

December 14, 2023



Mental Health San Francisco Implementation Working Group



San Francisco
Department of Public Health

harder  co | community
research

Land Acknowledgement

The San Francisco Department of Public Health staff acknowledges that we are on the unceded ancestral homeland of the Ramaytush (Rah-mytoosh) Ohlone (O-lon-ee) who are the original inhabitants of the San Francisco Peninsula. As the Indigenous stewards of this land, and in accordance with their traditions, the Ramaytush Ohlone have never ceded, lost, nor forgotten their responsibilities as the caretakers of this place, as well as for all peoples who reside in their traditional territory. As guests, we recognize that we benefit from living and working on their traditional homeland. We wish to pay our respects by acknowledging the Ancestors, Elders, and Relatives of the Ramaytush Ohlone community and by affirming their sovereign rights as First Peoples.

A hand is visible on the left side of the image, pointing towards the text. The background is a blurred image of a person's face, overlaid with a blue tint. The text is centered and reads "Call to Order / Roll Call".

Call to Order / Roll Call

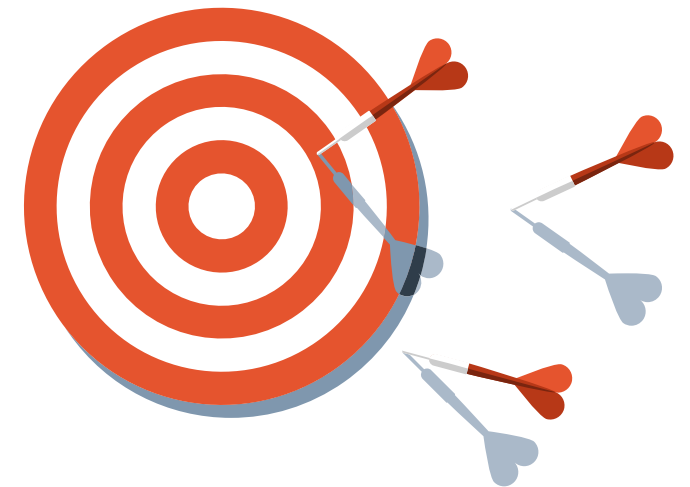
Vote to **Excuse Absent Member(s)**

Decision Rule:

- Simply majority, by roll call

Meeting Goals

- Receive updates on Behavioral Health Services and Mental Health SF
- Receive an update on the SoMa RISE pilot evaluation
- Receive an update on the DPH annual implementation report
- Receive an update on IWG community engagement
- Receive an update on IWG membership and governance
- Plan for upcoming IWG meetings



All materials can be found on the MHSF IWG website at:

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

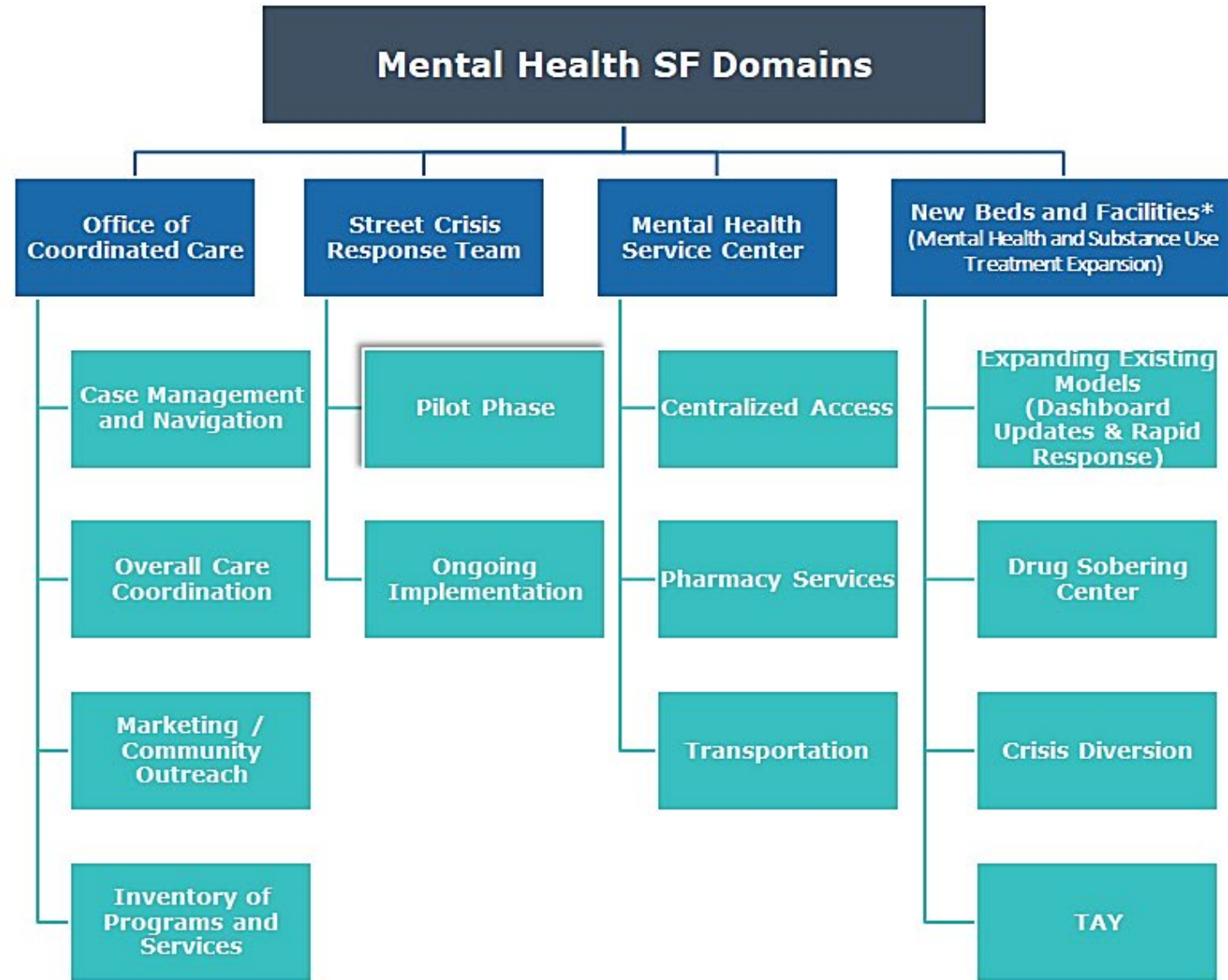
Mental Health SF Domains



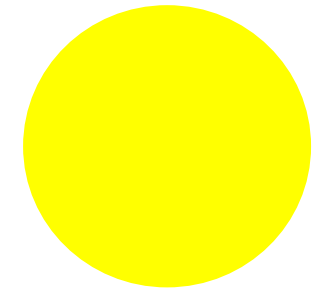
Dr. Hillary Kunins



Kelly Kirkpatrick



Dr. David Pating



Diana Castillo



Haley Mousseau



9:15 – 9:20 AM

Discussion Item #1

Approve Meeting Minutes

All materials can be found on the MHSF IWG website at:

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>



Public Comment for Discussion Item #1

Approve Meeting Minutes

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

- Press '#' and then '#' again
- Press *3 to speak and wait for system to prompt that you have been unmuted



Vote on Discussion Item #1

Approve Meeting Minutes

Decision Rule:

- Simply majority, by roll call



9:20-10:00 AM

Discussion Item #2

MHSF Director's Update

All materials can be found on the MHSF IWG website at:

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

San Francisco Department of Public Health Division of Behavioral Health Services

Mental Health SF Implementation Working Group: Director's Update
December 14, 2023

Hillary Kunins, MD, MPH, MS

Director of Behavioral Health Services and Mental Health SF
San Francisco Department of Public Health

Agenda

- General updates
- MHSF program updates



General Updates

- **Upcoming hearings:**

- Status of San Francisco's Residential Treatment Bed Expansion Plan (January TBD)

Hearing on the status of the City's residential treatment bed expansion plan for people suffering from mental health and substance use disorders; additional needs for treatment beds, particularly for higher acuity levels of care; barriers and solutions to achieving the City's goals of expanding treatment beds across its behavioral health system; and requesting the Department of Public Health, Department of Homelessness and Supportive Housing, and the San Francisco Superior Court - Collaborative Courts to report.

