

STREET CRISIS RESPONSE TEAM (SCRT)

November 2024



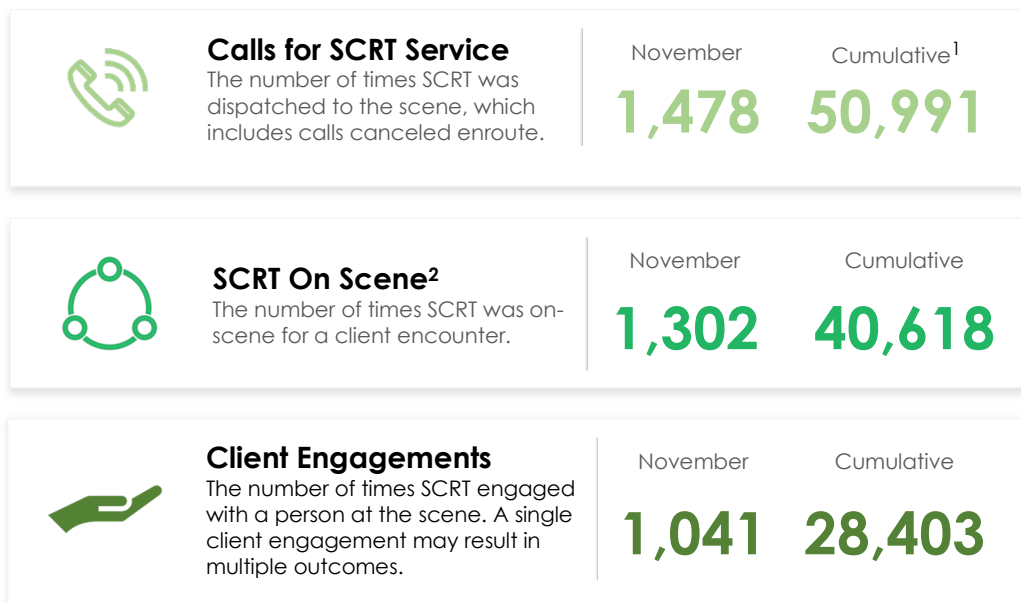
Image 1: SCRT in the field.

The Street Crisis Response Team (SCRT) is initiated through calls from the public to San Francisco's 911 call center and provides rapid, trauma-informed care to people in acute behavioral health crisis or who have needs that may not require an ambulance or transport to an emergency department. SCRT provides linkages to shelter, drug and alcohol sobering centers, mental health clinics & residential programs, urgent care, care coordination and other needed support for people with complex health needs. SCRT operates citywide, seven days a week, 24 hours a day.

SCRT is a collaboration of the Department of Emergency Management (DEM), the San Francisco Fire Department (SFFD), the San Francisco Department of Public Health (DPH), and the Department of Homelessness and Supportive Housing (HSH). SCRT's mission is to provide an effective alternative response to individuals experiencing mental health crises or low-acuity medical needs while reducing unnecessary law enforcement responses and unnecessary emergency room utilization.

In March 2023, SCRT reconfigured its team composition to include one community paramedic, an EMT or second paramedic, and either a Peer Counselor or a Homeless Outreach Team (HOT) specialist. Behavioral health clinicians continue to be a core part of the SCRT and work under the expanded Office of Coordinated Care (OCC) providing follow-up and connection to behavioral health care for clients referred by SCRT units.

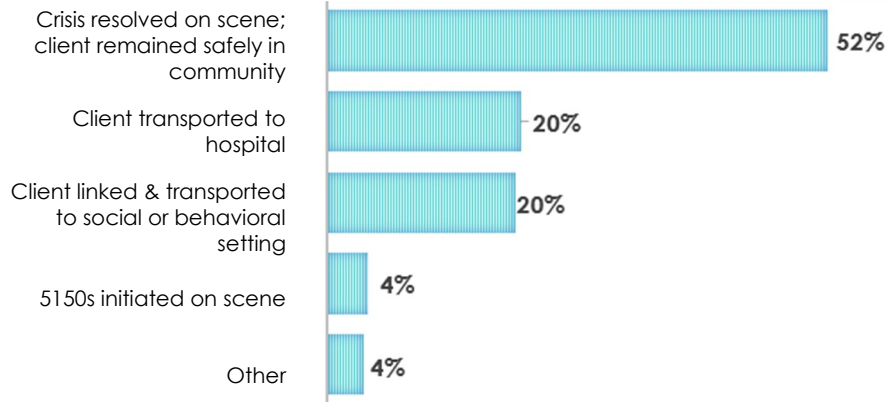
KEY PERFORMANCE INDICATORS



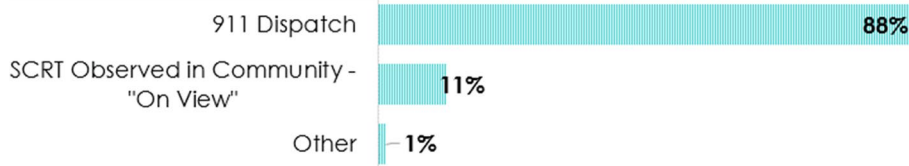
1. Cumulative metrics include data since launch November 30, 2020.
2. "SCRT On Scene" was called "Calls Handled by SCRT" in prior reports. In November 2023 Community Paramedicine started charting encounters in a new ePCR platform. This data fork may result in slight data discrepancies.



