

Mental Health SF Implementation Working Group

Approved Meeting Minutes

January 24, 2023 | 9:00 AM – 1:00 PM

This meeting was held by WebEx pursuant to the Governor's Executive Orders and Mayoral Emergency Proclamations suspending and modifying requirements for in-person meetings. During the Coronavirus Disease (COVID-19) emergency, the Mental Health San Francisco Implementation Working Group will convene remotely until it is legally authorized to meet in person.

Note: The agenda, meeting materials, and video recording will be posted at the Mental Health SF <https://www.sfdph.org/dph/comupg/knowlcol/mentalhlth/Implementation.asp>

1. Call to Order/Roll Call

The meeting was called to order at 9:11am by Chair Monique LaSarre. Facilitator Ashlyn Dadkhah completed roll call.

Committee Members Present: Steve Fields, M.P.A., Ana Gonzalez, D.O., Hali Hammer, M.D., Monique LeSarre, Psy. D., Steve Lipton, James McGuigan, Jameel Patterson, Andrea Salinas, L.M.F.T., Amy Wong

Committee Members Excused Absent: Vitka Eisen, M.S.W., Ed.D, Sara Shortt, M.S.W.

Committee Members Unexcused Absent: None.

2. Vote to Excuse Absent Member(s)

Facilitator Dadkhah reviewed the process for excusing absent members. Both absent members gave prior notice regarding their absence. Chair LaSarre motioned to approve their absences.

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|--------------------------------------|---|
| ➤ Vitka Eisen, M.S.W., Ed.D - Absent | ➤ James McGuigan - Not present for vote |
| ➤ Steve Fields, M.P.A. -Yes | ➤ Jameel Patterson – Yes |
| ➤ Ana Gonzalez, D.O. – Yes | ➤ Andrea Salinas, L.M.F.T. - Yes |
| ➤ Hali Hammer, M.D. - Yes | ➤ Sara Shortt, M.S.W. - Absent |
| ➤ Monique LeSarre, Psy. D. - Yes | ➤ Amy Wong – Yes |
| ➤ Steve Lipton - Yes | |

3. Welcome and Review of Agenda/Meeting Goals

Facilitator Jennifer James reviewed the goals of the January 2023 meeting. She reminded IWG that the chat function is disabled for panelists and the public. Chair Monique LaSarre briefly introduced the speakers for this meeting. She also reviewed the Mental Health San Francisco (MHSF) domains and reminded IWG that the charge of this work group is to advise on the design, outcomes, and effectiveness of MHSF to ensure its successful implementation of the ordinance domains.

4. Discussion Item #1: Remote Meeting Update

Facilitator James reviewed the required [findings for State and Local Requirements regarding IWG meeting virtually](#) (Emergency Order will terminate on February 28th, 2023). She reviewed the two key resolutions to be voted on by the IWG and inquired if IWG members had questions or comments regarding the State and Local Requirements. IWG did not have questions.

5. Public Comment for Discussion Item #1

No public comment.

6. Vote on Discussion Item #1

Chair LaSarre motioned to approve the Remote Meeting Findings; Member Hali Hammer seconded the motion. The IWG voted and approved the Remote Meeting Findings.

- Vitka Eisen, M.S.W., Ed.D - Absent
- Steve Fields, M.P.A. - Yes
- Ana Gonzalez, D.O. - Yes
- Hali Hammer, M.D. - Yes
- Monique LeSarre, Psy. D. - Yes
- Steve Lipton - Yes
- James McGuigan - Not present for vote
- Jameel Patterson - Yes
- Andrea Salinas, L.M.F.T. - Yes
- Sara Shortt, M.S.W. - Absent
- Amy Wong - Yes

7. Discussion Item #2: Approve Meeting Minutes

Chair LaSarre opened the discussion for the IWG to make changes to the December 2022 meeting minutes. IWG members did not have changes to the meeting minutes.

8. Public Comment for Discussion Item #2

No public comment.

9. Vote on Discussion Item #2

Chair LaSarre motioned to approve the December 2022 meeting minutes; Member Steve Fields seconded the motion. December 2022 meeting minutes were voted on and approved by the IWG.

