

SAN FRANCISCO

Housing Conservatorship Working Group

MEETING 19 • December 12, 2022 • 1:00-2:30PM • Zoom Platform



We acknowledge that we are on the unceded ancestral homeland of the Ramaytush Ohlone 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.



AGENDA

- Welcome & Agenda Review
- Implementation Update
- Data Review and Evaluation Update
- Program Updates
- State and Local Report
- Public Comment
- Closing & Next Steps



Workgroup Duties

Established by BOS Ordinance 108-19

Purpose

- Conduct evaluation on effectiveness of Housing Conservatorship implementation, and submit reports to the BOS, Mayor, and State Legislature, as required
 - Annual report to BOS and Mayor by January 21 each year
 - Annual reports to the State by January 1 each year



Implementation Update



Offers of Housing

- 16 individuals had 8+ 5150 WIC in the last 12 months (October 2021-October 2022)
 - Reviewed last 3 5150 WIC documentation for those individuals
 - 60% of the time, there was a documented offer of shelter/housing support
- In 100% of cases where a petition is filed, housing is included in the formal offers of treatment prior to conservatorship



Sample Written Offer 1 & 2



San Francisco Health Network
Behavioral Health Services

Hello Jane Doe,

Thank you so much for speaking with me today October 24, 2022. As discussed, your care team would recommend the following services to help support you.

- Meet with your case manager weekly to address, your mental health, substance use, social engagement, ADLs, etc.
- Monthly meetings with your psychiatrist for ongoing medication management.
- Utilize Dore Urgent Care Clinic 24/7 as needed when experiencing psychiatric distress, either in person at 52 Dore Street (between Howard & Folsom) or by calling 415-553-3100.
- Call the mental health warm line at 855-845-7415 when you feel distressed, are not experiencing a psychiatric emergency, and would benefit from talking to a peer counselor.
- Access detox options by dropping into 1380 Howard Street Behavioral Health Access Center Mon-Friday 8:30-4:00pm, or Health Right 360 at 1563 Mission Street.
- Enter either an ADU followed by a 90-day dual diagnosis program or a social detox program followed by residential treatment or a board and care facility. After successful completion from a program, clinically appropriate permanent housing will be available for you.

Your care team would be happy to help you connect with any and all of these services if you are agreeable to services. Please contact me or any member of your care team if you would like us to link you.

Thank you,

Christine Wright, Psy.D.
AOT Program Manager
555 Polk St.
San Francisco, Ca 94102
628.217.6435
Christine.e.wright@sfdph.org

Hard copy provided to Jane Doe via Christine Wright, Psy.D., AOT Program Manager at Zuckerberg San Francisco General Hospital, on October 24, 2022, at 3:30 pm.



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If you are detained ☐ 3 ☐ 2 ☐ 1 more time(s) before the expiration of the preceding 12-month period, a Petition for Appointment of Temporary Conservator may be filed, as described above.

A temporary conservatorship may be established by the Superior Court for a period not to exceed 28 days. A temporary conservator is authorized to decide where a temporary conservatee lives and to make decisions regarding psychiatric treatment.

You have the right to contest the establishment of the temporary conservatorship by filing objections with the Superior Court. If a temporary conservatorship is established, you also have the right to file a Petition for Writ of Habeas Corpus. If you need assistance with this, you should immediately contact the San Francisco Public Defender's Office at (415) 553-9308.

You may be able to avoid a temporary conservatorship being established by the Court if you agree now to engage in treatment. Services available include intensive case management, mental health services, substance use treatment, placement in a clinically appropriate treatment program, and upon discharge from such program, placement in permanent housing that is clinically appropriate, as determined upon placement.

Please speak to your current treatment team to engage in services, or find out more.

Dated: _____

Signature of person serving notice

Print/Type name of person serving notice

PROOF OF SERVICE BY PERSONAL DELIVERY

On _____, I personally delivered a copy of the document entitled,
Date and time of service