Engagement Outcomes: Cumulative³



Referral Source: Cumulative



Response Rate to Behavioral Health Calls ⁴

SCRT response to 25A1C calls, the exclusive SCRT response call type. The 25A1C was developed to transition eligible behavioral health calls away from a police-led response.

November 25A1C

99%

Cumulative 25A1C

97%



Average Response Time

November

17 min

Cumulative

17 min

- A single client engagement may result in multiple outcomes.
- SCRT are co-respondents to a variety of behavioral health and overdose calls, and previous reports displayed SCRT's response rate to all eligible call types. As of June 2023, this report will display SCRT's response rate to call types it exclusively responds to.

Office of Coordinated Care Follow Up

SCRT providers refer individuals for follow up with the Department of Public Health's Behavioral Health Services, Office of Coordinated Care (OCC). OCC assesses referrals to determine the appropriate trauma-informed, community-based therapeutic intervention.

When follow-up care is appropriate, it can include strengthening connections to existing providers, care coordination services, and connections to the OCC street care team called BEST Neighborhoods. BEST Neighborhoods works in community 7-days a week and provides behavioral health interventions to support clients transition to long term care and support.

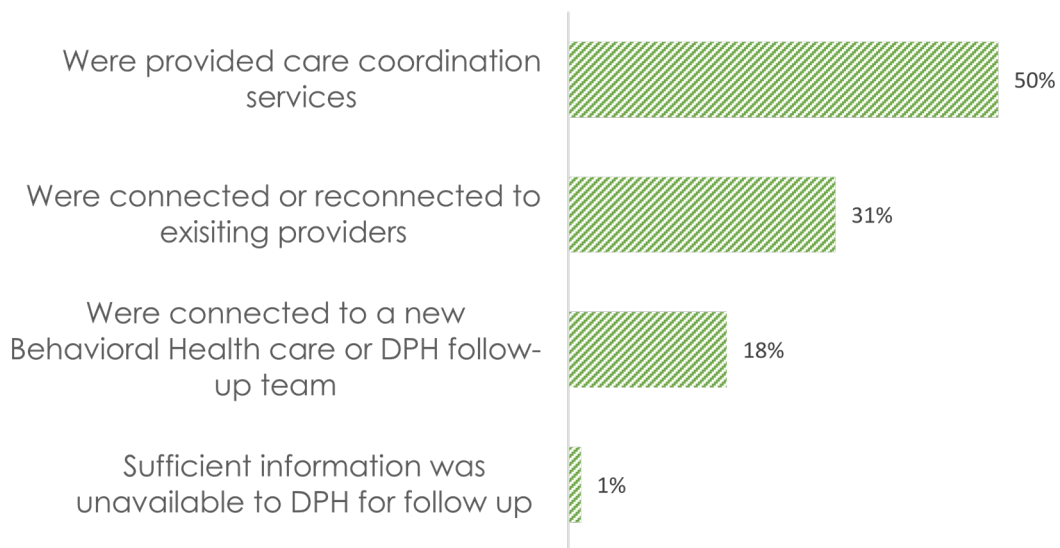
Not all initial engagements with OCC result in a referral for follow-up.

223 SCRT referred 221 people to OCC in November 2024

208 Remained with OCC for assessment of follow-up needs

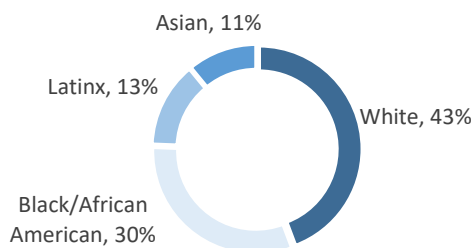
- 6 Were cross referenced to the Department of Homelessness and Supportive Housing
- 9 Were determined to not require OCC follow up

Outcomes for the 208 Clients who Remained with OCC in November 2024

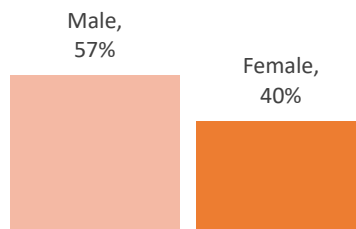


Demographics of the OCC Clients Referred in November 2024⁵

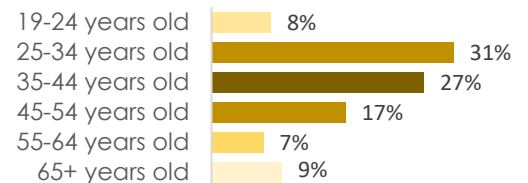
Race/ Ethnicity



Gender



Age



5. Categories less than 5% will not be publicly displayed to protect client privacy.