- Vitka Eisen, M.S.W., Ed.D - Absent
- Steve Fields, M.P.A. - Yes
- Ana Gonzalez, D.O. - Yes
- Hali Hammer, M.D. - Yes
- Monique LeSarre, Psy. D. - Yes
- Steve Lipton - Yes
- James McGuigan - Not present for vote
- Jameel Patterson - Yes
- Andrea Salinas, L.M.F.T. - Yes
- Sara Shortt, M.S.W. - Absent
- Amy Wong - Yes

10. Discussion Item #3: MHSF Director's Update

Director Hillary Kunins explained that the Department of Public Health (DPH) is required to submit an implementation report for MHSF, to the Board of Supervisors and the Mayor, by February 1st, 2023. Sections in the report include: summary of MHSF structure, priority population & core metrics, milestones & accomplishments for 2022, and system-wide & program-specific goals for 2023. Highlights from this report will be shared in the February 2023 IWG meeting.

Director Kunins shared that the Office of the Chief Medical Examiner announced preliminary overdose data that reported 620 overdoses in 2022. This is a decrease from 2021 (640 overdose deaths) and 2020 (over 700 overdose deaths).

Director Kunins shared that she recently represented San Francisco on a panel for the Bay Area Legislative Caucus. This panel was focused on issues in mental health and regional coordination of services in California. There was an interest in how to expand regional approaches to coordinate care treatment, with a priority for in-county services. Director Kunins noted the challenge of Medi-Cal benefits being county-specific; coordinating benefits to transfer outside of the county can take many months. As well, people experiencing homelessness or that have been impacted by the criminal legal system may have additional challenges in receiving Medi-Cal benefits.

Director Kunins shared that there are several legislative proposals under discussion regarding overdoses at the state level. She and her team made recommendations around high-impact interventions that could

drive overdoses down. One recommendation is to expand Naloxone supply with state assistance, to saturate Naloxone availability. She is hopeful that the bill for safe consumption will once again be passed.

San Francisco is part of the first cohort to implement CARE Court in October 2023, and there is concern about the current capacity to absorb potentially additional clients. Director Kunins is hopeful for state financial support to increase treatment access.

The challenges of the behavioral health workforce were also discussed at the panel for the Bay Area Legislative Caucus. Director Kunins reported that she raised that San Francisco's contracted providers and City staff are finding significant challenges to hire sufficient staffing as treatment and recovery services are in process of being expanded. Governor Newsom had initiated a list of workforce investments in the state budget. Director Kunins noted that even though maintained commitment has been encouraged for the 2024 budget, the proposed workforce initiatives may be delayed due to a decline in state general funds.

Discussion

Regarding CARE Court implementation, Member Steve Fields asked what the plan is to increase in-person collaboration with community-based organizations (CBOs). He specifically asked if there was a plan for engaging CBOs in face-to-face discussions. Director Kunins answered that DPH has an internal planning committee that is in process of addressing this concern. She mentioned that this topic will be addressed in an upcoming meeting.

Vice Chair Jameel Patterson noted that he supports the intersection of drug addiction and mental health on the healthcare continuum. As well, he voiced support that staffing in mental health clinics is an area for concern, as well as seconded Member Fields' previous question/comment. Director Kunins echoed his comment about the need to integrate mental health and substance-use care, and further down the line, physical care.

Member Hali Hammer commented on the December 2022 minutes regarding overdose deaths. She highlighted that overdose deaths had peaked in 2020 and have since been declining yearly.

In relation to overdose deaths, Chair LaSarre asked a multifold question: (1) has there been any movement in the conversation around a media campaign, (2) what is the pathway for Naloxone distribution to CBOs and directly to communities, (3) what are the specific delays in funding for CARE court, and (4) are there any pathways through the challenges of opening a safe-consumption sites in San Francisco? Director Kunins agreed with the needs for public education and noted that DPH has built out additional capacity. She expects DPH to be able to take on more risk-reduction/mental health wellness campaigns. Director Kunins said she needs to review race disparity data and highlighted DPH intentions to release grants focused on overdose risk reduction in the Black/African American community. DPH is aiming to include organizations that have expertise in cultural competency in working with Black/African American communities. Regarding CARE Court, Director Kunins responded that that state has only provided start-up funding for administrative functions and not yet ongoing funding. Regarding safe consumption sites, Director Kunins relayed that the City Attorney has been advised on the "New York Model", where there is public funding for wrap-around services, and only private money is allowed for safe consumption.. As well, Director Kunins encouraged the IWG to participate in upcoming safe consumption webinars.