- Street Teams Audit Hearing (January, TBD)

MHSF Domain Updates: SCRT

Monthly dashboards continue to be posted at

<https://sf.gov/street-crisis-response-team>

MHSF Domain Updates: Office of Coordinated Care

- **BEST** is getting an award!
- Building **7-day/week** services
- **Follow-up care:** October data (also in SCRT dashboard)
 - In October 2023, the Fire Department sent 230 total clients to OCC.
 - 195 remained with OCC for assessment of follow-up needs
 - 29 cross referred to the Department of Homelessness and Supportive Housing (HSH)
 - 6 had no follow-up indicated
 - October OCC Follow-Up Assessment Outcomes:
 - 53 (27%) were connected or reconnected to existing providers
 - 33 (17%) were connected to a new Behavioral Health care or DPH follow-up team
 - 104 (53%) were provided care coordination services
 - 5 (3%) insufficient information for DPH follow up

MHSF Domain Updates: New Beds & Facilities

- **SoMa RISE** pilot initial evaluation will be presented today
- **Crisis Stabilization Unit:** Community input process anticipated in January
- **Dual diagnosis beds:** Added 7 contracted beds

MHSF Updates

Analytics & Evaluation:

- With new staffing, ramping up to make several new data dashboards public
 - 5150 follow-up, ICM wait times, mental health and substance use residential wait times

Office of Overdose Prevention: Naloxone distribution and training update

- Since April 2023: Distributed 4,524 doses of naloxone to various community-based organizations and other organizations in San Francisco.
- Since February 2023: Held 75 opioid overdose recognition and response trainings with 1,592 attendees.
 - Participating organizations include: CBOs, faith-based organizations, schools, city agencies, entertainment, and housing sites.

Public Comment for Discussion Item #2

MHSF Director's Update

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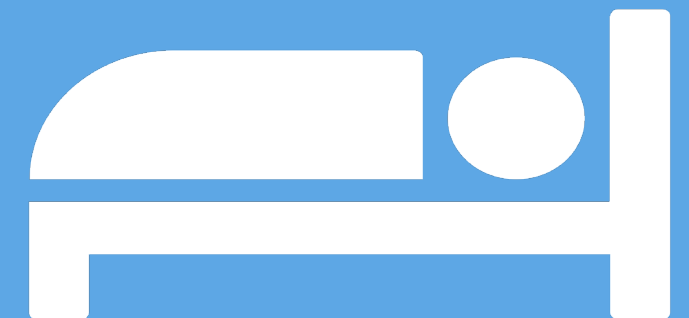
- Press '#' and then '#' again
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10:00-11:00 AM

Discussion Item #3

Update on SoMa RISE Program



All materials can be found on the MHSF IWG website at

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

SOMA RISE

Year 1: Pilot Evaluation
MHSF New Beds Report to IWG
12/14/2023

David Pating, MD

Co-Lead, SFDPH New Beds and Facilities

Diana Castillo, LCSW

Director of Crisis Services, HR360

Haley Mousseau, MA

Senior Research Consultant, Harder & Co

SoMa RISE: a drug sobering center

In 2019, a drug sobering center was:

- Top priority of the SFDPH Methamphetamine Task Force
- Mandated by MHSF legislation.

In June 2022, SoMa RISE opened at 1076 Howard Street in partnership with Health Right 360.

SoMa RISE is designed to serve the MHSF population, particularly:

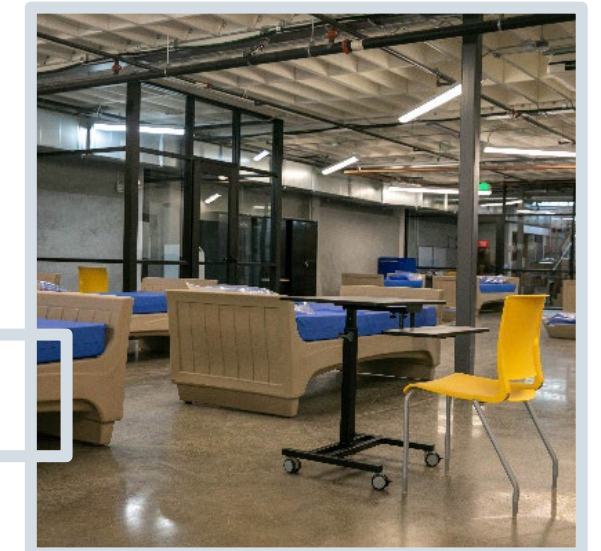
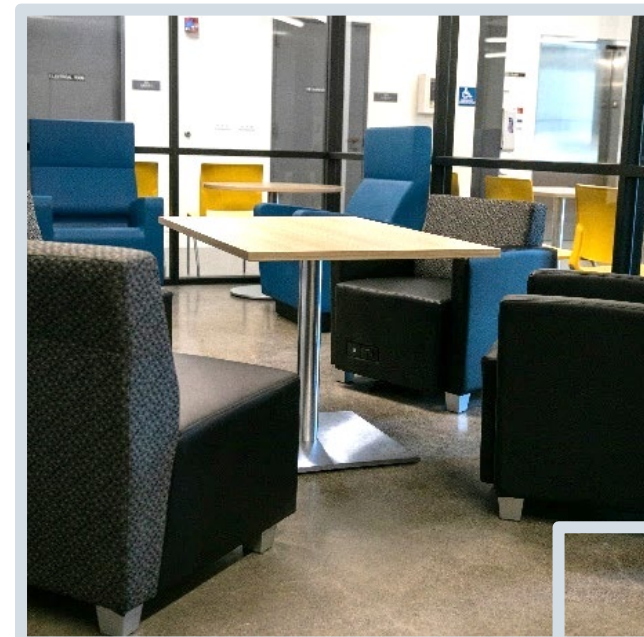
- people experiencing homelessness, who have serious mental health or substance use condition.



About SoMa RISE

SoMa RISE provides:

- a safe welcoming space for people to rest & stabilize, and connect to care and services.
- Offers a person centered approach, including: “dignity services” and “radical hospitality.”
- Located in the South of Market (SoMa) district and intended to serve the SoMa and Tenderloin neighborhoods
- Open 24/7 for walk-ins & drop-off. 20 available beds.



SoMa RISE Goals

- 1. Safe and welcoming place to 'come down'**
- 2. Serve people in crisis who are using drugs**
- 3. Linkage to services**

dignity services:

food, shower, rest, health screening,
peer-support, referrals and outreach.



