

SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION



**Mayor
London N. Breed**

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Stephen Banuelos, Co-Chair
Genesis Vasconez, MS, PMHNP-BC, Vice-Chair
Lisa Williams, Secretary
Terezie Bohrer, RN, MSW, CLNC
Judith Klain, MPH
Carletta Jackson-Lane, JD
Kescha S. Mason
Liza Murawski
Toni Parks
Harriette Stallworth Stevens, EdD
Lisa Wynn

AGENDA

**Behavioral Health Commission Annual Report Ad-Hoc Committee Meeting
Friday, September 23, 2022
3:00 PM – 4:00 PM**

REMOTE BHC MEETING ZOOM

<https://us06web.zoom.us/j/85159669411?pwd=SFJEZVBOcFVpTEJDbDFHQlZ3WXJ1dz09>

Meeting ID: 851 5966 9411 Passcode: 016019

One tap mobile +16699006833,,85159669411#,,,,*016019# US (San Jose)

CALL TO ORDER

Roll Call

Agenda Changes

ITEM 1.0 COMMISSIONER'S REPORTS

1.1 Report from the Commission Co-Chair and the Executive Committee

1.1 a) The Co-Chairs will have the BHC Staff call attention to the updated remote meeting resolution California Government Code Section 54953(e) also known as AB361 which empowers local policy bodies to convene by teleconferencing technology during a proclaimed state of emergency under the State Emergency Services Act – see attached below **[Action Item]**

PUBLIC COMMENT

ITEM 2.0 REVIEW ANNUAL REPORT REQUIREMENTS

Annual Report Committee Co-Chair will guide commissioners in work distribution regarding the 2021-2022 Annual Report. This includes a review and update to Commission activities (site visits, resolutions, presentations, and individuals and/or organizations who should receive a tribute). Review draft portions of the report (e.g., write ups of site visit and resolution, list of commissioners and staff, and the outline for the chair’s welcome letter, to make necessary revisions.

PUBLIC COMMENT

ITEM 3.0 ACTION ITEMS

Vote on time and frequency of meetings **[action item]**

PUBLIC COMMENT

3.1 Assignment of Sections of the Annual Report: progress report on commissioners responsible for portions of the annual report they were assigned or volunteered to complete – see attached **[action item]**

3.2 Adopt the minutes from 8/26/22, 9/02/22 and 9/9/22 at the 9/23/22 meeting **[action item]**

3.3 Site Visit Report - update

3.4 Liza's Resolution – update **(see attached)**

3.5 Draft 2021-2022 Annual Report with List of BHC Commissioners and Staff **(see attached draft)**

PUBLIC COMMENT

ITEM 4.0 NEW ASSIGNMENTS [Discussion only]

PUBLIC COMMENT

ITEM 5.0 Final Public Comment

Adjournment

DISABILITY ACCESS

The ADA is a civil rights law that protects people with different types of disabilities from discrimination in all aspects of social life. More specifically, Title II of the ADA requires that all programs offered through the state and local government such as the City and County of San Francisco must be accessible and usable to people with disabilities. The ADA and City policy require that people with disabilities have equal access to all City services, activities, and benefits. People with disabilities must have an equal opportunity to participate in the programs and services offered through the City and County of San Francisco. If you believe your rights under the ADA are violated, contact the ADA Coordinator.

Ordinance 90-10 added Section 2A.22.3 to the Administrative Code, which adopted a Citywide Americans with Disabilities Act Reasonable Modification Policy that requires City departments to: (1) provide notice to the public of the right to request reasonable modification; (2) respond promptly to such requests; (3) provide appropriate auxiliary aids and services to people with disabilities to ensure effective communication; and (4) train staff to respond to requests from the public for reasonable modification, and that requires the Mayor's Office on Disability to provide technical assistance to City department responding to requests from the public for reasonable modifications.

Disability Accommodations: To request assistive listening devices, real time captioning, sign language interpreters, readers, large print agendas or other accommodations, please contact the Commission Secretary at (415) 558-6309, or commissions.secretary@sfgov.org at least 72 hours in advance of the hearing to help ensure availability.

Language Assistance: To request an interpreter for a specific item during the hearing, please contact the Commission Secretary at (415) 558-6309, or commissions.secretary@sfgov.org at least 48 hours in advance of the hearing.