NOTICE OF POSSIBLE APPOINTMENT OF TEMPORARY

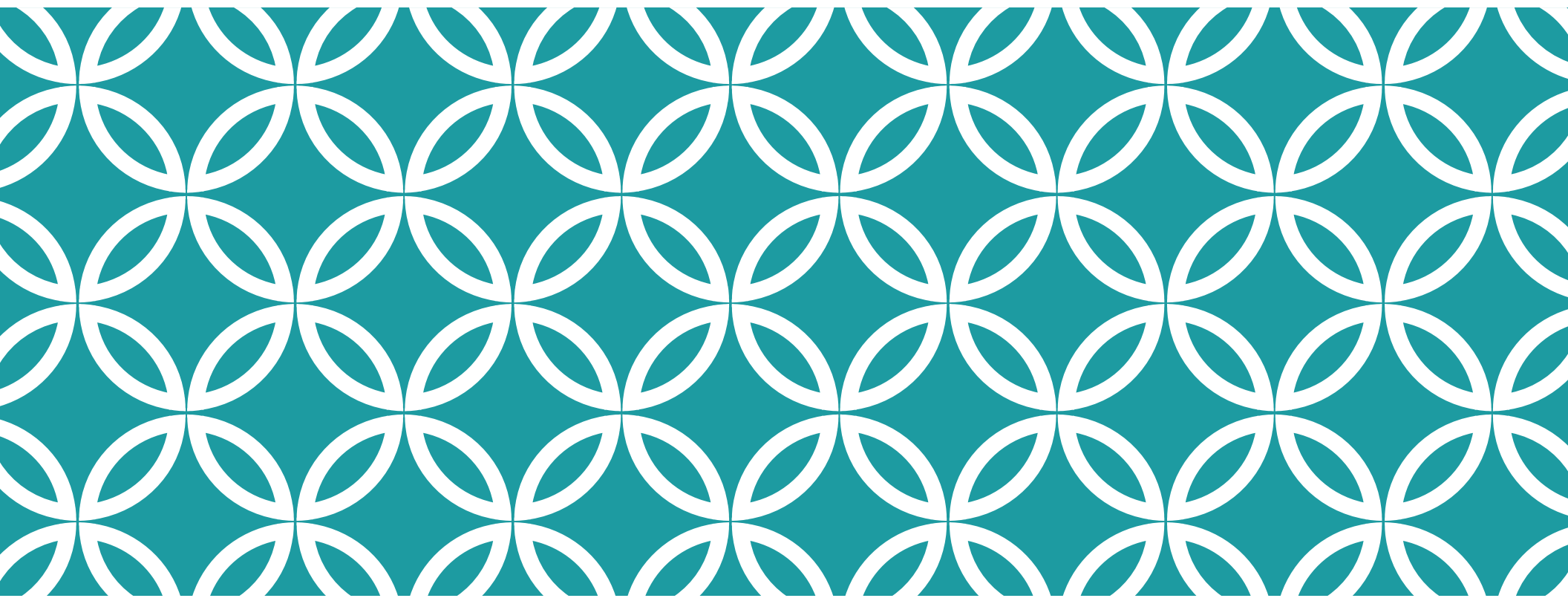


Evaluation Update

FY 21-22 SFPD reports of Hospital Taken To	Total Percent of Individuals Taken to Hospital	Total Percent of Individuals with 5150's Taken to Hospital
CCSF	0.04%	~
CHINESE HOSPITAL	0.28%	1.27%
COMC	0.08%	~
CPMC	27.50%	27.85%
CSU EDGEWOOD	0.04%	~
DAVIES	0.16%	0.63%
FREMONT HOSPITAL	0.04%	~
KAISER	5.27%	5.06%
SETON MEDICAL CENTER	0.04%	~
SF VA HOSPITAL	0.04%	~
SFGH	20.32%	17.72%
ST MARY'S	5.78%	10.13%
ST FRANCIS	20.29%	19.62%
ST LUKES	0.44%	0.63%
SUTTER	0.08%	~
UCSF	16.52%	17.09%
VA HOSPITAL	0.04%	~
unknown	0.20%	~

Data Collection for Local Report

- **Provider Survey:** Harder+Company will distribute a brief online survey to a broad array of providers who support conserved clients.
- **Individual Interviews:** Harder+Company will conduct high level telephone interviews with conserved individuals.



OFFICE OF COORDINATED CARE |



OFFICE OF COORDINATED CARE

Goal: Support equitable and low-barrier access to behavioral health care and seamless transitions between systems and levels of care

OFFICE OF COORDINATED CARE

Behavioral Health Access Programs

- Centralized access to behavioral health services
 - Behavioral Health Access Line (BHAL)
 - Behavioral Health Access Center (BHAC)
 - **Updates:**
 - Hours of operation expanded to M-F, 8am-7pm (June 2022)
 - Tracking and documentation moved to Epic (November 2022)

Care Management & Transition Support Services

- Centralized care coordination and case management to support individuals making transitions between levels of care or with needs impacting engagement in behavioral health services