SoMa RISE Timeline & Evaluation



Evaluation

In February 2023, Harder+Company Community Research contracted for Year 1 evaluation of DSC* pilot.

1. Is it an accessible program with minimal barriers to entrance and participation?
2. Does it serve people experiencing drug-related crisis, especially those referred by crisis street teams?
3. Does it link clients to treatment or other community services?
4. Has it impacted the community, either positively or negatively?

*DSC: drug sobering center

Evaluation Methods

Evaluated program in three phases, including participatory ‘sensemaking sessions’ with DPH and SoMa RISE leadership

Phase 1: Review population served and the nature of visits to SoMa RISE

- Review of six months (Oct – Mar) of pilot program data from EPIC

Phase 2: Explore perspectives on pilot purpose, successes, and challenges

- Focus group with SoMa RISE staff
- Key partner interviews
- MHSF IWG site visit

Phase 3: bring it all together and reflect on community data

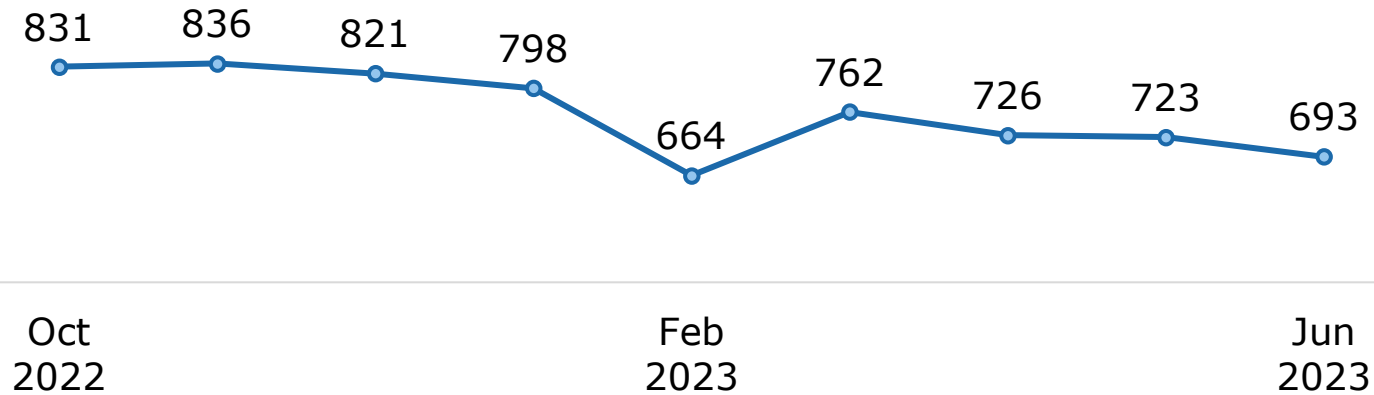
- Review and refine definitions of success, recommendations from different stakeholders, and considerations for programming and future development
- Customer satisfaction data
- Media scan
- Analysis of 311 calls



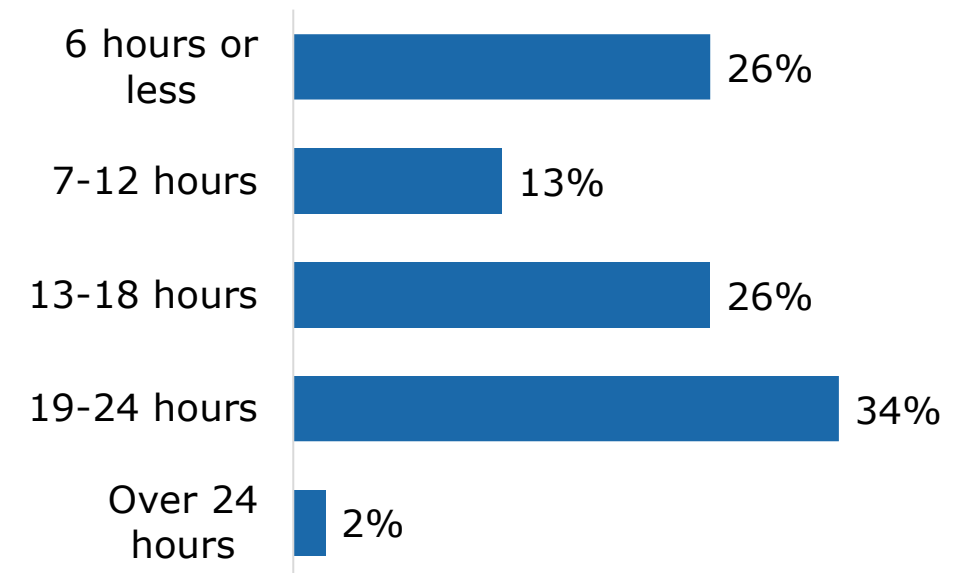
Who is Served?

A high volume of guests visit SoMa RISE each day and the site is typically at capacity each night.

Monthly Visits to SoMa RISE



Duration of guest stays

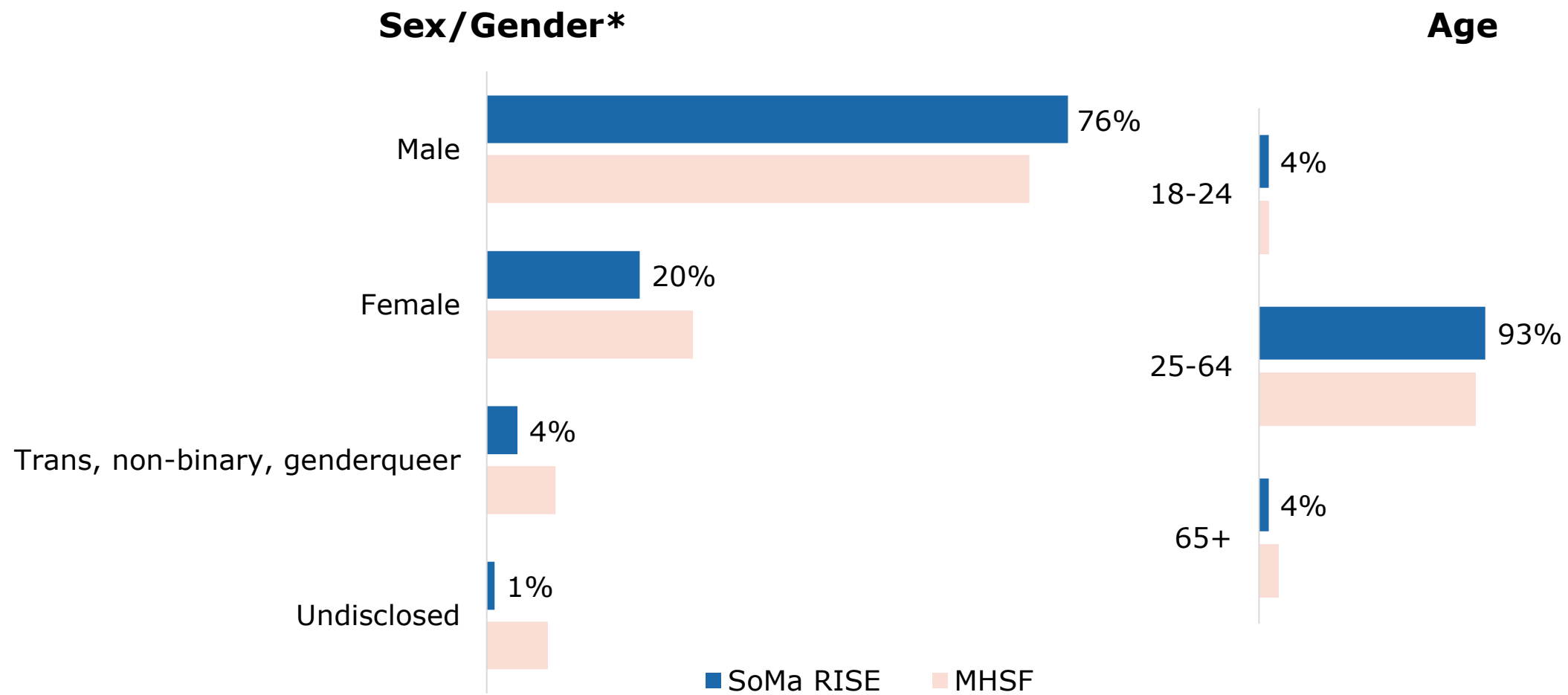


(average 14 hours)