Member Steve Lipton asked Director Kunins if there are meetings being planned with the other pilot counties for CARE Court to discuss best practices. She answered that the County Behavioral Health Directors Association (CBHDA) is convening regularly with the cohort one (pilot) counties. She expects this to continue throughout implementation.

Chair LaSarre requested Director Kunins to share planned DPH meetings/webinars/conversations, so IWG can better provide support moving forward.

11. Public Comment for Discussion Item #3

No public comment.

12. Discussion Item #4: 2023 Level Setting

Facilitator James overviewed the current visualization that has been utilized for the past two years to illustrate MHSF domains and domain components. She informed IWG that at this stage in MHSF implementation, the City Planning Team has recognized the need to better represent the vision of MHSF, especially in how it overlays with the rest of behavioral health services and treatment services. Ms. Valerie Kirby provided a brief explanation that a new visual is needed to satisfy MHSF Implementation Report recommendations, as well as to better serve consumers in explaining how to engage and move through MHSF pathways and the system of care. Ms. Kirby noted that the visual is used outside of IWG meetings to represent MHSF and will want IWG recommendations on how a new visual can best represent MHSF.

Discussion

Chair LaSarre noted that IWG requests for different meeting content and approach is still in consideration and will be discussed at the IWG Retreat.

Facilitator James reviewed the draft for topics to be discussed in 2023 IWG meetings. She explained topic sequencing and noted that the next draft should reflect which New Beds and Facilities (NB&F) teams will be presenting each month for the remainder of the year.

Ms. Kirby acknowledged and emphasized that her team at Behavioral Health Services (BHS) hears IWG regarding interest on changing the structure of IWG meetings. She offered her opinion that a change in structure may change what topics will be discussed, as well as how much time will be allotted to present on a topic. Ms. Kirby explained that the calendar for the Mental Health Service Center (MHSC) is not yet planned because BHS is waiting for feedback from the IWG March Retreat and they're working through internal planning for more substantial presentations.

Discussion

Vice Chair Patterson explained the mapping model he uses at his organization includes connecting with local people, local businesses, local organizations, and local government. He suggested connecting with local merchants/businesses to provide them with a list of resources to call to help with people experiencing homelessness and mental health issues. He noted that there are a lot of people that need help that are camped in front of businesses, especially in Tenderloin. Facilitator James agreed and added that this may be connected to DPH's Public Relations campaign. She also stated that this could relate to DPH's community engagement work.

Member Fields expressed concern that MHSF is still locked into a specific project-based discussion system, rather than a system that explores the goals for a better system of care. He urged recentring the development of a system of care with continuum elements that focus on recovery, early intervention, and prevention. He noted that the definition/purpose of the system of care is yet to be defined by DPH.

Member Lipton thanked Vice Chair Patterson for his comment. He also raised that it is difficult to get people into treatment due to capacity. He called for more strategies to move people into treatment settings.

Member Hammer highlighted the Office of Coordinated Care (OCC) as a domain that can be used to answer concerns of IWG members. She also asked members to consider how they would measure success based on the concerns that they raised.

Regarding a goal of MHSF to have better integration of the system of care, Member Andrea Salinas raised that a consideration for a population that has changed significantly over the last twenty

years is missing. Further, she commented that resources and programs have not yet adapted to a population where primary diagnoses are not necessarily mental health diagnoses. Better assessing the needs of this population would refine the system of care. Facilitator James assured that these topics would be discussed in the March Retreat.

Chair LaSarre echoed Vice Chair Patterson's comment and asked for IWG input on putting together a postcard that has information for services, providers, Naloxone distribution, drug testing strips, etc.

Facilitator James overviewed the IWG March Retreat through logistics, organizing time, and potential topics. She lifted several questions and noted that a discussion group will be charged with further considerations. Chair LaSarre, Vice Chair Patterson, Member McGuigan, Member Fields, Member Wong and Member Lipton volunteered to help plan the March Retreat.

13. Public Comment for Discussion Item #4

No public comment.

