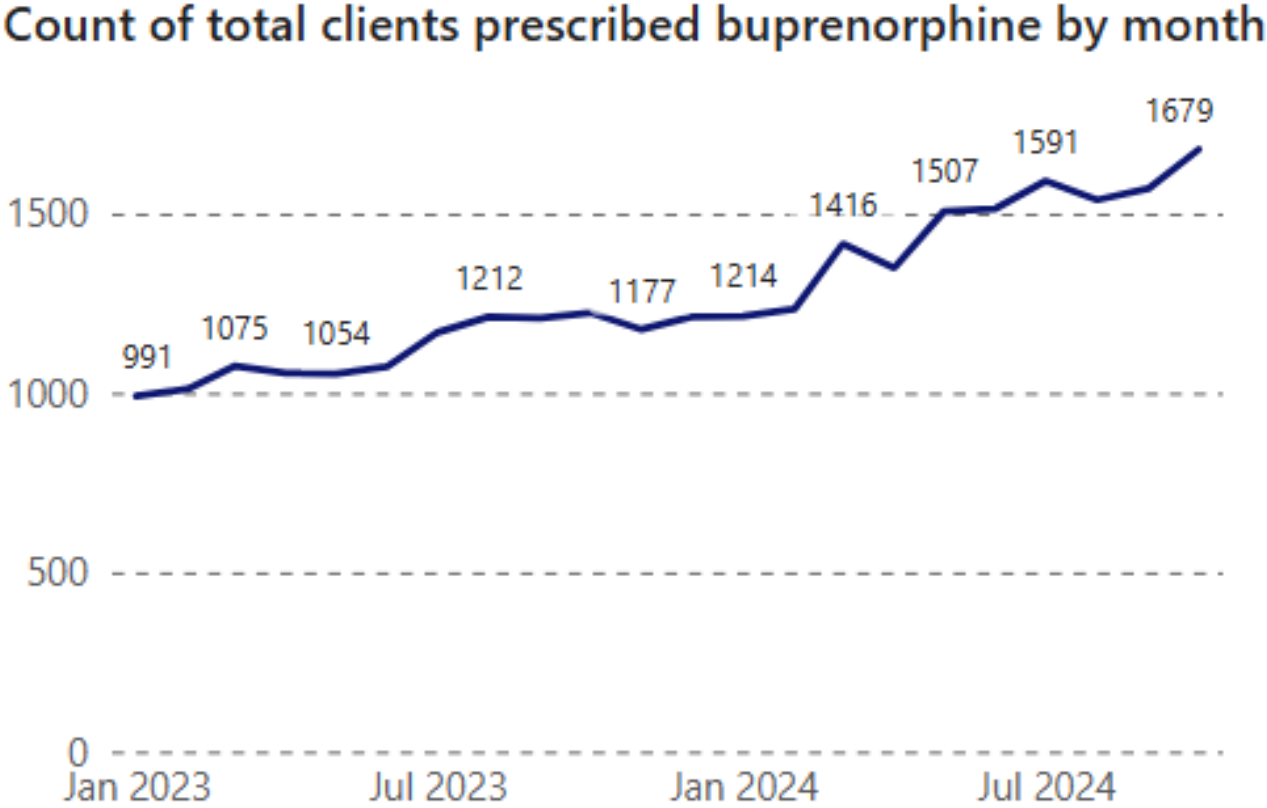
# Key Progress Updates

- From January to October, 2024: 1,321 new admissions at DPH-funded methadone clinics
  - **35% increase in new methadone admissions**, compared to the same time period last year.
- Launched **16-hour, 7-day a week telehealth line** and associated navigation services.
  - From March to October 2024, the evening program has facilitated nearly 1,500 telehealth visits, resulting in approximately **40% of clients starting medication treatment** for opioid use disorder.
- All 156 HSH-funded permanent supportive housing sites now have **naloxone stations** available 24/7



# SFHN Buprenorphine Prescription Counts 2024

The number of total clients prescribed buprenorphine in October 2024 is 59% higher than the total clients prescribed buprenorphine in January 2023.