SoMa RISE served 1422 unique visitors from Oct-June with an average of 32 visits/day

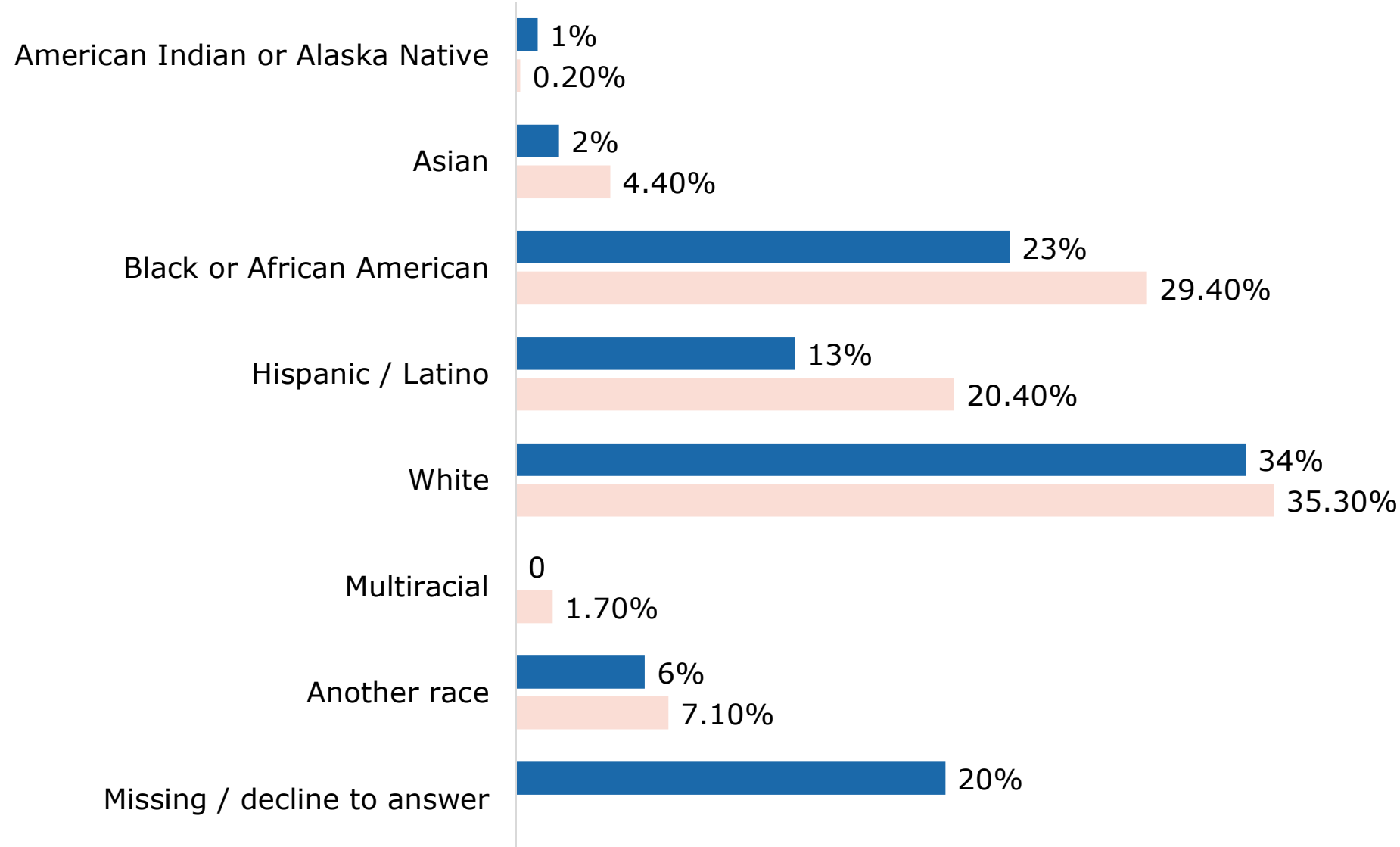
Who is Served?