SPANISH: Agenda para la Comisión de Planificación. Si desea asistir a la audiencia, y quisiera obtener información en Español o solicitar un aparato para asistencia auditiva, llame al 415-558-6309. Por favor llame por lo menos 48 horas de anticipación a la audiencia.

CHINESE: 規劃委員會議程。聽證會上如需要語言協助或要求輔助設備，請致電415-558-6309。請在聽證會舉行之前的至少48個小時提出要求。

TAGALOG: Adyenda ng Komisyon ng Pagpapalano. Para sa tulong sa lengguwahe o para humiling ng Pantulong na Kagamitan para sa Pagdinig (headset), mangyari lamang na tumawag sa 415-558-6309. Mangyaring tumawag nang maaga (kung maaari ay 48 oras) bago sa araw ng Pagdinig.

RUSSIAN: Повестка дня Комиссии по планированию. За помощью переводчика или за вспомогательным слуховым устройством на время слушаний обращайтесь по номеру 415-558-6309. Запросы должны делаться минимум за 48 часов до начала слушания.

POLICY ON CELL PHONE, PAGERS, AND ELECTRONIC DEVICES

The ringing of and use of cell phones, pagers, and similar sound-producing electronic devices are prohibited at this meeting. Please be advised that the Chair may order the removal from the meeting room of any person(s) responsible for the ringing or use of a cell phone, pager, or other similar sound-producing electronic devices.

KNOW YOUR RIGHTS UNDER THE SUNSHINE ORDINANCE

Government's duty is to serve the public, reaching its decisions in full view of the public. Commissions, boards, councils and other agencies of the City and County exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance (Chapter 67 of the San Francisco Administrative Code) or to report a violation of the ordinance, contact:

Sunshine Ordinance Task Force
City Hall, Room 244
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4689
Telephone: (415)554-7724
Fax: 4(15) 554-5163
E-mail: soft@sfgov.org

Citizens interested in obtaining a free copy of the Sunshine Ordinance can request one from the Sunshine Ordinance Task Force or by printing Chapter 67 of the San Francisco Administrative Code from the internet at: www.sfgov.org/sunshine

To view Mental Health Board agendas and minutes, you may visit the MHB web page at: www.sfgov.org/mental_health. You may also go to the Government Information Center at the Main Library at Larkin and Grove in the Civic Center. You may also get copies of these documents through the MHB office at 255-3474.

LOBBYIST REGISTRATION AND REPORTING REQUIREMENTS

Individuals and entities that influence or attempt to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 30 Van Ness Avenue, Suite 3900, San Francisco, CA 94102; telephone (415) 581-2300; fax (415) 581-2317; website www.sfgov.org/ethics.

**BEHAVIORAL HEALTH COMMISSION
RESOLUTION MAKING FINDINGS TO ALLOW TELECONFERENCED
MEETINGS UNDER CALIFORNIA GOVERNMENT CODE SECTION
54953(e)**

WHEREAS, California Government Code Section 54953(e) empowers local policy bodies to convene by teleconferencing technology during a proclaimed state of emergency under the State Emergency Services Act so long as certain conditions are met; and

WHEREAS, In March, 2020, the Governor of the State of California proclaimed a state of emergency in California in connection with the Coronavirus Disease 2019 (“COVID-19”) pandemic, and that state of emergency remains in effect; and

WHEREAS, In February 25, 2020, the Mayor of the City and County of San Francisco (the “City”) declared a local emergency, and on March 6, 2020 the City’s Health Officer declared a local health emergency, and both those declarations also remain in effect; and

WHEREAS, On March 11 and March 23, 2020, the Mayor issued emergency orders suspending select provisions of local law, including sections of the City Charter, that restrict teleconferencing by members of policy bodies; those orders remain in effect, so City law currently allows policy bodies to meet remotely if they comply with restrictions in State law regarding teleconference meetings; and

WHEREAS, On September 16, 2021, the Governor signed AB 361, a bill that amends the Brown Act to allow local policy bodies to continue to meet by teleconferencing during a state of emergency without complying with restrictions in State law that would otherwise apply, provided that the policy bodies make certain findings at least once every 30 days; and