OCC: CARE MANAGEMENT & TRANSITION SUPPORT SERVICES

- **Consultation** and **problem-solving** for hospitals, jail, and others regarding complex behavioral health service needs and levels of care
- Centralized **follow-up** for individuals making transitions between levels of care or leaving involuntary holds (5150)
- Bridge **case management** services with goals of engaging, stabilizing, addressing care and service needs, and connecting to ongoing behavioral health services

OCC: CARE MANAGEMENT & TRANSITION SUPPORT SERVICES

Care Management Triage Team

Coordinating team responsible for:

- triaging referrals and identifying needs
- coordinating care with discharge locations (e.g. hospital)
- deploying case management services
- providing consultation and problem-solving regarding complex behavioral health service needs
- Systematic tracking & coordination for individuals placed on involuntary holds (5150)

OCC: CARE MANAGEMENT & TRANSITION SUPPORT SERVICES

Bridge & Engagement Services Team (BEST)

Case management services for individuals with high acuity needs – post-acute care, leaving jail, poor connection to behavioral health services:

- field-based, assertive outreach and engagement
- connection to health and non-health services – behavioral health, medical care, housing, benefits
- bridge behavioral health services incl. medication

IMPLEMENTATION UPDATES

OCC: Behavioral Health Access Programs

Behavioral Health Access Center

- **Updates:**

- Hours of operation expanded to M-F, 8am-7pm (June 2022)
- Tracking and documentation moved to Epic (November 2022)

- **Next Steps:**

- 2nd Phase of Expanded Hours to Sat & Sun (Fall/Winter 2022)



STREET CRISIS RESPONSE TEAM

Housing Conservatorship
Workgroup
12.12.22



Street Crisis Response Team

Goal and Strategies

Goal: Provide rapid, trauma-informed response to calls for service to people experiencing crisis in public spaces in order to reduce law enforcement encounters and unnecessary emergency room use.



1. Identify 9-1-1 calls that will receive behavioral health and medical response rather than law enforcement response.



2. Deliver therapeutic de-escalation and medically appropriate response to person in crisis through multi-disciplinary team (paramedic + behavioral health clinician + peer).



3. Provide appropriate linkages and follow up care for people in crisis, including mental health care, substance use treatment, and social services.



Program Details

- Vehicle
 - Fire Department Vehicle (aka rig)
 - Able to transport individuals to voluntary treatment locations
- Coverage
 - Seven teams providing citywide, 24/7 coverage
- Team Staffing
 - Community paramedic (on rig)
 - Behavioral health clinician (on rig)
 - Peer health worker (on rig)
 - Multi-disciplinary team dedicated to linkages and follow up care coordination



DATA THEMES

- Most crises are resolved in the community, 57% of SCRT clients remain safely in the community.
- There is a need for shelter and housing resources, 64% of SCRT clients are experiencing homelessness.
- There is a low percentage of SCRT clients who need a 5150 hold (5%).
- Clients served by SCRT are diverse in race, ethnicity, age, and gender.
- The SCRT Office of Coordinated Care (OCC) followed up with 85% of clients in October and 59% of all SCRT clients since they launched in April of 2021.
- SCRT OCC has connected 28% of clients with treatment facilities or existing providers.



DATA — OCTOBER & CUMULATIVE



Crisis Calls Handled by SCRT

	October	Cumulative*
Crisis Calls Handled by SCRT	688	13,563



SCRT-Eligible Calls that Received SCRT Response**

	October	Cumulative
SCRT-Eligible Calls that Received SCRT Response**	79%	78%

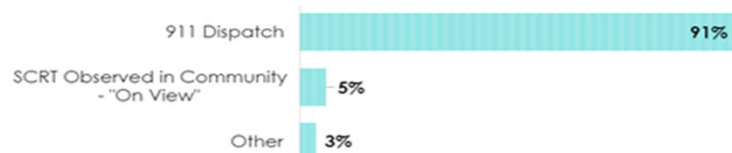


Average Response Time

	October	Cumulative
Average Response Time	18min	17min



Referral Source: Cumulative

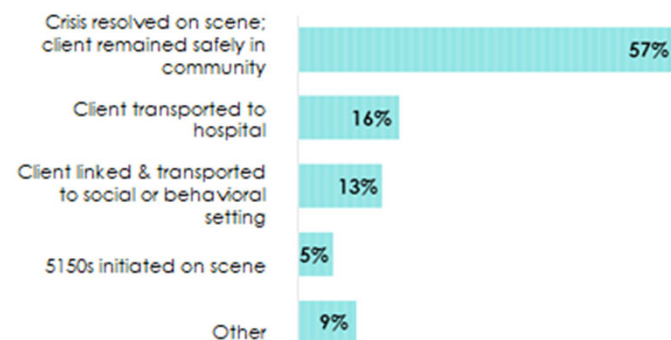


Client Engagements

	October	Cumulative
Client Engagements	426	6,913



Engagement Outcomes: Cumulative



*A single client engagement may result in multiple outcomes.

