

# San Francisco – Mental Health Services Act

## FY23/24 – FY25/26 Three-Year Integrative Plan

February 2024



San Francisco Health Network  
Behavioral Health Services



# Behavioral Health Services (BHS)

BHS offers a full range of specialty behavioral health services provided by a culturally diverse network of community behavioral health programs and private psychiatrists, psychologists and therapists.

Mental Health and Substance Use Services include outpatient treatment, inpatient treatment, medication management, linkage services and a large array of more specialized treatment services.

Services are available to residents of San Francisco who receive Medi-Cal benefits, San Francisco Health Plan benefits and to residents with limited resources.



# Mental Health Services Act Overview



MHSA Enacted into law in 2005



1% tax on personal income over \$1 million



Designed to support the transformation of the mental health system to address unmet needs



Based on a set of core principles



# MHSA County Expenditures

Counties are required to prepare a Three Year Program and Expenditure Plan

Gain approval of Plan through annual stakeholder process

All MHSA expenditures are required to be in accordance with an approved Plan

MHSA funds cannot be used to supplant existing resources

Counties required to prepare and submit MHSA Annual Revenue and Expenditure Reports

**MHSA Statewide Estimated Revenues**  
**(Cash Basis-Millions of Dollars)**

	Fiscal Year			
	Estimated			
	22/23	23/24	24/25	25/26
Cash Transfers	\$1,813.8	\$2,180.0	\$2,030.0	\$2,131.5
Annual Adjustment	\$530.6	\$2,366.9	\$753.2	\$212.0
Interest	\$12.4	\$34.2	\$34.2	\$10.0
<b>Total</b>	<b>\$2,356.8</b>	<b>\$4,581.1</b>	<b>\$2,817.4</b>	<b>\$2,353.5</b>

# FY23-26 Three-Year Integrative Plan



Each year BHS/MHSA is required to collect community and stakeholder input and integrate this feedback into all areas of MHSA programming. A Three-Year Integrative Plan or Annual Update is required each year.

The FY23-26 Three-Year Integrative Plan is a report that includes community program planning input, program outcomes/highlights from FY21/22 and plans for FY23/24, FY24/25 and FY25/26.

# MHSA's 5 Funding Components: San Francisco's 7 Service Categories, funding 85 programs



Community Services  
& Supports (CSS)



Innovation (INN)



Prevention and Early  
Intervention (PEI)



Workforce Education  
and Training (WET)



Capital Facilities and  
Technology Needs (CF/TN)

1. Recovery-Oriented Treatment
2. Mental Health Promotion
3. Peer-to-Peer Support Services
4. Vocational Services
5. Housing for FSP Clients
6. Workforce Development
7. Capital Facilities and Information Technology



# Community Program Planning Process

- ✓ In 2022, SF-MHSA hosted **16 community engagement meetings** across the City.
- ✓ Over **165 individuals participated** in these Community Program Planning meetings.
- ✓ Community member feedback helped shape existing and future MHSA programming, and the FY23-26 Three-Year Integrative Plan.



We increased our outreach efforts to include more involvement with certain stakeholder groups:

- Local veterans
- Transition Age Youth
- Vocational program participants
- Older Adult community
- LGBTQ+ community
- Primary care and medical staff
- Employees of municipal agencies
- Law enforcement
- Maternal health providers
- SFDPH Department of Equity
- Black/African American and Latinx Communities

