

MHSF Implementation Working Group Meeting Minutes **Approved**

January 23, 2024 | 9:00 AM – 1:00 PM

Note: The agenda, meeting materials, and video recording will be posted at:
<https://www.sfdph.org/dph/comupg/knowicol/menthlth/Implementation.asp>

1. Land Acknowledgement (0:0:0)

The meeting was called to order at 9:15am by Vice Chair Sara Shortt; she acted as interim Chair for this meeting. Member Andrea Salinas read the Land Acknowledgement statement.

2. Call to Order/Roll Call (0:1:25)

Co-facilitator Diana McDonnell completed roll call. Member James McGuigan and Member Jameel Patterson submitted a notice prior to their absences.

Committee Members Present: Steve Fields, M.P.A., Ana Gonzalez, D.O., Hali Hammer, M.D., Steve Lipton, Andrea Salinas, L.M.F.T., Sara Shortt, M.S.W., Amy Wong

Committee Members Excused Absent:
James McGuigan
Jameel Patterson

Committee Members Unexcused Absent:
None

3. Vote to Excuse Absent Member(s) (0:2:15)

Co-facilitator McDonnell reviewed the process for excusing absent members. The IWG voted on Member McGuigan's and Member Patterson's absences, and their absences were excused.

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

4. Welcome and Review of Agenda/Meeting Goals (0:3:05)

Vice Chair Shortt reviewed the goals for the January 2024 meeting.

5. Discussion Item #1: Approve Meeting Minutes (0:3:50)

Vice Chair Shortt opened the discussion for the IWG to make changes to the December 2023 meeting minutes. IWG members did not have changes to the meeting minutes.

6. Public Comment for Discussion Item #1 (0:4:20)

No public comment.

7. Vote on Discussion Item #1 (0:5:01)

Member Steve Lipton motioned to approve the December 2023 meeting minutes; Member Salinas seconded the motion. The December 2023 meeting minutes were voted on and approved by the IWG.

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

8. Discussion Item #2: Mapping and Community Engagement (Ashley Vaughn) (0:14:04)

- Presenter Vaughn reviewed the goals for the mapping and community engagement presentation.
 - She explained that this presentation segment is an extension of Dr. Hillary Kunins' (Director, DPH Behavioral Health Services (BHS)) System of Care presentation that was shared with the Board of Directors in 2023.
- The presentation exemplifies three composite client scenarios that demonstrate flows through the system of care, to help explain current services mapping.
 - For each scenario, the clients' pathways through behavioral health system levels of care were exemplified.
 - Levels of care include: prevention, crisis, access and navigation, outpatient treatment, and residential care treatment and support.
 - Intensive outpatient treatment is the same as intensive case management (ICM).
- ❖ Discussion: Member Salinas asked if the housing timeline differs for clients who receive services through an Office of Coordinated Care (OCC) pathway. Presenter Vaughn explained that the scenarios presented exemplify ideal pathways. Valerie Kirby added that Behavioral Health Services (BHS) only controls placement into some supportive housing sites, where utilization management is reviewed by BHS. Additionally, it is a goal to have the Department of Homelessness and Supportive Housing (HSH) present to the IWG regarding strategic planning and redesign of coordinated entries.
- ❖ Discussion: Vice Chair Shortt asked how these scenarios relate to mapping. Presenter Vaughn answered that the flows illustrate types of programs, services, and providers that engage with clients as determined by a client's unique needs. Co-facilitator Jennifer James reminded the IWG that there are multiple types of mapping, and the IWG previously agreed on being most interested in understanding the current flows, as compared to ideal flows and data that will be collected (during the first quarter of 2023) by the community engagement partner Interethnica. Vice Chair Shortt suggested a clearer display of the connection between System of Care mapping and gaps analysis.
- ❖ Discussion: Member Steve Fields asked how CARE Court impacts the scenarios illustrated. Member Gonzalez responded with a reminder that CARE Court requires a Schizophrenia Spectrum Disorder diagnosis and confirmed that DPH is working with multiple teams to ensure those that qualify for CARE Court are connected.
- ❖ Discussion: Member Salinas and Member Hammer highlighted the difference between optimal client flow and actual client flow. Noting that there are many variables and pathways for clients, Member Hammer offered to look at mapping as a three-dimensional model that is seamless as possible with options for both those that are and are not willing to receive services.
- ❖ Discussion: Vice Chair Shortt stated that it would be helpful if there were more types of housing for those who are in need in San Francisco with high acuity. Member Fields added that more clarity is needed around the goals for the collaborative initiative between MHSF and DPH, and emphasized the importance of considering long-term and preventative strategies.
 - Valerie Kirby suggested using a reserve strategy method, where data is collected from subject matter experts (SMEs) to inform scenarios in reverse.
- Valerie Kirby asked for feedback on community engagement provider recruitment methods and contacts for the upcoming study with InterEthnica.
 - The current plan is to engage predetermined providers and to use snowball methodology to engage more providers. Additionally, providers will be asked for recommendations on how to do outreach to consumers.
 - Vice Chair Shortt echoed the importance of making sure targeted outreach considers a representative sample of the MHSF population.
 - Vice Chair Shortt, Member Salinas, and Ashley Vaughn recommended several offices, coalitions, networks, and programs to outreach to.

