

Mental Health SF Implementation Updates

San Francisco Department of Public Health

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San Francisco Health Network
Behavioral Health Services

DPH Strategic Priorities

Improving with
Data to
Enable and
Align

Improving
health
outcomes for
people
experiencing
homelessness

Hiring and
developing
our diverse
workforce

Achieving
health equity
through
community
engagement



San Francisco Health Network
Behavioral Health Services

In 2019, the San Francisco Board of Supervisors Passed Mental Health SF.

Mental Health SF aims to increase access to care for San Franciscans with serious mental illness and/or substance use disorders who are experiencing homelessness.

Mental Health SF

Office of Coordinated Care

Improve and centralize care coordination for clients

Mental Health Services Center

Center for patients to access treatment, medications, and referrals

New Beds & Facilities

Expand behavioral health treatment and care placements

Street Crisis Response Team

Provide help for behavioral health crises on the streets

[Residential Care and Treatment | San Francisco \(sf.gov\)](#)

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



San Francisco Health Network
Behavioral Health Services

Street Crisis Response Team (SCRT)

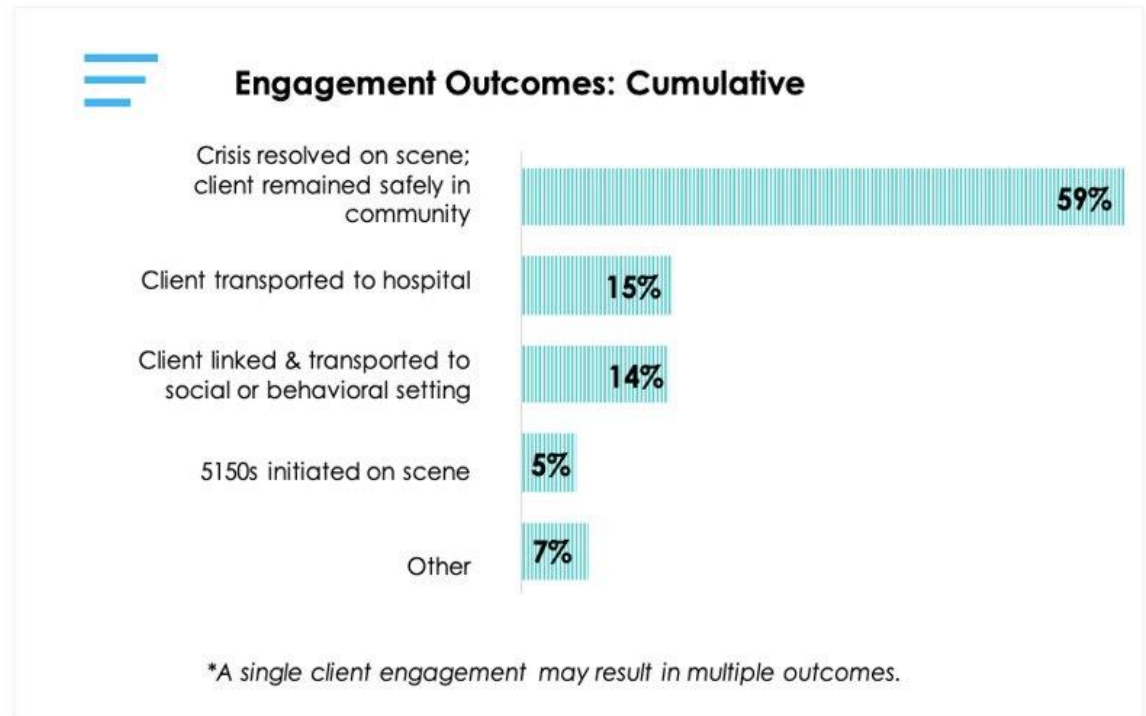
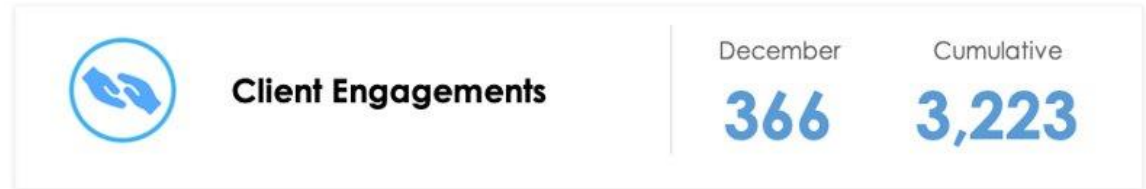
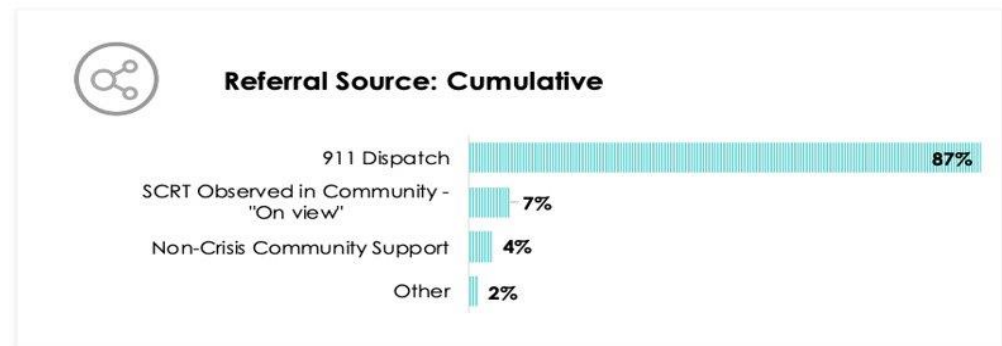
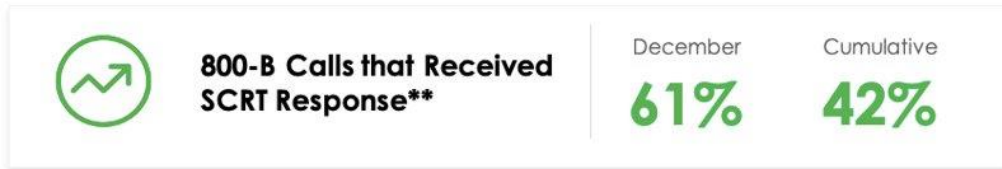
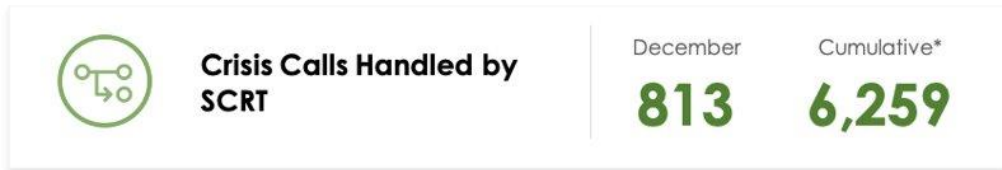
Street Crisis Response Team (SCRT) provides rapid, trauma-informed responses to calls about people experiencing a behavioral health crisis. SCRT reduces the use of law enforcement and unnecessary emergency room use.