WHEREAS, While federal, State, and local health officials emphasize the critical importance of vaccination and consistent mask-wearing to prevent the spread of COVID-19, the City’s Health Officer has issued at least one order (Health Officer Order No. C19-07y, available online at www.sfdph.org/healthorders) and one directive (Health Officer Directive No. 2020-33i, available online at www.sfdph.org/directives) that continue to recommend measures to promote physical distancing and other social distancing measures, such as masking, in certain contexts; and

WHEREAS, The California Department of Industrial Relations Division of Occupational Safety and Health (“Cal/OSHA”) has promulgated Section 3205 of Title 8 of the California Code of Regulations, which requires most employers in California, including in the City, to train and instruct employees about measures that can decrease the spread of COVID-19, including physical distancing and other social distancing measures; and

WHEREAS, Without limiting any requirements under applicable federal, state, or local pandemic-related rules, orders, or directives, the City’s Department of Public Health, in coordination with the City’s Health Officer, has advised that for group gatherings indoors, such as meetings of boards and commissions, people can increase safety and greatly reduce risks to the health and safety of attendees from COVID-19 by maximizing ventilation, wearing well-fitting masks (as required by Health Officer Order No. C19-07), using physical distancing where the vaccination status of attendees is not known, and considering holding the meeting remotely if feasible, especially for long meetings, with any attendees with unknown vaccination status and where ventilation may not be optimal; and

WHEREAS, On July 31, 2020, the Mayor issued an emergency order that, with limited exceptions, prohibited policy bodies other than the Board of Supervisors and its committees from meeting in person under any circumstances, so as to ensure the safety of policy body members, City staff, and the public; and

WHEREAS, The Behavioral Health Commission has met remotely during the COVID-19 pandemic and can continue to do so in a manner that allows public participation and transparency while minimizing health risks to members, staff, and the public that would be present with in-person meetings while this emergency continues; now, therefore, be it

RESOLVED, That the Behavioral Health Commission finds as follows:

1. As described above, the State of California and the City remain in a state of emergency due to the COVID-19 pandemic. At this meeting, the Behavioral Health Commission has considered the circumstances of the state of emergency.
2. As described above, State and City officials continue to recommend measures to promote physical distancing and other social distancing measures, in some settings.
3. As described above, because of the COVID-19 pandemic, conducting meetings of this body and its committees in person would present imminent risks to the safety of attendees, and the state of emergency continues to

directly impact the ability of members to meet safely in person; and, be it

FURTHER RESOLVED, That for at least the next 30 days meetings of the Behavioral Health Commission and its committees will continue to occur exclusively by teleconferencing technology (and not by any in-person meetings or any other meetings with public access to the places where any policy body member is present for the meeting). Such meetings of the Behavioral Health Commission and its committees that occur by teleconferencing technology will provide an opportunity for members of the public to address this body and its committees and will otherwise occur in a manner that protects the statutory and constitutional rights of parties and the members of the public attending the meeting via teleconferencing; and, be it

FURTHER RESOLVED, That the staff of the Behavioral Health Commission is directed to place a resolution substantially similar to this resolution on the agenda of a future meeting of the Behavioral Health Commission within the next 30 days. If the Behavioral Health Commission] does not meet within the next 30 days, the staff is directed to place a such resolution on the agenda of the next meeting of the Behavioral Health Commission.

Please review the BHC Commission Minutes for 2021-2022 and be sure to include the dates where you find the resolutions and commendations, and any program reviews/site visits.

The BHC Co-chairs volunteered to work on specific activities below. **All Commissioners:** Please select one or two activities from the bullet points below and let Amber know which one you will work on.

Co-Chairs Banuelos and Vigil:

Executive Summary: should be written after the report is completed (Co-Chairs)

Letter from the Chair: One or both Co-Chairs write

BHC Commission members and staff in 2021-22: Banuelos

BHC members and terms (A draft list of Commissioners for 2020 and 2021 has been delivered to Co-Chair Banuelos)

Introduction: Remember: the basic description remains about the same

Commissioners: Please let Amber Gray know which bullet point(s) you plan to work on: FY 2021-22 resolutions (include dates of the Minutes)

- FY 2021-22 commendations or certificates (include dates of the Minutes)
- Program reviews in 2021-22 (We want to make sure we conduct 2 or 3 program reviews in August 2022)
- Educational presentations at commission meetings (e.g., Commissioner trainings, MHSA updates) -- (include dates of the Minutes)
- Commissioners' activities on behalf of the BHC
- SF Behavioral Health Services: identify any areas of need and recommendations that are continuing areas of concern of the Commission. This may include areas of concern or the delivery of services that were worked on in 2021-2022, or ones that the Commission may/should consider moving forward in 2022-2023.