9. Public Comment for Discussion Item #2 (1:14:21)

No public comment.

10. Discussion Item #3: DPH Implementation Report (Kelly Kirkpatrick, DPH) (1:15:25)

- Kelly Kirkpatrick supports the implementation operations budget element for MHSF and fills an administrative role in the Implementation Report. Her focus is on DPH process and budget. She briefly reviewed the contents of the report.
 - DPH is required to submit an Implementation Report to the Mayor and Board of Directors annually.
 - The report is due on February 1st 2024.
 - The report includes summaries of MHSF structure, funding, priority population, core metrics, milestones/accomplishments in 2023, and goals for 2024.
- Kelly Kirkpatrick reviewed key MHSF accomplishments from 2023. Among these include launching BEST neighborhood and the opening of 70 new residential step-down beds on Treasure Island.
- Kelly Kirkpatrick also reviewed MHSF goals for 2024. Among these include expanding OCC capacity, beginning construction on the Crisis Stabilization Unit, and finalizing/sharing the MHSF staffing Analysis.
- She provided an overview of MHSF funding.
 - The priority funding source for MHSF is Proposition C (Prop C), also known as Our City, Our Home (OCOH) funds.
 - The most significant amount of Prop C is used to fund the MHSF new beds and facilities domain.
 - The current budget planning for MHSF reflects a 30%-40% shortfall.
- ❖ Discussion: Member Lipton asked for clarification on how the DPH Implementation Report describes transformation/evolution of the current system of care. Presenter Kirkpatrick responded that the Implementation Report has a goal of elevating transformation and suggested that this goal could be further elevated.
- ❖ Discussion: Member Salinas asked about the validity of the target population data. Member Hammer added that it is difficult to pull data from multiple electronic resources. Presenter Kirkpatrick responded by suggesting a recirculation of a methodology presentation by Monica Rose. Additionally, she mentioned that there should be an upcoming MHSF presentation on priority population data this year. Member Salinas also highlighted the current gaps in the pipeline into dual diagnosis programs. Presenter Kirkpatrick echoed the gaps in dual diagnosis logistic and programmatic challenges and confirmed that DPH is using a multi-pronged approach to pursue new opportunities in closing these gaps.
 - Out-of-county beds are an interim solution while city bed capacity is being built out.
- ❖ Discussion: Member Fields stated that the hospitals have stopped diverting to residential treatment in the community. He also suggested a future discussion from the viewpoints of ICM, hospitals, and Community-Based Organizations (CBOs).

11. Public Comment for Discussion Item #3 (1:39:33)

No public comment.

12. Break

10:56a-11:04a

13. Discussion Item #4: MHSF Director & Leadership Update (Dr. Hillary Kunins, Heather Weisbrod, Monica Rose, YoonJung Kim, Dr. Jeffrey Hom) (1:49:02)

➤ General Updates

- Supervisor Mandelman has introduced a hearing request on residential care expansion.
 - The hearing is expected to be held on February 21st, 2024.
 - Results of the bed optimization study will be shared.
 - Evaluation on wait times throughout different levels of care will also be shared.
- Supervisor Ronan and DPH are working out details on increasing IWG membership so that the group continues to hold quorum on a regular basis.
- ❖ Discussion: Vice Chair Shortt requested that the IWG be better informed on the current seat applicants, to better inform their recruitment strategies.