- Now six fully operational teams providing 24/7 citywide coverage of San Francisco - the 7th team will launch this Fiscal Year
- SCRT took more than 5,000 calls and engaged with nearly 3,000 people in crisis during the first year
- SCRT is now diverting over half (61%) of calls monthly calls reporting a person experiencing a behavioral health-related crisis on the street from law enforcement.



Street Crisis Response Team (SCRT) - Calls & Engagement Outcomes

December 2021 & Cumulative



Office of Coordinated Care (OCC)

OCC Goal - ensure equitable and well-coordinated access to behavioral health care, seamless transitions between systems and levels of care, and centralized care coordination for priority populations.

- **Behavioral Health Access Programs**

- Implemented new, improved phone system for Behavioral Health Access Line (BHAL) (*Nov 2021*)
- Behavioral Health Access Center (BHAC) will further expand operating hours this spring

- **Care Coordination Services**

- Street Crisis Response Follow-up Team (SCRT-OCC team) launched (*April 2021*)
- Bridge & Engagement Services (BEST) Team phase 1 launch of Enhanced Care Management services (*January 2022*)
 - Additional services supported by new staff will be ramping up through spring 2022 - focused on people leaving hospital and jail

- **Support Services**

- Expansion for benefits eligibility support and transportation services are underway and will expand over the course of 2022



Office of Coordinated Care (OCC)

Case Management service expansion will enable higher levels of case management support, increase system navigation services, enable a more successful transfer of clients from higher levels of care, and promote the retention of in care