14. Break

10:35am-10:40am

15. Discussion Item #5: Community Engagement Update & Brainstorm

Chair LaSarre introduced Presenter Kirby from DPH and Deborah Oh from InterEthnica, the community engagement project contractor. Presenter Kirby reviewed suggestions for new opportunities for MHSF community engagement. She shared that finding out what the community needs is a priority for the BHS team to better engage clients in a consumer-friendly way.

Presenter Kirby asked IWG to share their ideas for community engagement via virtual white board regarding near-term opportunities (see screenshot below of the virtual white board after discussion).

Discussion

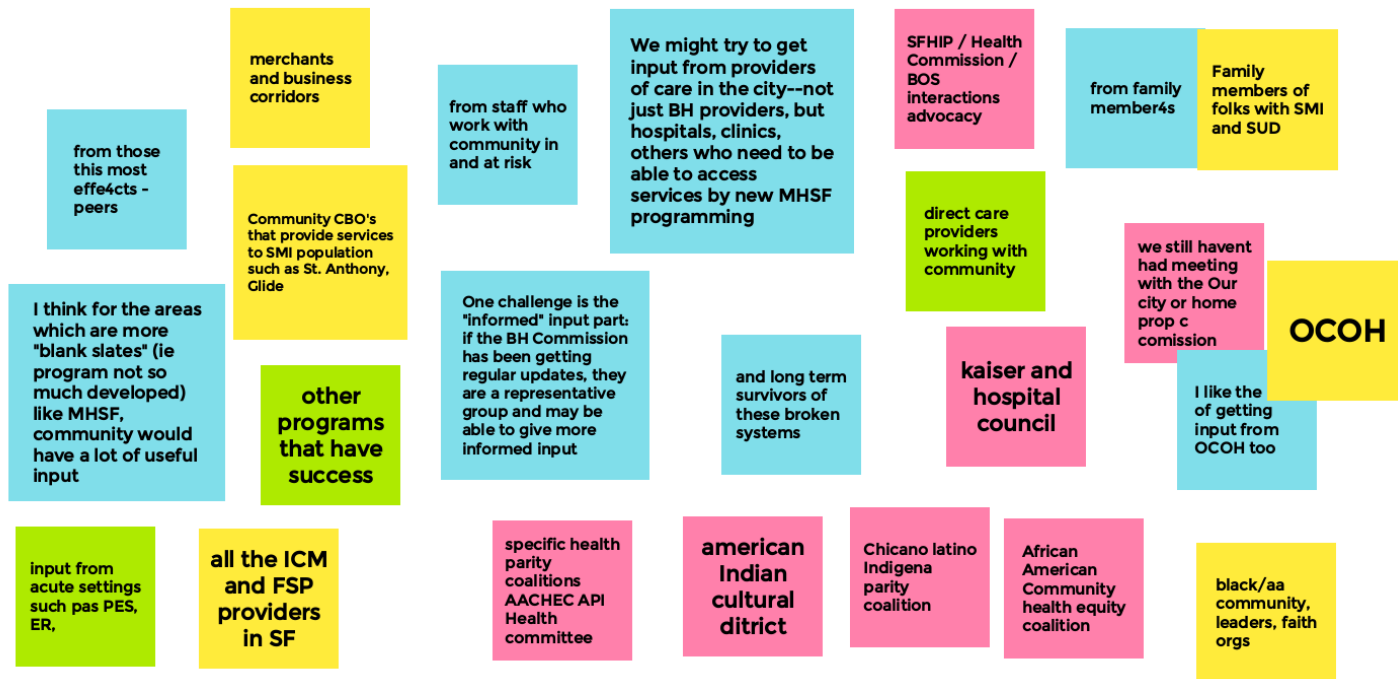
Referencing the Jamboard, Presenter Kirby asked IWG what specifically about Our City, Our Home (OCOH) would further inform their work. Member Salinas suggested that there could be a better collaboration between MHSF and OCOH in legislative visions.

Referencing the Jamboard, Presenter Kirby suggested bringing representatives from several cultural/community groups to the couple of the budgeted listening sessions. Chair LaSarre suggested scheduling a listening session with San Francisco Health Improvement Partnership, which have release a health disparities report that spoke to racial disparity issues in healthcare. This would provide representations from hospitals, which aligns with engaging service providers to provide integrative care. Additionally, combining existing datasets would provide a better understanding of which service providers are focusing on which service areas.