Demographic characteristics of SoMa RISE guests and MHSF priority population

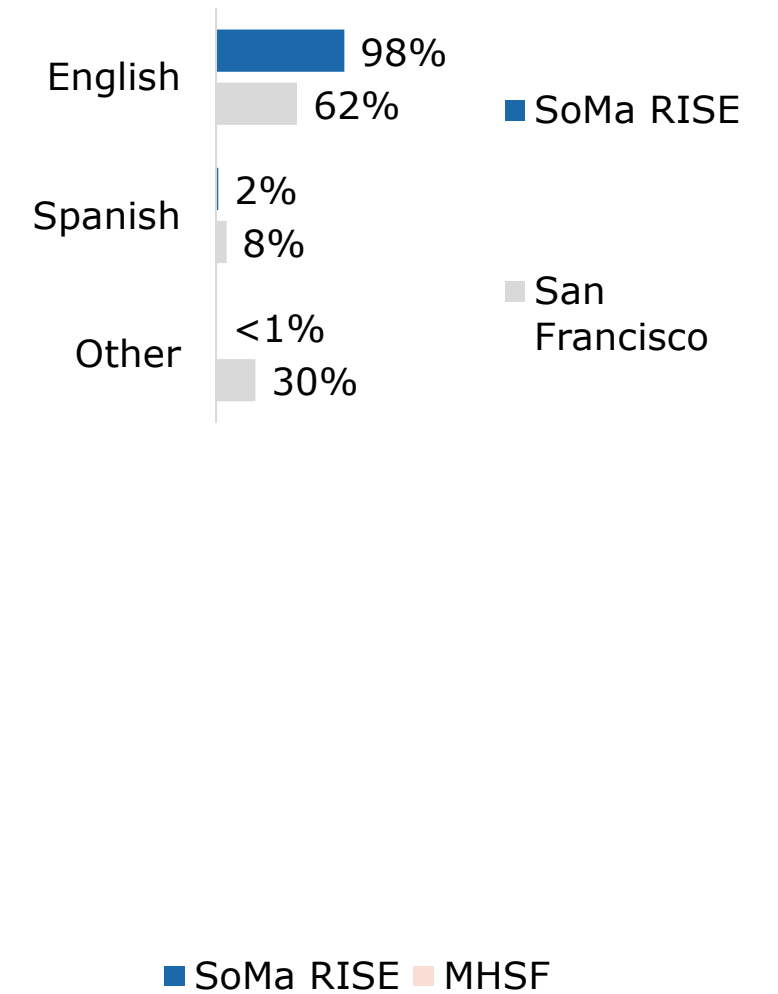


Communities Served

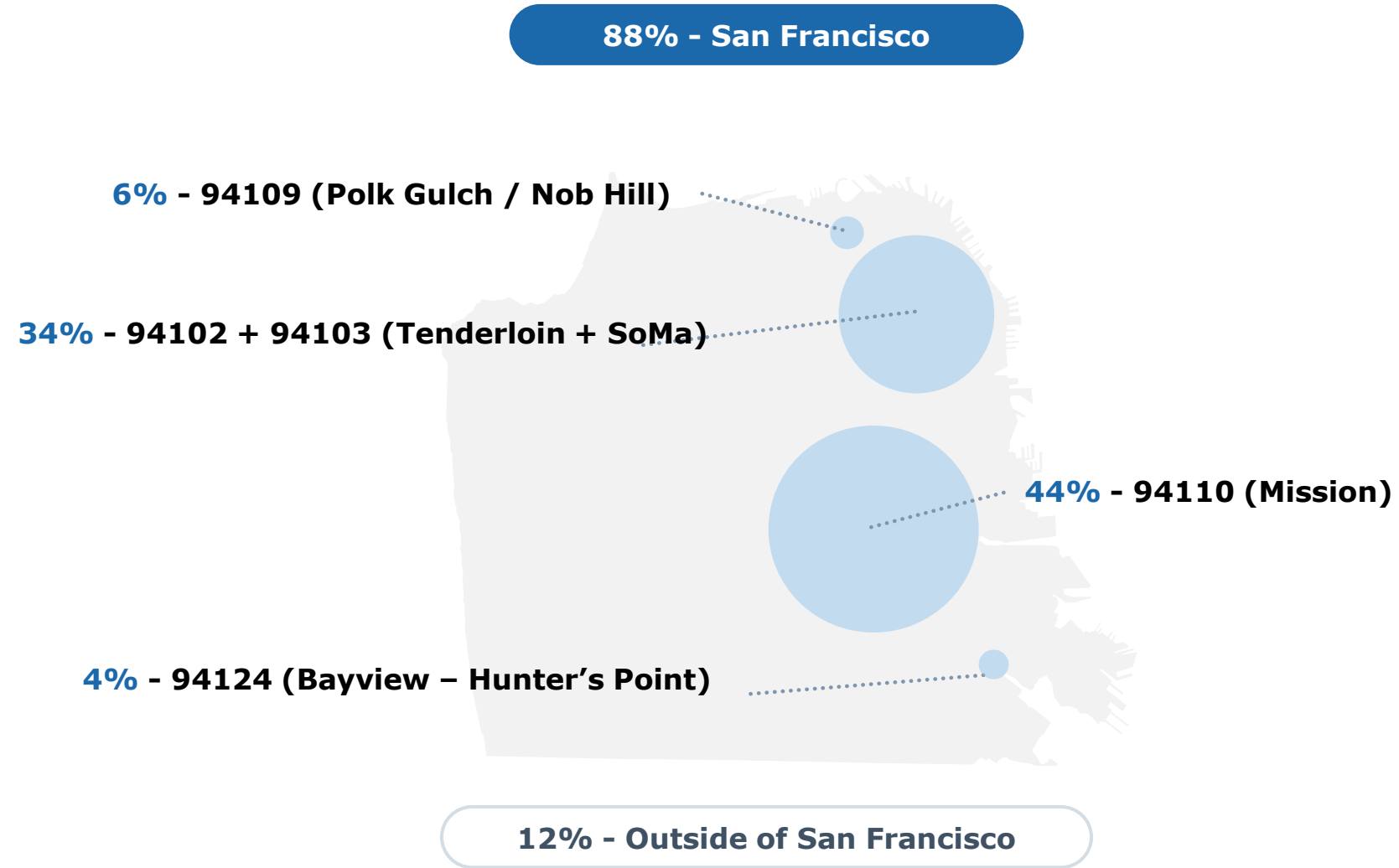
Race/Ethnicity



Language



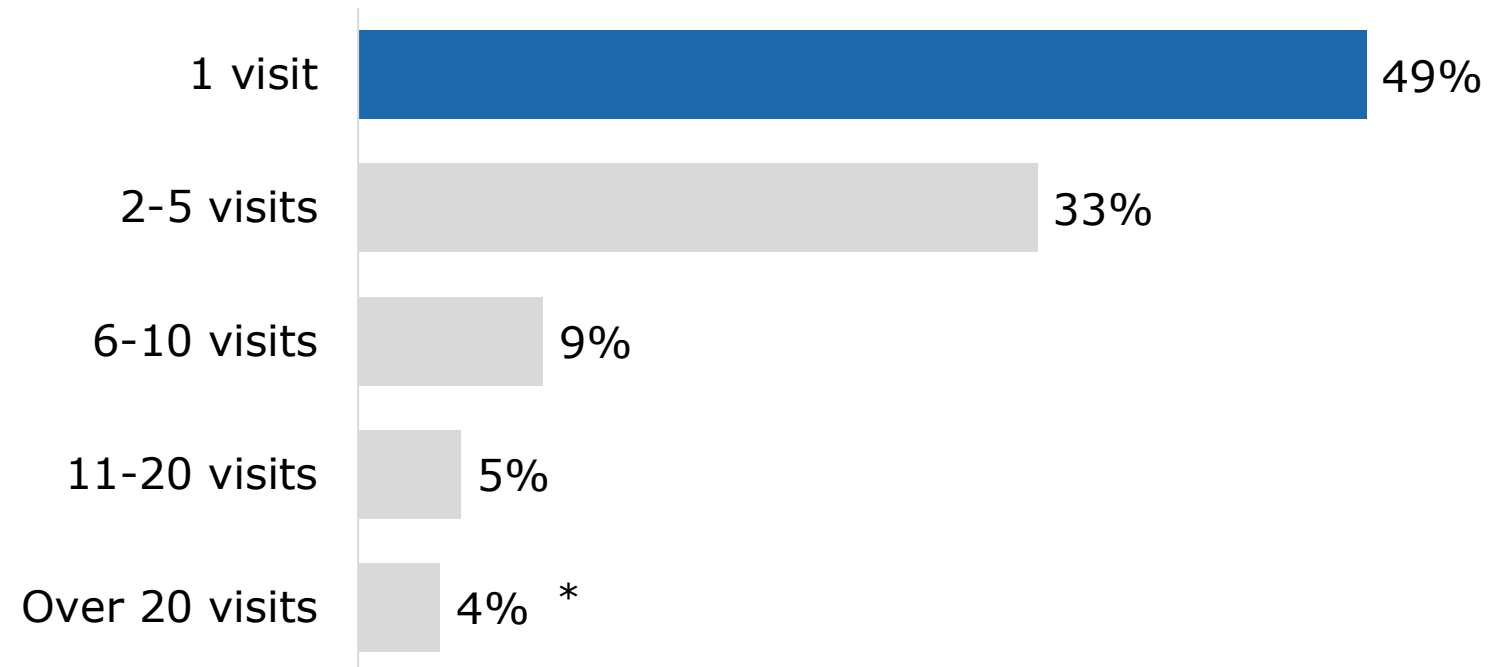
Communities Served (by zip code)



Who is Served?

About half of SoMa RISE guests (51 percent) returned to the pilot program at least once within a six-month period.