# Crisis Response



# CRISIS LINE

24/7 telephone support and consultation

Crisis triage

Mobile crisis field visit dispatch

Transfers to 911 and 988 when needed

Referrals to mental health and substance use treatment services

# CHILD

5585 Evaluations

Up to 30-Day Crisis Case Management

Crisis interventions

Clinical consultation to families, providers, support systems

Referrals to services

Medication support

Hospital Discharge Planning

# ADULT

5150 Evaluations

Clinical consultation to clients, providers, support systems & concerned individuals

Linkage to mental health services

Wellness Assessments

# CRT

Crisis Response Team responds to violence and critical incidents such as homicides, community violence, pedestrian fatalities & suicides

Debriefing Services

Grief & Trauma Focused Treatment

Supportive Services

Med Support

# CIT

Crisis Intervention Team plans co-response field visits with SFPD

Provides mental health support to SFPD (Hostage Negotiation)

Mental Health Training for SFPD



# Crisis Behavioral Health Services for Children and Youth

## DPH Child Crisis

- Triage and assesses community and provider requests for care for youth. 24/7 mobile response for children needing crisis intervention and 5585 (involuntary hold) evaluations.
- Supports hospital discharge planning and offers up to 30-Day Crisis Case Management, medication support, and referrals to services
- Offers therapy for children who lost a loved one due to a death of a homicide, suicide or car fatality and debriefing/Healing Circles after a critical incident
- Additional support/services available from Seneca 24/7 Mobile Response

## Edgewood 23-Hour Crisis Stabilization Unit

- Assessments and stabilization for youth ages 6-17 experiencing a psychiatric crisis, with discharge planning and connections to community supports and services. Direct referrals from providers, families, schools.

## Edgewood Hospital Diversion 24/7

- 2 residential treatment beds for youth ages 12-17 experiencing a psychiatric crisis. Placement through referral.



# Adult Crisis Services

- **Mobile Crisis Treatment Team:** A 24/7 response to any adult in San Francisco undergoing a mental health crisis. Staffs the SF Co-Response and Critical Incident Teams, with SFPD.
- **Westside Crisis:** a voluntary, drop-in service open to any adult in need of urgent psychiatric care, designed to stabilize individuals in a mental health crisis and refer to an appropriate source for follow-up treatment.
- **Dore Urgent Care:** Voluntary clinical intervention for an individual who is experiencing an escalating psychiatric crisis and who requires rapid engagement, assessment, and intervention.
- **Behavioral Health Access Line:** A state-mandated and regulated, 24/7 call center for behavioral health service inquiries (for adults and children and youth).

# About 988 Suicide and Crisis Line in SF

The new 988 line is a federally-mandated and state-assigned crisis/suicide line. In San Francisco, Felton Institute is the assigned 988 provider.

Provides 24/7 assessment, counseling, stabilization, safety planning, follow-up, resources, and connections to care for people in San Francisco experiencing a behavioral health crisis. Services are available in over 250 languages.

- From January to October 2024, San Francisco 988 took 12,407 calls, of which 41 required emergency dispatch, including saving 24 lives from suicidal ideation.
- Referrals may include mobile crisis or emergency services, mental health and substance use services, or other service types such as shelter.

Felton also provides night, weekend and holiday coverage for the Behavioral Health Access Line.

# Oversight of BHS Funded Treatment Providers



# Oversight of BHS Funded Treatment Providers

- All licensed SFDPH-contracted substance use treatment providers have oversight by the California Department of Health Care Services (DHCS) and SFDPH.
- Programs that bill Medi-Cal also are overseen by DHCS - Medicaid unit
- BHS continues to strengthen treatment and oversight of funded treatment providers.
  - Multiple structures for BHS oversight, include:
    - Routine monitoring by program and contracting staff
    - Critical incident reporting and investigation
    - Performance improvement projects, as part of local and state requirements