Presenter Kirby also called out a theme of connecting with direct service providers both in the community and acute settings. Member Fields emphasized the importance of solidifying the structure of the IWG, so they stay away from gathering input that they do not have the authority or ability to address via implementation. Presenter Kirby clarified that listening sessions would not occur until after the IWG March retreat, during which more IWG authority will be further strategized.

Chair LaSarre requested to bring a representative from Population Health into a future discussion.

Where do you feel the IWG most needs to hear from the community to make informed recommendations? (MHSF domain? Program? Population? Key Metric?)



16. Public Comment for Discussion Item #5

No public comment.

17. Discussion Item #6: Part 1: OCC & Case Management Expansion Update

Chair LaSarre welcomed Presenters Heather Weisbrod and Dr. Angelica Almeida. Presenter Weisbrod explained that this discussion has been split into two parts to begin to weave together how OCC and case management expansion work together within the system of care.

Presenter Weisbrod reminded the IWG of the goal of the OCC. She overviewed the two main components of OCC structure: Behavioral Health Access Programs and Care Management & Transition support Services. As a reminder, she also demonstrated the overlapping of OCC Care Planning: Office of Coordinated Care and Case Management Expansion, via a visual.

Presenter Weisbrod shared OCC Care updates. The updates included information about EPIC launch, Bridge & Engagement Services Team (BEST) data, and engagement with criminal justice system partners. Presenter Weisbrod explained the OCC's internal working definitions of care coordination, care management, and case management. Using a visual, she explained that (specific activity) care coordination is nested within case management; case management is nested within care management, and care management is nested within (overarching approach & goal) coordinated care.

Dr. Almeida stated that the goal of presenting with Ms. Weisbrod is to exemplify the collaboration between OCC and the system of care. She provided brief updates about Assembly/Senate bills that impact 5150/ involuntary holds as of January 1, 2023.

Dr. Almeida shared that LPS delegated agreements are also in process to help bridge the gap in data sharing between hospitals and the county via new requirements. In addition, facilities are designated to have memorandums of understanding so data can be gathered for a complete view of what involuntary hold services looks like in San Francisco.

Dr. Almeida shared that 5150 trainings for BHS are a working goal. This includes providing authorization for individuals to initiate 5150 holds for assessment. To integrate this work into the system of care, the 5150 training will now be overseen by Dr. Almeida. The overarching goal is to use client-centered and recovery-oriented tools in the system of care.

Presenter Weisbrod overviewed systematic care coordination and follow up for 5150 holds. The overview included defining goals as well as explaining approach to this work. Approaches include collaboration, using data, and planned interventions. She mentioned that every 5150 will be addressed daily. As well, there will be an effort in closing the loop, where clients do not drop off between the hospital and a program.

Dr. Almeida briefly previewed what information OCC plans to cover during the next IWG meeting in February 2023. These topics include case management expansion & countermeasures, and the flow between OCC and the system of care.

Discussion

Member Salinas asked if there is a specific team under OCC that is designated to work with the forensics population. Presenter Weisbrod answered that the team charged with this task is the Care Management Transition Support and BEST services. She emphasized that in order not to disrupt current flows, they will be focusing on gaps that are still presenting during the transition out of the criminal justice system. Dr. Almeida added that the aim for the system of care continuum is to have all programs have the capacity to help clients regardless of complexity of needs. Member Salinas also offered her opinion that the presented definition of case management is missing ICM treatment components. She asked for confirmation that case management is on a continuum with care management and care coordination occurring the presentation definitions. Dr. Almeida confirmed that all are interrelated, and the visual is not meant to minimize any the components of care coordination. Member Salinas also highlighted the importance of the role of case managers in ongoing outreach and linkage. Dr. Almeida echoed Member Salinas' thoughts around the opportunity that MHSF has in realigning behavioral health work in the changing landscape of the behavioral healthcare continuum.

Member Fields asked if 5150 training is planned to be done with San Francisco General Hospital. Dr. Almeida responded that the pieces of legislation shared during the presentation mostly focus on the 5150 hold timetable, and provider institutions have to ensure patients receive the appropriate services during discharge. He also asked if CBOs who traditionally receive 5150 patients have been included in data collection. Member Fields called for guidance from DPH on prioritizing criminal justice referrals along with hospital 5150 referrals. Dr. Almeida responded that making systemic changes will streamline processes and clarify the roles of different programs, so that they system can serve everyone.