Guests by number of visits



* Note: Forty individuals (4% of unduplicated guests) accounted for 37% of all visits to SoMa RISE between October 2022 and March 2023. An opportunity engagement and quality improvement.

Goal 1: Is SoMa RISE Safe and Welcoming?

- ▶ **SoMa RISE 24-hour model caters to guests' needs.** It provides opportunity to rest, and time for guests to think about their next steps.

"[Having 24 hours allows guests to] sit and process things, figure out what they really want to do, [and] what their next step is."

- SoMa RISE staff



"The shower was so clean and well attended to with supplies!" -Guest



"I like the fact I can rest and recuperate without [being] disturbed." - Guest

≠ Is SoMa RISE Safe and Welcoming?

► **SoMa RISE offers a safe and welcoming environment** for guests seeking brief respite.

- **85%** strongly agree that the **staff made them feel welcome**, showed they care, and gave me the help that I needed.
- **91%** strongly agree they **would return to SoMa RISE** and would recommend it to others.



Survey respondent...

Is SoMa RISE Safe and Welcoming?

► SoMa RISE person-centered and radical hospitality approach **helps staff build strong relationships with guests.**

- **91%** strongly agree that **SoMa RISE staff treated them with dignity, respect, and kindness** during their visit.

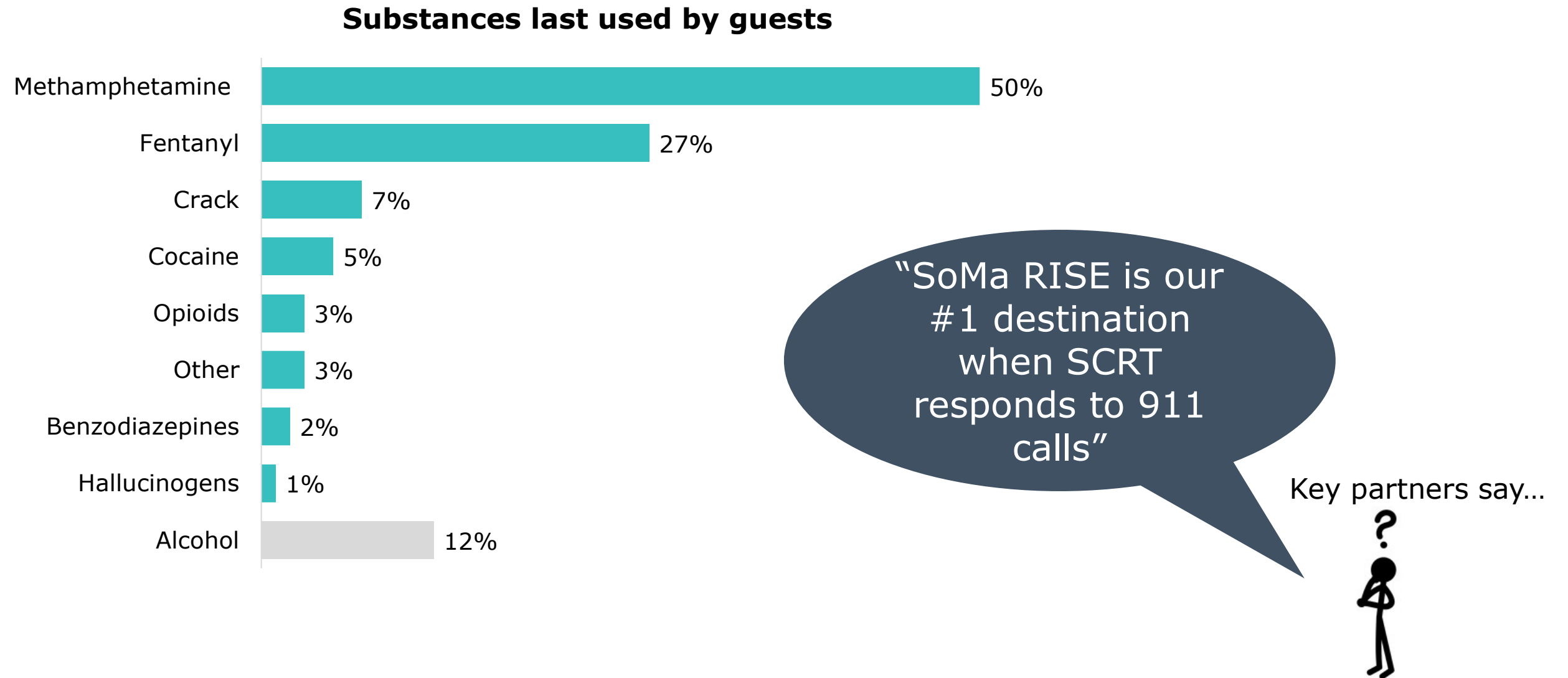
“We are a space for the community, and we are invested in supporting our guests. It always comes back to the guest. What is that you want? What is it that you need? As a staff and an organization, that’s what we are working on.”

- SoMa RISE staff




Goal 2: Does it engage People in Crisis?

- ▶ The pilot largely **succeeds in serving people in crisis** who are using drugs.



≠ Does it engage People in Crisis?

► **Success stories from guests and family** affirm: SoMa RISE **made a difference** in the lives of people who use drugs.



"I still have Sept 10 as my sobriety date –the day I came here. Thank you!"

Guest respondent says...

"SoMa RISE is helping my son become a person again [...] I can sleep better at night and feel more hopeful about the possibility of recover [...] SoMa RISE is a lifeline for so many who have been suffering for so long."