BHC Meetings for Remainder of 2022

April 12: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

April 20: Behavioral Health Commission Meeting (6PM)

May 10: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

May 18: Behavioral Health Commission Meeting (6PM)

June 7: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

June 15: Behavioral Health Commission Meeting (6PM)

July 12: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

July 20: Behavioral Health Commission Meeting (6PM)

August: Summer Recess

Sept. 13: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

Sept. 21: Behavioral Health Commission Meeting (6PM)

Oct. 11: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

Oct. 19: Behavioral Health Commission Meeting (6PM)

Nov. 8: Site Review/Implementation/Executive Committees (3PM/4PM/5PM)

Nov. 16: Behavioral Health Commission Meeting (6PM)

December 3: BHC Annual Retreat (Time TBD)

Behavioral Health Commission Site Visit with Edgewood Children and Family Center

Via: virtual zoom: Site Visit

Friday, September 02, 2022

At 9:08am Interview began with the staff of Edgewood

Question #1 their staff reported the following answers

- 12 bed Facility
- Non public school
- Intensive out patient program
- Wrap around services for children in the system
- Kinship Program
- Family Resource Center posted on the website

Question #2 All the services are available to all gender non-confirming communities. They have gender-neutral bathrooms and Suicidal Ideation programs.

Question #3 Trauma informed Therapy, Mindfulness/Meditation to address depression, and various forms of physiotherapy.

Question #4 how we talk & communicate with people as well as the continued care of our staff.

Question #5 navigating the state policies along with county policies. Going to the people and bring the rules up to date. The rules are often behind the times and in need of update.

They were able to pay all their staff time in a half during the pandemic thanks to the PPN.

Reported Challenges:

- Retention/ Recruitment/Salaries
- We need rate increases and to be allowed to serve the same amount of people
- Burn out is Real
- Finding that employees see better pay and have less paperwork in other places

Reported Successes:

- Connecting with people

- Helping our community with resources and needs
- Food boxes and Education on nutritional benefits of eating healthier and how it's connected to Mental Wellness.
- They've been able to extend their Services to se more clients
- Hospital Diversion unit: 50% increase
- Crisis intervention unit: 80% increase
- Equity and maintaining a wait list

Discussion Highlights:

- Cost of residential treatment has never been updated to reflect the cost of operating and cost of living
- Expanding their out patient services as result of high cost of operating a residential treatment facility
- Calls from parents seeking therapy for children who have private insurance (finding alternatives through their own knowledge of private practices) referring outside of county services targeting those without private insurance.

Noted Questions of the Commission:

- How much Funding would help Edgewood to improve the wages as well as the wellness of the staff
- Presentation by Edgewood Staff at the BHC Behavioral Health Commission by December 2022.
- School district has been having problems with IP assessments
- Educational assessments instead of mental health and addressing learning barriers/ or learning disabilities
- They practice administration of client satifactory forms at 75% staff and 50% of consumers
- County Survey is not easily administered
- Partnering with SF State, UCSF and San Jose State

Consumer #1 Reponses to questions #1

- Edgewood has been beneficial in assisting the consumer in completing education and transportation needs (Shuttle bus).
- Edgewood supports the consumer with managing symptoms of PTSD, and anger whenever triggered in communal setting
- Edgewood has helped me with my mental health unlike other afterschool programs which were unhelpful in the past and did not address my needs
- Consumer reports getting suggestions for services from the staff of Edgewood Children and Family Center.
- Consumer reported feeling respected by the Staff of Edgewood Children and Family Center
- Consumer reported needing to repeat the 12th grade. Edgewood supported the consumer and now reports wanting to spend more time at Edgewood as a result of the supportive environment
- Consumer reported being provided the time needed to review documents signed and does not feel comfortable signing releases for other organizations outside of Edgewood
- Reports feeling motivated by the Edgewood Staff