➤ Budget Updates

- Director Kunins overviewed the budget forecast for MHSF and explained San Francisco economic challenges and fund reduction.
 - This review does not yet include Prop C.
- Director Kunins also reviewed DPH's approach to the upcoming budget process along with the process timeline.
- A fiscal cliff is expected within the next couple of years contingent on similar economic factors.
- ❖ Discussion: Member Fields asked if there is a timeline available for the Health Commission to hear the presentation targeted for the Mayor. Director Kunins answered yes, and that the hearing will take place on February 6th, 2024. DPH will be sending a date confirmation to the IWG.

➤ Office of Coordinated Care (OCC) (Heather Weisbrod)

- The OCC has recently increased their data analytics capacity through staffing.
- Presenter Weisbrod shared Epic referral data for the Behavioral Health Access Center (BHAC), the Behavioral Health Access Line (BHAL), and the Triage and Transition Support Team (TTS) from July to December 2023.
 - OCC key expansions include triage beginning after Street Crisis Response Team (SCRT) referrals, triage beginning systematic follow-up using involuntary hold reports, and the expansion of BHAC weekend hours.
- Presenter Weisbrod overviewed BHAC and BHAL non-registered contacts data from December 2023, that includes those who sought information about services but did not engage enough in services to create an Epic patient record.
- Bridge and Engagement Services Team (BEST) Neighborhood engagement data from December 2023 was overviewed.
- ❖ Discussion: Member Hammer asked if there are data target goals. Presenter Weisbrod answered that data is used to track trends overall to better understand needs.
- ❖ Discussion: Member Salinas asked for clarification between BEST teams. Presenter Weisbrod explained that BEST Care Management Team reviews all SCRT referrals, while BEST Neighborhood works beyond SCRT and is embedded in coordination with other city departments. Member Salinas followed up by asking for the definition of "transfer" in non-registered contact data. Presenter Weisbrod explained that transfers are instances where a client is connected to another pathway that can issue the referrals needed.
- ❖ Discussion: Member Fields asked if there was revenue attached to tracking interventions in Epic. Director Kunins answered that Epic is used to track outside of medical records and is not billable to insurance. The goal of using Epic is to better capture data, while there are other services that are being tracked that are tied to revenue (i.e. BEST via CalAIM).

➤ Analytics & Evaluation (Monica Rose)

- Two Epidemiologists have been hired.
- A Senior Health Program Planner position is in the process of being filled.
- Wait time data is validated and finalized.
- Intensive Case Management (ICM) data are in the process of finalization and will be previewed to the IWG.
- ❖ Discussion: Member Fields asked if providers will be able to review data prior to data being shared with the board. Presenter Rose answered that there has been some work done with providers and CBOs, as the focus has been ensuring accurate data. Member fields followed up by asking for the baseline year of A&E data. Presenter Rose clarified that bed optimization data is from 2021 and wait time data reflects up to the most recent quarter year.
- ❖ Discussion: Member Hammer asked if there might be underestimates on the target population data within the DPH Implementation Report. Presenter Rose answered that an underestimate is possible because data is pulled from multiple sources that only track those with diagnoses, and not all engagements result in enough client information to capture.
- New Beds & Facilities (YoonJung Kim)
 - Presenter Kim reviewed the most recent residential care bed and treatment dashboard and an update on state grant funding.
 - Approximately three projects are expected to open in the next few years.
 - Updates on the Crisis Stabilization Unit, Dual Diagnosis Program (DDX), and Transitional Age Youth (TAY) program were provided.
 - The Crisis Stabilization Unit will break ground on February 5th, 2024.
 - ❖ Discussion: Vice Chair Shortt asked if BRDIGE Housing was related to CARE Court. Presenter Kim explained that BRIDGE housing does prioritize transitional housing for CARE Court clients.
 - ❖ Discussion: Member Salinas asked if there is movement on dual diagnosis programs for women. Presenter Kim answered that this type of program is still in discussion.
- Overdose Prevention & Response (Dr. Jeffrey Hom)
 - Dr. Hom reviewed publicly available data dashboards for overdose deaths by month and overdose-related 911 calls.
 - Fentanyl is the driving cause of overdose deaths locally and nationally.
 - ❖ Discussion: Member Lipton asked for clarification on where reversed overdoses are captured. Dr. Hom explained that reversed overdoses are captured in the 911 call data. Member Lipton also asked if overdose deaths were being tracked in relation to previous overdose incidents or 911 calls. Dr. Hom stated that the development of a tracking system for these touch points is in progress.
 - Methadone client data and substance use disorder residential treatment admission data were presented.
 - 2024 priorities include: (1) increasing the availability, accessibility, and effectiveness of the continuum of substance use services and (2) strengthening community engagement and social support for people at high risk of overdose.
 - ❖ Discussion: Vice Chair Shortt asked for information regarding funding to be expected from the opioid settlement. Dr. Hom explained that this settlement is to be issued over a period of twenty years, and proposals for the funding have focused on gaps and have been submitted to the Mayor from DPH and providers. Once approved, the Mayor is able to include these monies in the planned budget cycles. Vice Chair Shortt also asked for the status of the overdose prevention plan. Dr. Hom explained that implementation has struggled, especially for wellness hubs/safe consumption sites. Additionally, despite challenges, there have been measures that have been achieved, such as the increase of Naloxone distribution. Vice Chair Shortt requested a future presentation on overdose prevention and opioid settlement funds.