- **Case Management Services** - case management staff will be added at BHS mental health and substance use outpatient clinics starting in this spring 2022 and ramping up through summer 2022
- **Intensive Case Management (ICM) Services** - field-based intensive treatment services with embedded case management support will roll-out services in three phases;
 - Reduction of waitlists for existing CBO programs are underway
 - Additional expansion ICM will launch this spring and roll out additional services through the remainder of 2022

Mental Health Service Center (MHSC)

- MHSF calls for the creation of a 24/7 **Mental Health Service Center (MHSC)** and in the interim DPH has worked to expand the hours of the existing Behavioral Health Access Center (BHAC)
 - The co-located BHS Pharmacy at BHAC expanded hours in December 2021
 - Expansion of hours at BHAC and co-located Office-Based Induction Center (for opioid use disorder treatment; OBIC) will roll out in phases over the next few months
- DPH is analyzing options and current drop-in service needs; also working on an analysis with the Controller's Office that will inform the direction of the MHSC



Residential Care & Treatment – New Beds

DPH Behavioral Health Residential Treatment Expansion

The San Francisco Department of Public Health (DPH) is increasing residential treatment and care services by approximately 400 overnight treatment spaces, or beds. The expansion effort is guided by the 2020 DPH Behavioral Health Bed Optimization Report, Mental Health SF legislation, and with input from stakeholders. The goal is to offer high quality, timely, easily accessible, coordinated, and recovery-oriented care delivered in the least restrictive setting.

Goal 30 Beds	Open 2021 Hummingbird - Valencia Status Serving clients Open 28 beds currently available	Psychiatric respite facility to serve people experiencing homelessness from the Mission and Castro
Goal 20 Est. Beds	Open 2020 Managed Alcohol Program Status Permanent location and additional funding will expand the program from 10 beds to 20 beds Open 10 beds currently available	Pilot Medical supervision for people with chronic alcohol dependency in a permanent supportive housing setting
Goal 20 Beds	Open 2021 12-month Rehabilitative Board and Care Status Serving clients Open	Pilot Out-of-county supervised living and treatment for people with chronic mental health illness and/or coming from locked facilities
Goal 31 Est. Beds	Open 2021 Mental Health Rehabilitation Beds (aka LSAT) Status Serving clients Open Client placement varies	Out-of-county psychosocial rehabilitation for people who are conserved in a locked setting
Goal 13 Est. Beds	Open 2022 Psychiatric Skilled Nursing Facilities (aka PSNF) Status Serving clients Open Client placement varies	Out-of-county secure 24-hour medical care for people with chronic mental health conditions
Goal 20 Est. Beds	Opening Spring 2022 SOMA RISE ^Δ (aka Drug Sobering Center) Status Completing construction 1 2 3 4 5 6	Pilot 24-7 program for people experiencing homelessness with drug intoxication, providing short term stays and linkage to services

KEY

March 24, 2022

Project Phases and Status		
Δ MHSF legislation	1 Program design 2 Regulatory assessment 3 Facility selection	4 Out for bid/contracting 5 Community outreach & City approvals 6 Permit & construction

Goal 75 Est. Beds	Opening Spring 2022 Dual Diagnosis Transitional Care for Justice Involved People Status Contracting in process 1 2 3 4 / /	Transitional care for justice involved people with a dual diagnosis of mental health and substance use issue
Goal 69 Est. Beds	Opening Summer 2022 Residential Care Facility ^Δ (aka Board and Care)* Status Contracting in process 1 2 3 4 / /	Supervised residential program for individuals with mental health issues who require assistance with activities of daily living.
Goal 6 Est. Beds	Opening 2022 Cooperative Living for Mental Health ^Δ Status Accepting applications 1 2 3 4 / /	Communal living for people with chronic mental health and/or substance use Additional \$11M to stabilize leased properties available through MOHCD
Goal 16 Est. Beds	Opening 2023 Crisis Diversion Facility ^Δ Status Program design in development 1 2 3 4 5 6	Short-term, urgent care intervention as an alternative to hospital care
Goal 70 Est. Beds	Opening 2023 Residential Step-down - SUD ^Δ Status Active negotiations to acquire a building 1 2 3 4 5 6	Long-term sober living environment for clients coming out of residential care programs
Goal 30 Est. Beds	Opening 2023 Enhanced Dual Diagnosis ^Δ Status Contracting in process 1 2 3 4 / /	Transitional medically enhanced care for people with a dual diagnosis of mental health and substance use issues
Goal 10 Est. Beds	Opening 2023 Transitional Age Youth (TAY) Residential Treatment ^Δ Status Program design in development 1 2 3 4 / /	Supervised treatment for young adults with serious mental health and/or substance use issues