Consumer #2 responses to questions #1

1. Consumer reported the staff being readily available to talk with the residents. They can advocate for things and reports being a person in need of social engagement with others. Consumer stated having to stop attending school due to a lot of currently existing anxiety.
2. Consumer reported the staff continues to solicit input from the students. They are on top of respect and safety protocols. Consumer reports using the program shuttle Van for transportation.
3. Consumer reported being interested in graduating from their school and not being interested in transitioning to another school. Consumer reported not being interested in larger populated schools. Feels Edgewood helps with identifying strengths. They have provided assistance with medical needs.
4. Consumer reported taking no medications and has seen all documents signed by parents.
5. Unsure of What wrap is at this time. Reported things are going well at Edgewood and that he really likes it.

Last Edgewood Staff interview:

1. Reported starting 14 years ago as a relief staff, later become a counselor in the educational section

What they do well:

- Comprehensive training program for Edgewood staff
- Evidence based practices
- Staff support each other effectively
- Services to consumers
- Strength based approach
- Stays away from punishment
- Strength base behavior
- Uncontrollable urges
- Setting with the consumers
- Trauma informed: TIS informed system
- Deep breathing exercises
- 5 days off for the Staff for Health and Wellness
- Self care/ Adequate work breaks
- Coffee and snacks
- Regular Supervision available to staff of Edgewood

Notes Taken by Behavioral Health Commission Clerk Gray

Resolution Urging the San Francisco City and County, Mayor, Board of Supervisors, The Departments of Public Health, and Homelessness and Supportive Housing to Invest Funds To Improve The Standard and Quality of Behavioral Health Services Provided by The City and County of San Francisco to Improve Equitable Access, Services Quality, Transparency, Facility and Staff Standard and Improve Departments Oversight and Quality Control Infrastructure.

WHEREAS, Permanent supportive housing residences provide behavioral health services and case management to vulnerable populations; and

WHEREAS, The people residing in these buildings often have behavioral health issues, are very low income and rarely have other housing options; and

WHEREAS, Permanent housing buildings require that building owners and operators have contracts with property management services to collect rents and oversee building maintenance and repairs; and

WHEREAS, It is contractually necessary for property management services and City and County of San Francisco funded case management and behavioral health services provided in these buildings to maintain a separation of duties; and

WHEREAS, It has been reported that supportive service staff are violating the 1996 Health Insurance Portability and Accountability Act (HIPAA), which protects the privacy of their clients; and

WHEREAS, Facilities in San Francisco that provide behavioral health services are in much need of repairs due to constant building malfunctions, proper facility size, and the inequitable distribution of facility resources per district, showing a need for better oversight of the physical infrastructure where services are provided to ensure proper maintenance and health regulation; and

WHEREAS, Some of these residences are in varying states of neglect and disrepair with incidents of mold, structural damage, missing or broken fixtures and appliances, vermin infestation, and outdated and potentially hazardous plumbing, electrical, and mechanical systems with rusty pipes and brown water; and

WHEREAS, After seeking resolution with case management, some residents have escalated their concerns through the designated channels and still fear retaliation for voicing their concerns around building conditions and property management practices; and

WHEREAS, Males significantly outnumber females in the majority of the permanent housing residences, and many female residents have expressed feeling unsafe, and cite incidents of severe bullying and direct threats of harm; and

WHEREAS, It has been reported that HSH and DPH are slow to, and often fail, to respond to community and stakeholder requests and information; and

WHEREAS; While San Francisco currently has workforce housing programs for vital employees of San Francisco such as teachers and law Enforcement Employees, these programs do not cover employees of Behavioral Health Services and housing providers, which, if extended to those employees, could aid in incentivizing employment in City-funded Behavioral Health Services and housing services, rooted in the communities they live in and serve; and

WHEREAS, According to Dr. Marlo Simmons, based on data from 11/12/20 on the total current vacancies for Behavioral Health Services positions, there are a total of 113 Vacancies (90 prioritized and moving through the hiring process, 23 vacant and not yet prioritized), that is 17.38% of BHS Positions Vacant (of the 650 who report to BHS), of which vacant positions, 9 are in the Senior Psychiatric Physician (2242 / 2243) job class, 37 are in the Behavioral Health Clinician (2930) job class, and 6 are in the Senior Behavioral Health Clinician (2932) job class;