Member McGuigan asked what the qualifiers are for a 5150 hold, as well as who is allowed to make those decisions. Dr. Almeida briefly answered that it is critical that merchants can access programs like the Street Crisis Response Team (SCRT) or other comprehensive crisis programs to help people experiencing behavioral health concerns. Further, the legal threshold for a 5150 involuntary hold is when a person becomes an imminent danger to themselves or others, or due to a grave disability, where a person is unable to care for their basic needs due to a mental health condition. Member McGuigan suggested discussing more information about 5150 involuntary holds at the next IWG meeting.

Vice Chair Patterson echoed the challenges in best serving people experiencing homelessness who exercise their rights to refuse services.

Member Lipton raised that 5150 holds have historically been abused and asked how care coordination is going to work with facilities to address the inappropriate use of 5150 holds. He asked how providers will be engaged in serving people who present to hospitals/facilities that are not county residents. Dr. Almeida responded that under Director Kunins, quality management will

be combing through written 5150 holds to establish the appropriate use of the hold. Further, DPH holds the discretion to revoke the authority to initiate holds (does not include law enforcement). Member Lipton emphasized the issue of hospitals not having the authority to reverse a 5150 hold that had been established by law enforcement.

18. Public Comment for Discussion Item #6

No public comment.

19. Discussion Item #7: Voting on Chair and Vice Chair Seats 2023

Facilitator James expressed appreciation for Chair LaSarre and Vice Chair Patterson's efforts in the past year. She asked for hands to volunteer for Chair and Vice Chair positions for 2023. Member Hammer asked if Chair LaSarre and Vice Chair Patterson were interested in continuing their service. Chair LaSarre stated she would like to continue her service, and Vice Chair Patterson stated that he would be stepping down. Member Lipton motioned to vote for Chair LaSarre to continue her service as IWG Chair. Member Wong seconded. Facilitator Dadkhah opened voting with a motion from Chair LaSarre and a second from Member Hammer. IWG voted and Chair LaSarre will continue as IWG Chair.

- Vitka Eisen, M.S.W., Ed.D - Absent
- Steve Fields, M.P.A. - Yes
- Ana Gonzalez, D.O. - Yes
- Hali Hammer, M.D. - Yes
- Monique LeSarre, Psy. D. - Yes
- Steve Lipton - Yes
- James McGuigan - Yes
- Jameel Patterson - Yes
- Andrea Salinas, L.M.F.T. - Yes
- Sara Shortt, M.S.W. - Absent
- Amy Wong - Yes

Facilitator James asked for hands to volunteer for IWG Vice Chair. Chair LaSarre and Member Hammer nominated Member Salinas. Member Salinas declined. Chair LaSarre nominated Member Wong. Member Wong declined and nominated Member Fields and Member Lipton. Member Fields declined. Chair LaSarre motioned to postpone voting in the Vice Chair seat to the next IWG meeting. Member Fields seconded.

- Vitka Eisen, M.S.W., Ed.D - Absent
- Steve Fields, M.P.A. - Yes
- Ana Gonzalez, D.O. - Yes
- Hali Hammer, M.D. - Yes
- Monique LeSarre, Psy. D. - Yes
- Steve Lipton - Yes
- James McGuigan - Yes
- Jameel Patterson - Yes
- Andrea Salinas, L.M.F.T. - Yes
- Sara Shortt, M.S.W. - Absent
- Amy Wong - Yes

20. Public comment for Discussion Item #7

No public comment.

21. Public Comment for any other matter within the jurisdiction of the Committee not on the agenda

No public comment.

22. Draft Planning & Sequencing for 2023 & Housekeeping

Facilitator James overviewed the topic planned for discussion for the February IWG meeting. She also noted that starting in March 2023, IWG meetings will be held in person.

The next meeting will be on Tuesday, February 28, 2023 at 9:00am-1:00pm.

A Mapping Discussion group will be held on February 7, 2023 at 11:30a-12:30p.

The Community Engagement and Retreat Planning Discussion Groups time are TBD. The retreat will be

held in place of the March IWG meeting.

23. Adjourn

Chair LaSarre motioned to adjourn the meeting; Member Fields seconded. Meeting adjourned at 12:32 pm.