- ❖ Discussion: Member Lipton highlighted the importance of comparing efforts to other cities to review best practices. Dr. Hom agreed and called for the need of creativity and innovation to help solidify overdose prevention nationally.
- ❖ Discussion: Member Salinas highlighted that Sublocade works well as long-acting Buprenorphine and suggested providing incentives for the medication.
- ❖ Discussion: Member Fields echoed the benefits for wellness hubs.

14. Public Comment for Discussion Item #4 (3:11:05)

No public comment.

15. Discussion Item #5: IWG Governance and Membership: Chair/Vice Chair Elections (0:6:30)

*This agenda item was moved to an earlier time during the meeting.

- Vice Chair Shortt was appreciated for her interim leadership as IWG Chair.
- Valerie Kirby reviewed the roles and requirements for IWG Chair and Vice Chair, and asked for volunteers to fill the Chair and Vice Chair roles for 2024.
 - Vice Chair Shortt agreed to continue as IWG Vice Chair.
 - Member Salinas volunteered to fill the role of IWG chair.

16. Public Comment on Discussion Item #5 (0:11:30)

No public comment.

17. Vote on Chair and Vice Chair (0:13:00)

Member Hammer motioned to elect Member Salinas as IWG Chair and to re-elect Member Shortt as Vice Chair, and Member Lipton seconded. The IWG voted, and elected Member Salinas and Member Shortt as Chair and Vice Chair of the IWG.

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|------------------------------|----------------------------------|
| ➤ Steve Fields, M.P.A. – Yes | ➤ Jameel Patterson – Absent |
| ➤ Ana Gonzalez, D.O. – Yes | ➤ Andrea Salinas, L.M.F.T. – Yes |
| ➤ Hali Hammer, M.D. – Yes | ➤ Sara Shortt, M.S.W. – Yes |
| ➤ Steve Lipton – Yes | ➤ Amy Wong – Yes |
| ➤ James McGuigan – Absent | |

18. Discussion Item #6: IWG Meeting Planning (3:11:51)

- Co-facilitator James reviewed potential agenda topics for the February 2024 meeting, along with topics for consideration for future meetings in 2024.
- ❖ Discussion: Vice Chair Shortt suggested adding three topics to consider for future meetings: (1) Treatment on Demand, (2) Overdose Prevention Plan Status, and (3) Opioid Settlement Funds.
- ❖ Discussion: Member Lipton suggested planning based on which domains IWG determines to have priority.
- ❖ Discussion: Member Hammer requested data and dashboard links (for domain topics) to be included in pre-meeting materials.
- ❖ Discussion: Member Lipton suggested a discussions group to refine requests for the Homeless and Supportive Housing (HSH) presentation.

19. Public Comment on Discussion Item #6 (3:26:09)

No public comment.

20. Public Comment for any other matter within the jurisdiction of the Committee not on the agenda (3:26:45)

No public comment.

21. 2023 Housekeeping (3:27:22)

- No requests from other City bodies/groups this period.
- There are no discussion groups scheduled for this period.
- The email address for public input is: MentalHealthSFIWG@sfgov.org

22. Other Associated Body Meeting Times (3:28:00)

- See [meeting slide deck](#) for upcoming meeting times for:
 - Our City Our Home (COOH)
 - Behavioral Health Commission (BHC)
 - Health Commission

23. Adjourn (2:40:45)

The next meeting will be on Tuesday, February 27, 2024 at 9:00am-12:00pm at DPH, 1380 Howard Street (Room 515).

Information about the meeting room location and IWG materials are posted on the IWG website.

Vice Chair Shortt motioned to adjourn the meeting; Member Hammer seconded. The meeting was adjourned at 12:44pm.