# Improving safety practices

## DPH

- Development of new service guidelines
- Secured a contract with an external consultant to:
  - Review and identify potential gaps in monitoring practices
  - Review workflow, procedures, and documentation of BHS' two largest treatment providers
- Instituted weekly leadership huddles between Behavioral Health Services and HR360
- Drafting an Agency Technical Assistance Plan as a tool to formally document and track areas of concern

## Provider

- Strengthened policies and procedures
- Changes to the facility to improve clients safety
- Added cameras
- Instituted a bar code system to monitor overnight checks
- Instituted bag checks
- Hired additional staff
- Tightened policies around leave passes

**Thank you**

Additional background slides

# Reduce overdose disparities among people in Permanent Supportive Housing (PSH)

January - November 2024 Progress Report

## Naloxone Saturation

Partnered with the Department of Homelessness and Supportive Housing to develop their naloxone policy and present it to PSH providers.

Established naloxone stations in 85% (132 of 156) of HSH funded PSH sites, 8 non-HSH PSH sites, and 6 shelter/navigation center sites.

## Peer Training and Development

Implemented a 10-week cohort training pilot to train 20 community members as first responders to address overdose emergencies.

Peer Overdose Prevention Program contract certified to recruit and train PSH tenants to be peer educators through 6 weeks of training and 8 weeks of peer educator field work to provide weekly outreach in their housing sites

## Staff Capacity and Resource Building

Developed a training plan for PSH providers to increase their knowledge and ability to connect clients to Medication for Opioid Use Disorder (MOUD), including Telehealth and Navigation program.

BHS Pharmacists held over 15 events at highly impacted PSH buildings offering education and real-time MOUD access

## Post Overdose

Strengthened collaboration between WPIC Permanent Housing Advanced Clinical Services (PHACS) and UCSF HOPE teams to support PSH tenants post-overdose.

# Reduce overdose disparities amongst Black/African Americans

January – November 2024 Progress Report

- **Stakeholder Meetings**

Held monthly Black/African American stakeholders meetings to develop and implement a collaborative approach to preventing overdoses in the Black/African American population. Planning an Overdose Prevention Summit for 2025

- **Investing in Black Led Organizations**

Certified/certifying several contracts to provide culturally congruent overdose prevention outreach and education in the B/AA community.

- **Trainings**

Provided trainings on overdose recognition and response, substance use services, and stigma in Black-led and Black-serving organizations.

Implemented comprehensive capacity building plan for newly funded programs.

- **SF Overdose Awareness Day**

Together with Black/African American Stakeholders group, hosted the first Black/African American led SF Overdose Awareness Day event with 120 residents in attendance.

# Increase public awareness and reduce stigma

January – November 2024 Progress Report



Living Proof Campaign

- Launched Living Proof campaign featuring individuals with lived experience of recovery (November 2024).
- Regular media engagement, including holding monthly OCME fatal overdose release media availabilities, and facilitating a number of articles and radio/TV spots on Substance Use Disorder and Mental Health programs.
- Community awareness efforts, including promoting 16-hour telehealth and overdose awareness and recovery month: including social media campaign, community events, leadership communications, multiple media stories.
- Partnered with Assemblymembers, stakeholders, and leadership to host news conference and events supporting legislative efforts like AB 2115 and SB43.
- Building staff capacity for training in Spanish and Mayan languages, including developing translated materials.

# Expansion of Residential Beds Under Mental Health SF

SFDPH has opened ~400 new residential behavioral health beds planned under Mental Health SF.



# Future MHSF Bed Expansion Goals

In 2023, SFDPH updated its 2020 behavioral health bed modeling to develop preliminary recommendations for the number of beds needed for 95% of clients to experience zero wait time.