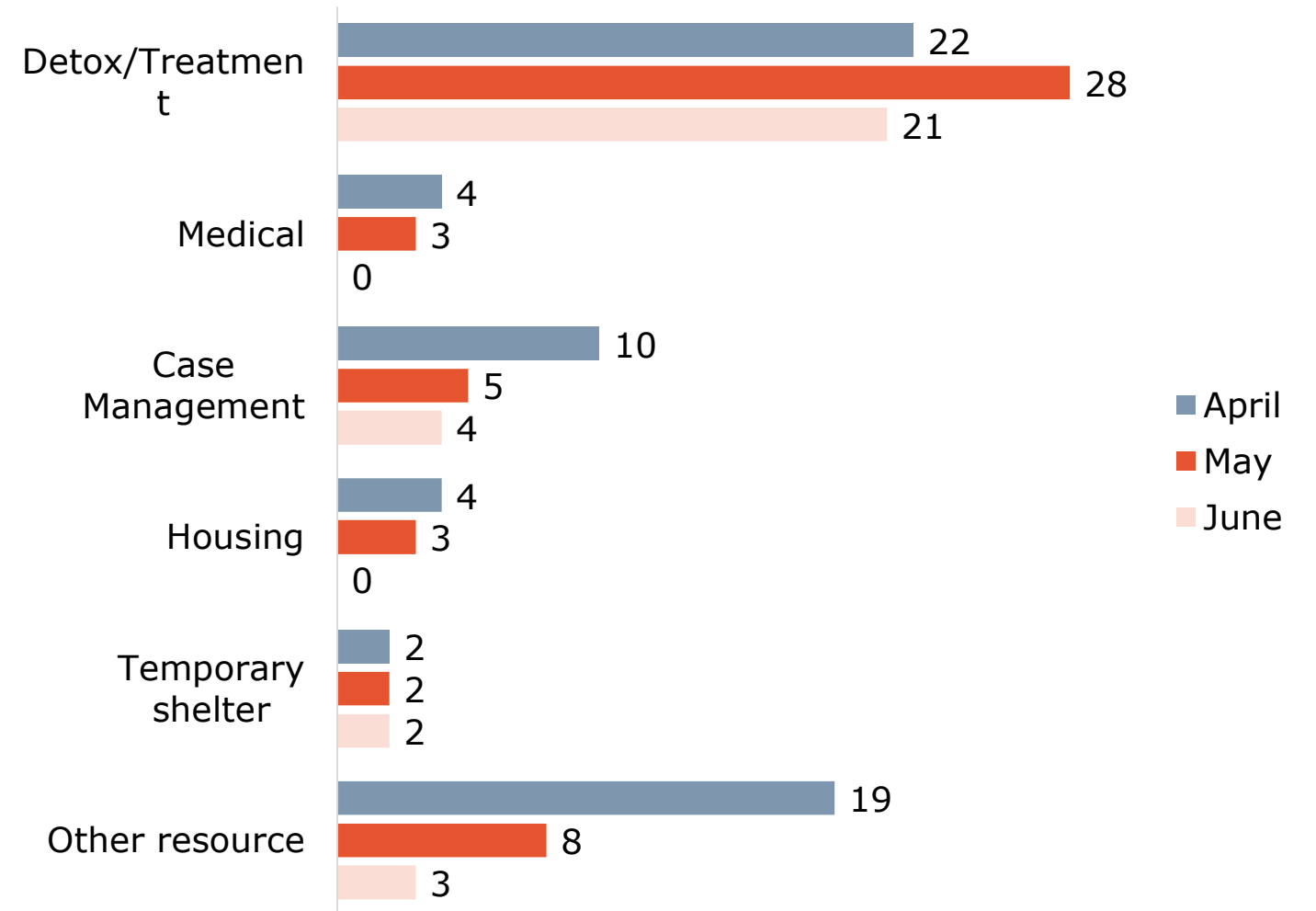
–Mother of SoMa RISE Guest

Goal 3: Were guests Linked to Services?

► SoMa RISE is referring its guests to **resources**. The Pilot has good communication and **strong relationships with other providers**.

- HealthRight 360 Withdrawal Management
- Maria X Martinez Health Center
- Dore Urgent Care
- OCC/BEST neighborhood team
- HSH Coordinated Entry
- The Gubbio Project
- 6th Street Harm Reduction
- And Others...

Resources linkages* provided to guests



*Note: Linkages=referrals documented in EPIC

Continuous Quality Improvement

Challenges Identified

Improve Referrals



Efficient Admissions



Defining Core Objectives & Outcomes



How SoMa RISE is Addressing

1. Worked with Street Crisis Response Team (SCRT) to streamline drop-offs.
2. Learned to identify guests who would be better served by other resources, e.g. referring alcohol intoxication to alcohol Sobering Center.
3. Clarified admission criteria and need to communicate consistently with partners.
4. Learned to welcome & screen guests for concurrent health issues.
5. Listened to guests about what they wanted and needed.
6. Clarified a shared definition of linkages with staff as: to assist guests with their most immediate next step on the path to stabilization. It is not case management.
7. Learning to connect with the Office of Coordinated care to strengthen opportunity for continuing care and case management.

Continuous Quality Improvement

Challenges Identified

Data Quality



How SoMa RISE is Addressing

8. Identified many opportunities to strengthen data collection – for example, supplies and services were collected in different locations and were combined and updated.
9. Implemented EPIC and learned to monitor services.
10. Successfully approved for CaAIM reimbursement as a data driven service.

“High Utilizers”



10. The SoMa RISE team is developing a definition of “high utilizers” and exploring how to assess how best to connect them to resources that better meet their needs.

Public Comment for Discussion Item #3

SoMa RISE Program

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

- Press `#` and then `#` again
- Press *3 to speak and wait for system to prompt that you have been unmuted



A blue-tinted photograph of a desk. In the foreground, a white mug is on the left. To its right, a laptop is open, and a smartphone lies flat on the desk. The background is blurred, showing what appears to be a window with blinds. The text "5 Minute Break" is overlaid in white, bold, sans-serif font in the center of the image.

5 Minute Break

11:10-11:20 AM

Discussion Item #4

DPH Implementation Report



All materials can be found on the MHSF IWG website at
<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

2024 MHSF Implementation Report

What's in the MHSF Implementation Report?

- Recaps progress made towards implementing MHSF in 2023
- Lays out plans and vision for MHSF for 2024 and connections to other BHS initiatives
- Intended audience: Board of Supervisors, Mayor's Office, & MHSF IWG

The report is due February 1, 2024

- December - drafting & editing 2023 and 2024 sections
- January - review by MHSF, DPH, and Mayor's Office leadership

Public Comment for Discussion Item #4

DPH Implementation Report

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

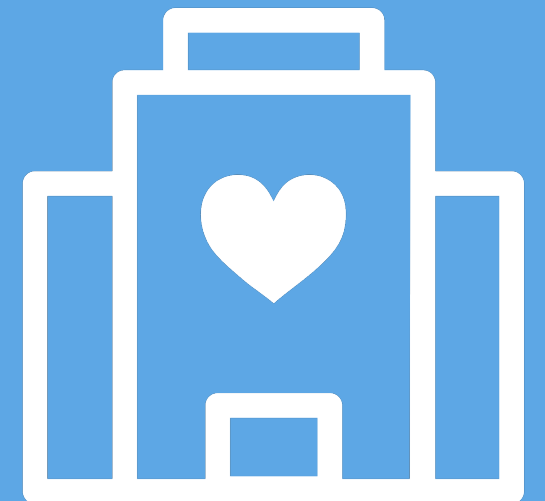
- Press `#` and then `#` again
- Press *3 to speak and wait for system to prompt that you have been unmuted



11:20-11:30 AM

Discussion Item #5

Our City Our Home Report Back



All materials can be found on the MHSF IWG website at

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

Public Comment for Discussion Item #5

Our City Our Home Report Back

If in person:

- Line up to speak

If online:

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If by phone:

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Discussion Item #6

11:30 - 11:45 AM

Community Engagement



All materials can be found on the MHSF IWG website at

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

Reminder: Community engagement goal

Goal of community engagement: To better understand how clients and providers experience the behavioral health system of care

How this informs mapping:

1. How consumers access care
2. How consumers flow through the system
3. How providers connect and refer clients to care

Reminder: Community engagement process

1. Virtual listening session with providers
2. “Roadshow” format listening sessions with clients in their preferred method (e.g. in-person, phone, or virtual; in small groups or one-on-one)

Recruitment criteria includes diversity of demographics, types of services utilized, length of time utilizing services, and access point.