DATA — SCRT OCC



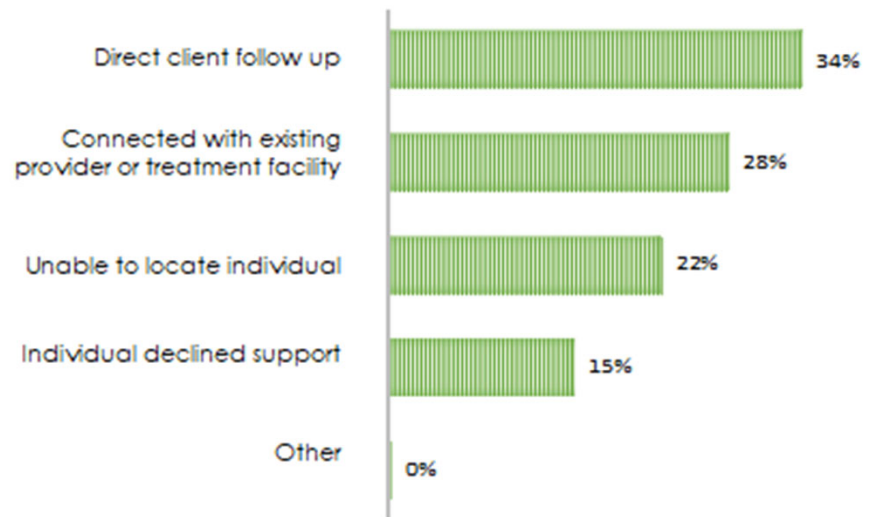
SCRT Office of
Coordinated Care Follow
Up Rate

October
85%

*Cumulative
59%



Connections to Care: Cumulative

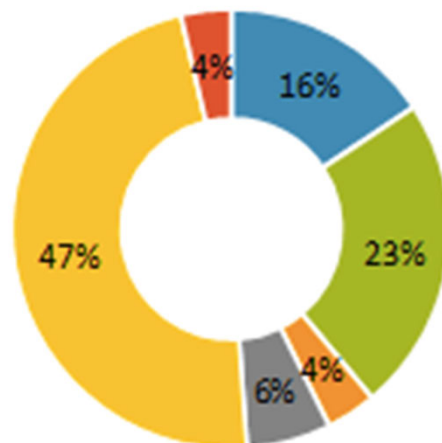




DEMOGRAPHIC DATA - CUMULATIVE

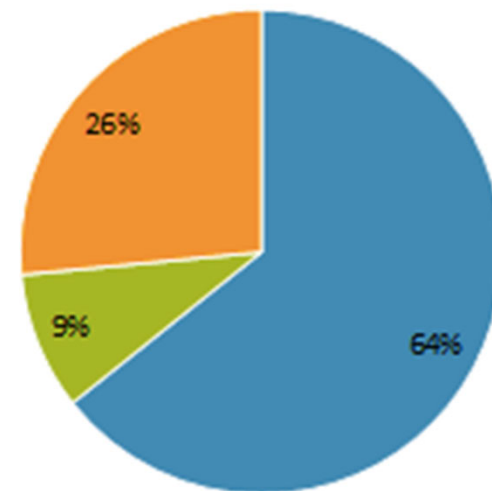
Race & Ethnicity

- Black or African Descent
- White or Caucasian
- Asian/Pacific Islander
- Hispanic/Latinx
- Unknown/No Entry



Living Situation

- Experiencing Homelessness
- Housed/Other
- Unknown/No Entry





PUBLIC COMMENT



Closing and Next Steps

Upcoming Working Group Meetings:

Dates:

January 9, 2023

April 17, 2023

August 14, 2023

December 4, 2023

Time: 1:00-2:00pm

Meeting location will be determined based on current health recommendations



Information Sharing and Engagement

Email: Housing.Conservatorship-Workgroup@sfdph.org

Website Updates: sf.gov/information/housing-conservatorship