NOW, THEREFORE, BE IT RESOLVED, That the BHCSF of San Francisco thanks the Mayor, Board of Supervisors, Department of Public Health (DPH), and Department of Homelessness and Supportive Housing (HSH) of the City and County of San Francisco for their consistent commitment to bringing funds into the fold in the City's struggle for behavioral health services that tackle the problems and issues everyday San Franciscans face in terms of their behavioral health, and key environmental factors impacting their behavioral health such as homelessness and access to housing;

AND, BE IT FURTHER RESOLVED, That residents of permanent supportive housing need an entity, agency, or City department where their grievances can be heard and addressed;

AND, BE IT FURTHER RESOLVED, That the Behavioral Health Commission of San Francisco urges the City and County of San Francisco, Mayor, Board of Supervisors, DPH, and HSH to find ways to improve their oversight and accountability infrastructure to better oversee and monitor all behavioral health programs offered by the City and County of San Francisco;

AND, BE IT FURTHER RESOLVED, That the Behavioral Health Commission of San Francisco (BHCSF) urges the City and County of San Francisco to develop a system of oversight and accountability for buildings providing permanent supportive housing to people with behavioral health challenges;

AND, BE IT FURTHER RESOLVED, That even with separate responsibilities and legal requirements between case management services and property management, it is essential that this mutual exclusivity does not result in unsafe or unnecessarily stressful conditions for residents;

AND, BE IT FURTHER RESOLVED, That the BHCSF of San Francisco urges the City and County of San Francisco, Mayor, Board of Supervisors, DPH, and HSH to expand the City's workforce housing programs to include Behavioral Health Services providers and other employees working under HSH and DPH to incentivize employees to live in the communities they work for and improve the quality of services provided by HSH and DPH employees;

AND, BE IT FURTHER RESOLVED, That the BHCSF urges HSH and DPH to make information accessible to the public around behavioral health and housing services and improve community outreach and advertisement for behavioral health and housing services, and make information accessible to all who request it as seamlessly as possible;

AND, BE IT FINALLY RESOLVED, That the BHCSF urges the city and county of San Francisco Mayor, Board of Supervisors, DPH, and HSH to allocate funds to improve staff standards and quality, hire more behavioral health services staff to meet the increasing demand for services, and ensure that those programs are being offered and operated with high-quality standards and quality of life.

FY ~~2019-2021~~-2022 Annual Report

THE BEHAVIORAL HEALTH COMMISSION
OF SAN FRANCISCO

PHOTO

Presented to

The Mayor and Commission of Supervisors of the
City and County of San Francisco

JUNE ~~2020~~2022

TABLE OF CONTENTS

EXECUTIVE SUMMARY	19
INTRODUCTION	21
The Mission.....	21
THE SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION MEMBERS	22
AND STAFF	22
A WORD FROM THE CHAIR.....	23
BEHAVIORAL HEALTH COMMISSION ACCOMPLISHMENT	Error! Bookmark not defined.
FY 2016-17<u>2020-2021</u> RESOLUTIONS	Error! Bookmark not defined.
Program Reviews	Error! Bookmark not defined.
Commissioners Activities.....	Error! Bookmark not defined.
Programs and People Honored	Error! Bookmark not defined.
BEHAVIORAL HEALTH SERVICES (BHS) HIGHLIGHTS....	Error! Bookmark not defined.
BEHAVIORAL HEALTH SERVICES NEEDS AND RECOMMENDATION	Error! Bookmark not defined.

EXECUTIVE SUMMARY

The Behavioral Health Commission of San Francisco (MHB) submits this FY ending June 2019-2022 Annual Report in accordance with the California Welfare and Institutions Code, Section 5604.2. The Commission met 11 times during this period with a robust attendance on the part of the membership. Commission meetings consisted of salient topic presentations, discussions, and public participation.

Educational presentations included

Commission input and feedback was used in preparing the California Planning Council Data Notebook; __ program reviews were conducted by Commissioners with recommendations forwarded to the Director of BHS.