<https://sf.gov/residential-care-and-treatment>

Residential Care & Treatment – New Beds

- Residential care and treatment spaces have expanded by 102 new beds of the total 400 new spaces that are planned under New Beds & Facilities – 25% of the goal
- Identified opportunities to contract in the short-term, until we can build long-term capacity in-county
 - Opening 75 units of Dual Diagnosis Transitional Care for people who are justice involved in partnership with the Reentry Division of the Adult Probation Department (Minna Project) which will open this Spring
 - Working on rapidly expanding Board & Care beds as well



Residential Care & Treatment – New Beds

- SoMa RISE (Drug Sobering Center) construction is nearly complete – opening spring 2022 with approximately 20 beds
- Engaging community stakeholders and pursuing the building design, permits, and construction of the 15 Crisis Diversion Unit beds at the newly acquired Hyde/Geary site
- Actively pursuing buildings for acquisition to support expansion and to acquire as many permanent, in-county facilities as possible to provide stable and cost-effective care in the long-term
 - In various stages of real estate negotiations, appraisals, and predevelopment discussions



Proposed MHSF Key Performance Indicators

Housing

1. Increase the percentage of the Mental Health SF target population assessed for housing.
2. Increase the percentage of the Mental Health SF target population who are placed in supportive housing.

Wait Times

3. Decrease wait times for Intensive Case Management services.
4. Decrease wait times for residential treatment beds.

Overdose Response

5. Increase the amount of naloxone distributed in the community.
6. Increase the percentage of persons with Opioid Use Disorders started on buprenorphine or methadone treatment.
7. Decrease the number of deaths due to overdose.
8. Decrease the racial disparity in deaths due to overdose.

Routine Care

9. Increase the percentage of the Mental Health SF target population receiving routine behavioral health care.
10. Increase the percentage of the Mental Health SF target population receiving routine follow-up care after a 5150 discharge.

Quality of Life

11. Improve quality of life and functioning for persons in the Mental Health SF target population.



Funding MHSF Key Areas

Approximately \$55 million annually funded in the FY 21-22 & FY 22-23 budget in Prop C funds to expand and further support the four key MHSF domain areas

- Prop C investments build on existing department resources and staffing deployed to support the implementation of MHSF

MHSF Components (\$ millions)	FY 20-21	FY 21-22	FY 22-23
Office of Coordinated Care	\$4.2	\$9.7	\$10.0
Street Crisis Response Team	\$6.2	\$11.8	\$12.3
Mental Health Service Center	\$0.9	\$3.8	\$5.9
New Beds and Facilities	\$4.8	\$30.3	\$30.9
Total Ongoing Prop C Budget	\$16.2	\$55.5	\$59.0

- Planning for the FY 22-23 & FY 23-23 is underway with the Our City, Our Home (OCOH) Oversight Committee – these figures are subject to change pending the upcoming budget process



Other Investments to Serve PEH

Other key Prop C investments (~\$30M/yr.)* to provide expanded care for persons experiencing homelessness, and align with the goals of MHSF, include: overdose response support, health services in permanent supportive housing, and tailored services for TAY and transgender clients

- **Overdose prevention services** to support expanded access to medications for addiction treatment, contingency management, harm reduction, and related clinical support are underway.
- **Street Overdose Response Team (SORT)** launched in August 2021 in collaboration with the Fire Department - (1) Community Paramedic Response Team & (1) Post Overdose Engagement team (POEt) are operational
 - SORT responded to over 937 calls, 564 of which involved an overdose (as of January 2022)
 - Expansion of additional teams and services are expected to launch this Fiscal Year
- **Behavioral & Clinical Health Services in PSH** – 10 pilot sites for the service expansion, initially starting with physical health services, began in January 2022.
 - Some Behavioral Health and operations staff will be on board in Spring 2022 and additional Behavioral Health services will likely start in FY 22-23

* FY 21-22 & FY 22-23 approved budget figures

Thank you!



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