Recap

At the September IWG meeting we:

- Discussed focus and that this is one of many “mapping” activities underway
- Reviewed the outreach plan for providers and clients
 - Offered suggestions for screener
 - Asked about what/how providers will be recruited
- Reviewed the listening session questions
 - Offered suggestions

Updates

- DPH is gathering a list of providers to share with InterEthnica for recruitment
 - Focus on providers that the OCC touches
 - Aim to schedule provider session first
- Finalized outreach screener for clients
- DPH shared client flows to use in listening sessions (as prompts / to inform facilitation guides)

Mapping update:

- Client flows sent via email
- DPH can return in January to review and discuss

Public Comment for Discussion Item #6

Community Engagement

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

- Press `#` and then `#` again
- Press *3 to speak and wait for system to prompt that you have been unmuted



11:45 AM - 12:00 PM

Discussion Item #7

IWG Governance & Membership



All materials can be found on the MHSF IWG website at

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>



IWG Membership

Two-year terms

Chair needed

Applications typically move forward as a group

Seat	Appointed By	Qualification /Representation	Name
Seat 1	Board	Health Care Worker	Amy Wong, AMFT
Seat 2	Mayor	Lived experience	Jameel Patterson
Seat 3	Board	Lived experience	<i>open</i>
Seat 4	Mayor	Peace Office, Emergency Medical Response, Firefighter	James McGuigan
Seat 5	Mayor	Treatment provider with mental health harm reduction experience	<i>open</i>
Seat 6	Board	Treatment provider with mental health harm reduction experience	Steve Fields, MPA
Seat 7	Board	Treatment Provider with criminal justice experience	Andrea Salinas, LMFT
Seat 8	Board	Behavioral Health licensed professional	<i>open</i>
Seat 9	Mayor	Residential Treatment Program Management and Operations	<i>open</i>
Seat 10	Mayor	DPH employee experience with dual diagnosis	Dr. Ana Gonzalez, DO
Seat 11	Board	Supportive housing provider	Sara Shortt, MSW
Seat 12	Mayor	DPH employee with health systems or hospital administration experience; SFDPH, Health Network, Ambulatory Care (also on MHSF Executive Team)	Dr. Hali Hammer, MD
Seat 13	City Attorney	Health law expert appointed	Steve Lipton

 Thank you Vice Chair Shortt!

THANK
YOU



Statements of Interest

**2 minute summary of your
interest and appreciation for
the role**

Public Comment for Discussion Item #7

IWG Governance & Membership

If in person:

- Line up to speak

If online:

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If by phone:

- Press '#' and then '#' again
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Vote on Chair and Vice Chair

Decision Rule:

- Simply majority, by roll call



12:00-12:10 PM

Discussion Item #8

IWG Meeting Planning



All materials can be found on the MHSF IWG website at

<https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>

Meeting Planning

January 23, 2024 from 9am - 1pm
1380 Howard Street, Room 515

Potential January Topics

- Staffing and wage study
- DPH implementation report
- Mapping review
- Community engagement update (InterEthnica)

Topics for Consideration for Future Meetings

- Community engagement (InterEthnica)
- Overdose prevention / dashboard
- Behavioral Health Commission
- Housing/HSH
- Analytics and evaluation dashboards
- Office of Coordinated Care follow-up (February?)

Additions or questions about these topics?

Public Comment for Discussion Item #8

IWG Meeting Planning

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

- Press `#` and then `#` again
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Public Comment for

Any other matter within the jurisdiction of the Committee not on the agenda

If in person:

- Line up to speak

If online:

- Raise your hand and the facilitator will unmute you

If by phone:

- Press '#' and then '#' again
- Press *3 to speak and wait for system to prompt that you have been unmuted



Housekeeping

- **Requests from other City bodies/Groups**
 - None this period
- **Discussion groups**
 - None this period
- **Meeting Minutes Procedures**
 - <https://sf.gov/public-body/mental-health-san-francisco-implementation-working-group>
 - Draft minutes in the next two weeks, approved meeting minutes will be posted
- **MHSF IWG e-mail address for public input: MentalHealthSFIWG@sfgov.org**

Other Associated Body Meeting Times

For matters connected to this committee, consider attending the following committees

- **Our City Our Home (OCOH) Oversight Committee**

- Ensures the Our City, Our Home Funds are effectively and transparently used. Meets the 4th Thursday of every month from 9:30am-11:30am in City Hall, Room 416.

- **Behavioral Health Commission (BHC)**. Represents and ensures the inclusion of the diverse voices of consumers, family members, citizens and stakeholders in advising how mental health services are administered and provided.

- BHC Committee: 3rd Wednesday at 6pm
- BHC Site Visit Committee: 2nd Tuesday at 3pm
- BHC Implementation Committee: 2nd Tuesday at 4pm
- BHC Executive Committee: 2nd Tuesday at 5pm

- **Health Commission**

- The governing and policy-making body of the Department of Public Health. Meets the 1st and 3rd Tuesdays of each month at 101 Grove Street, room 300, at 1pm.

Adjourn

Appendix A: Attendance 2023

Member	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Amy Wong						n/a	n/a					
Jameel Patterson				E	A	n/a	n/a			E		
<i>open</i>												
James McGuigan				E		n/a	n/a					
<i>open</i>												
Steve Fields			E			n/a	n/a	E				
Andrea Salinas						n/a	n/a					
<i>open</i>												
<i>open</i>												
Dr. Ana Gonzalez						n/a	n/a					
Sara Shortt	E					n/a	n/a				E	
Dr. Hali Hammer						n/a	n/a					
Steve Lipton						n/a	n/a					

E = Excused

A = Absent (unexcused)



Appendix B: IWG Membership

Two-year terms

Chair needed

Applications typically move forward as a group

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Appendix C: MHSF IWG 2024 Goals & Definitions

The IWG will continue to advise on the design, implementation, and effectiveness of MHSF programs. Additionally, the IWG has identified areas of focus for their work in 2024:

Goal #1: Advise DPH on how to describe and articulate the continuum of care for both clients and providers.

How: This is inclusive of, but not limited to, the current mapping project, to develop a greater understanding of client flow after acute care, understand where individuals fall through the cracks, and highlight services or needs to prevent relapse.

Goal #2: Advise DPH on communicating where and what providers and services are currently in place for the MHSF population.

How: Consumers and providers of MHSF are the audiences. For consumers, explore how to more effectively communicate MHSF services and supports. For providers, communication of available services and supports to enhance referrals and linkages.

Goal #3: Request and review MHSF outcomes data.

How: More MHSF data is becoming available. The IWG intends to obtain and review more component and program data, especially outcomes measures (where available) to better assess the impact of these programs.

Goal #4: Explore the intersection between BHS and HSH.

How: Build greater insight into workflows to housing placement and clinical needs to support housing retention of MHSF priority population. Includes data sharing and understanding of SFDPH / HSH roles, programs, and processes in providing appropriate, supportive, and stable housing.

Goal #5: Increase engagement with the community.

How: Hear directly from consumers about gaps in services. Possibly existing client council, and community members (especially in priority communities) to hear their impressions of our interventions/initiatives, what they believe is working and what isn't.

Goal #6: Continue to work collaboratively with DPH on creating mutually beneficial meetings that propel the work forward.

How: Build upon progress to strengthen membership & align understanding of IWG's scope. Improve meeting productivity via data sharing to meet ordinance mandate of "Persons who are experiencing homelessness and who are diagnosed with a serious mental illness and/or substance use disorder shall have low-barrier, expedited access to treatment and prioritized access to all services provided by Mental Health SF." Includes integrating stories of success as opportunities to both celebrate and identify what programs are meeting MHSF objectives.

MHSF IWG 2024 GOALS

Advise DPH on how to describe and articulate the continuum of care for both clients and providers

tktk

Advise DPH on communicating where and what providers and services are currently in place for the MHSF population

tktk

Request and review MHSF outcomes data

tktk

Explore the intersection between BHS and HSH

tktk

Increase engagement with the community

tktk

Continue to work collaboratively with DPH on creating mutually beneficial meetings that propel the work forward.

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