Residential Type	Additional Beds Needed	Considerations
<b>Mental Health Residential Treatment</b>	~50	<ul style="list-style-type: none"> <li>Includes different lengths of stay</li> <li>For clients with specific needs (e.g. seniors)</li> </ul>
<b>Mental Health Rehabilitation Centers (MHRC) / LSAT</b>	Estimated 55-95	<ul style="list-style-type: none"> <li>Given current wait times</li> <li>Potential for increase in demand under SB 43</li> </ul>
<b>Behaviorally Complex Therapeutic</b>	Estimated 20-40	<ul style="list-style-type: none"> <li>Highly specialized level of care for complex, high-need clients difficult to place in care.</li> </ul>
<b>SUD Residential Withdrawal Management</b>	~8-10	<ul style="list-style-type: none"> <li>Includes high-complexity withdrawal management for people with severe withdrawal and other health needs</li> </ul>
<b>SUD Residential Step-Down</b>	~20-30	<ul style="list-style-type: none"> <li>The number of clients served in RSD has increased as SFDPH has added capacity.</li> </ul>

This analysis has informed Prop 1 Bond behavioral health infrastructure grant applications.





# MHSF Strengthened Infrastructure to Expand Residential Care and Treatment Capacity

Strengthened systems to address ongoing residential care needs, including:

- Dedicated, experienced analyst capacity and leadership for new bed projects
- Capacity to assess bed needs in an ongoing fashion
- Bed procurement legislation approved by the Board of Supervisors
- Obtained state funding to support projects. SFDPH has been awarded over \$70 million for behavioral health infrastructure projects.

These systems enabled San Francisco to open additional residential care sites and apply for Behavioral Health Bridge Housing and Prop 1 Bond projects.



# Office of Coordinated Care Services

**Central Access and Eligibility Services** provide behavioral health service information, screening for care, and referrals to care, including direct referrals

- **Behavioral Health Access Line (BHAL):** 24/7 central call center for access to behavioral health services
- **Behavioral Health Access Center (BHAC):** 7 day/week walk-in center for access to behavioral health services
- **Eligibility & Member Services:** Centralized eligibility and Medi-Cal enrollment support for behavioral health clients and programs