In FY 20192022, the Commission focused on the following priorities:

Behavioral Health needs in the County continue to increase despite innovative programs (e.g., isolated seniors living in the Tenderloin, transgender support, vocational training, school-based Behavioral Health programs). The MHB recommends adopting a comprehensive continuum of care system; establishing culturally affirming and evidence based practices for all services; strengthening the integration of substance use and mental health treatment to ensure both disorders are treated effectively; access to same day services for prescription medications; ensuring every client has a WRAP Plan and an advanced directive; and increasing the number of therapists, psychologists and psychiatrists.

For the fiscal year ending June 20202023, the Commission is focusing on

INTRODUCTION

The Behavioral Health Commission (BHB) of San Francisco, established in 1983, as mandated by the Bronzan-McCorquodale Act within the Welfare and Institutions Code, Section 5604.2, is responsible for the following:

- Review and evaluate the community's Behavioral Health needs, services, facilities, and special problems.
- Review County agreements entered into pursuant to Section 5650.
- Advise the Commission of Supervisors and the Director of Behavioral Health Services (BHS) as to any aspect of the local Behavioral Health system.
- Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process.
- Submit an Annual Report to the Mayor and Supervisors on the needs and performance of the Behavioral Health system.
- Review and make recommendations on applicants for the appointment of the director of Behavioral Health services prior to the vote of the governing body. The Commission shall be included in the selection process prior to the vote of the governing body.
- Review and comment of the County's/City's performance outcome data and communicate its findings to the California Behavioral Health Planning Council.
- Assess the impact of the realignment of services from the State to the County on services delivered to clients and on the local community.

The Mission

The Behavioral Health Commission of San Francisco represents and ensures the inclusion of the diverse voices of consumers, citizens, and stakeholders in advising how behavioral health services are administered and provided.

Through its State and County mandates, the Behavioral Health Commission advises, reviews, advocates, and educates; with the aim of having that advice integrated, incorporated, and reflected in implementation of Behavioral Health policy; with the ultimate goal of ensuring quality behavioral health services.

Adopted October 12, 1994

**THE SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION
MEMBERS AND STAFF**

FYE June 2021	FY 2022
Seat 1, Bahlam Javier Vigil, MA	Seat 1, Bahlam Javier Vigil, MA
Seat 2, vacant	Seat 2, Genesis Vasconez
Seat 3, Carletta Jackson-Lane, JD	Seat 3, Carletta Jackson-Lane, JD*
Seat 4, Terezie Bohrer, RN, MSW, CLNC	Seat 4, Terezie Bohrer, RN, MSW, CLNC
Seat 5, Judith Klain, MPH	Seat 5, Judith Klain, MPH
Seat 6, Arthur Curry/vacant***	Seat 6, Kescha Mason
Seat 7, Gregory Ledbetter**	Seat 7, Ashel Sempel***/Vacant
Seat 8, Stephen Banuelos	Seat 8, Stephen Banuelos, LCSW Retired
Seat 9, Richelle Slota, MA	Seat 9, Vacant
Seat 10, Harriette Stevens, Ed.D.*	Seat 10, Harriette Stevens, Ed.D.*
Seat 11, Judy Drummond, MA/vacant***	Seat 11, Lisa Williams
Seat 12, Toni Parks	Seat 12, Toni Parks*
Seat 13, vacant	Seat 13, Lisa Wynn
Seat 14, vacant	Seat 14, Liza Murawski
Seat 15, Ulash Thakore-Dunlap, MFT****	Seat 15, vacant
Seat 16, Idell Wilson****	Seat 16, vacant
Seat 17, Ahsha Safai+, Supervisor	Seat 17, vacant

* Starting February 1, 2020, termed-out Commissioners may attend BHC meetings and vote until a new Commissioner appointed by a district supervisor or the Rules Committee

** Commissioners waiting for reappointment

***Commissioners resigned after July 2021

****Commissioners resigned after December 2021

+ Supervisor Ahsha Safai never attended meetings

Staff

Amber Gray, BHC Clerk, x/x/ 2022

Geoffrey Grier, Executive Director, 2/1/2021 5/31/2022

A WORD FROM THE CHAIR

The Behavioral Health Commission (BHC) of San Francisco consists of volunteers who work hard to support the behavioral and Behavioral Health needs of our San Francisco community. Each Commissioner and staff member brings unique talents.