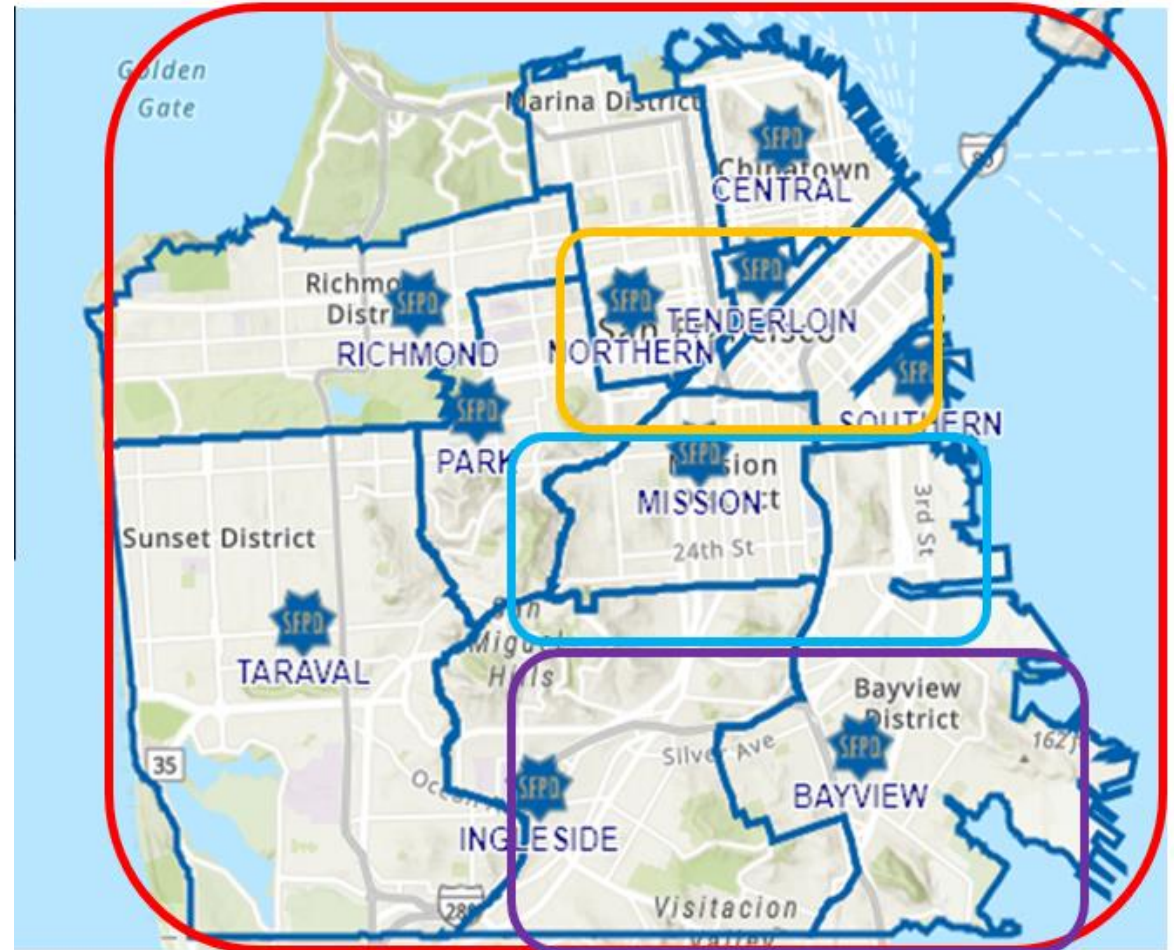
# Office of Coordinated Care Services

Care Coordination Services aim to increase priority populations' engagement in care

- **Triage Team:** Manages referrals.. Systematically tracks and ensures connections to care after involuntary behavioral health hold or Street Crisis Response Team contact. Deploys follow-up teams.
- **Follow-Up Teams:** Multidisciplinary teams that conduct outreach and bridge to ongoing care.
  - **Bridge Engagement and Services Team (BEST) Care Management:** Field-based follow-up team focused on individuals leaving hospital or jail or post-crisis contact.
  - **BEST Neighborhoods:** Conduct outreach, engagement, coordination for high-priority unhoused people with behavioral health needs, using a neighborhood-based approach.
  - **Shelter Behavioral Health Care Coordination:** Conduct engagement, care coordination, and connection to care for individuals in shelters and navigation centers.
  - **Permanent Housing Advanced Clinical Services (PHACS).** The OCC component provides behavioral health care coordination, linkage, and short-term services; Whole Person Integrated Care provides health care.

# Active BEST Neighborhoods Teams

Neighborhood	Launch Date
Gold: Tenderloin	3/14/23
Blue: Mission/Castro	3/14/23
Red: Citywide	5/13/24
Purple: Bayview/Ingleside	6/25/24



# Looking Forward: Challenges and Opportunities



## Real estate acquisition:

Lengthy timelines to locate, acquire, renovate, and/or construct suitable sites for behavioral health residential expansion.

SFDPH is grateful for Board support for its competitive solicitation waiver for bed procurement.

Additional building purchases are in process for the upcoming year, including an additional residential care facility



## Data modernization:

With the launch of Epic in May 2024 for BHS Mental Health Services, on a pathway to improving integrated data and analysis.

Federal confidentiality laws limit integration of substance use services into a single data record

# Looking Forward: Challenges and Opportunities

- **Shifting policy priorities:** Significant new policy changes have occurred that change the context in which MHSF offers—and MHSF clients receive—services. These include, among others:
  - Proposition 1
    - Providing opportunities for further bed expansion under the Prop 1 Bond.
    - Changing the service environment by increasing Behavioral Health Services Act required allocations to housing, substance use services, and full-service partnerships.
    - Implementing significant overhaul and expansion of county behavioral health reporting to California Department of Health Care Services.
  - Medi-Cal reform (CalAIM) is driving many other system-wide changes in behavioral health.
  - Overdose Prevention and Response
    - MHSF implementation has occurred alongside equally significant investments in addressing the overdose crisis, locally.
    - Federal, state, and local policies and programs (e.g., federal methadone regulations) have changed in response to this crisis, potentially impacting MHSF priority populations.