# FY21/22 Selected Outcomes

- These outcomes are a small sample of the outcomes we achieved. Please see our full
- Three-Year Plan for all outcomes reported.
  - Sustaining funding for current programs and services with demonstrated impact;
  - Providing additional funding to strengthen population-focused: Mental Health Promotion and Early Intervention Programs;
  - Expanding the San Francisco Dream Keeper Initiative ([www.dreamkeepersf.org](http://www.dreamkeepersf.org)), which provides comprehensive support for 300 Black/African American families struggling to meet basic needs due to systemic failure and educational activities for 500 Black/African American youth;
  - Piloting a project to bring culturally affirming patient navigation support to the City's Chinatown North Beach Clinic;
  - Developing a Request for Proposal for Community-Based Organizations to provide mental health services to Black/African American Birthing People
  - Providing Talk Therapy to Black/African American clients throughout San Francisco;
  - Providing support to various clients within our population-focused programming:
    - 97% of clients (n=38) within the Asian/Pacific Islander Mental Health Collaborative reported an increase in their quality of life and "feeling better", as a result of participating in therapeutic activities.



# Peer Specialists are Critical to MHSA

MHSA emphasizes the importance of consumer participation in the mental health workforce. Peer Certification programs were created collaborating with Richmond Area Multi-Services, San Francisco State and City College of San Francisco. In addition, all MHSA programs are encouraged to hire peers as members of program staff. **SF-MHSA funded 258 peers in FY21/22** throughout our behavioral health system. Consumers can be found working in almost all levels and types of positions, including: peer counselors, health promoters, community advocates, workgroup leaders, teaching assistants, and in management.

# FY23-24 through FY25-26 Three-Year Plan

The proposed MHSa Three-Year Plan includes the following:

- Sustaining funding for the current 85 MHSa programs and services that have demonstrated to have a significant positive impact on San Francisco communities;
- Continuing to implement, support and evaluate the newly funded MHSa programs:
  - Improving Maternal Mental Health for Black/African American Birthing People
  - Homeless Children's Network MA'AT Program
  - Kummba Peer Fellowship Program
  - FUERTE
  - Wellness in the Streets
  - Technology Assisted Mental Health Solutions
  - Culturally Responsive Practices for the Black/African American communities;
- Continuing to grow Full-Service Partnerships (FSPs) by expanding treatment slots;
- Continuing to monitor and engage in stakeholder collaborative meetings regarding
- Senate Bill 326 that proposes the modernization of the Mental Health Services Act.



# Spotlight on SF's Changing Needs



San Francisco faces various crises of mental illness, overdose, homelessness, and housing insecurity—each factor exacerbated by the high cost of living and the compounding effects of trauma and systematic racism.

MHSA is committed to being a part of San Francisco's mental health system transformation that provides mental health care to all San Franciscans who lack insurance or who are experiencing homelessness.

- **MHSA provides 51% of its funding to address serious mental health and co-occurring substance use challenges through our Full-Service Partnership programs.**
- **MHSA provides comprehensive housing programs to better meet the needs of unhoused individuals.**
- **MHSA has population-focused programs that address racism and equity issues.**
- **The Wellness in the Streets program primarily works with individuals directly on the street and provides peer services, support and interventions in the community.**

# Emphasis on Evaluation

We place a strong emphasis on program evaluation across the MHSA components. Over the past years, we worked hard to enhance our monitoring and evaluation activities in order to effectively meet the objectives of our MHSA-funded programs.



- ✓ Increased the integration of MHSA principles into the larger BHS System
- ✓ Improved tracking efforts of ICM to Outpatient referrals and outcomes
- ✓ Increased evaluation efforts of Innovation Projects
- ✓ Improved SMART objectives for MHSA contracts
- ✓ Improved evaluation frameworks for new Request for Qualifications (RFQs)
- ✓ Increased evaluation efforts with Gender Health SF
- ✓ Improved the monitoring of PEI evaluation activities

# Comments?



## MHSA Regulations

*The mental health board established pursuant to Section 5604 shall conduct a public hearing on the draft three-year program and expenditure plan and annual updates at the close of the 30-day comment period required by subdivision (a). Each adopted three-year program and expenditure plan and update shall include any substantive written recommendations for revisions. The adopted three-year program and expenditure plan or update shall summarize and analyze the recommended revisions. The mental health board shall review the adopted plan or update and make recommendations to the county mental health department for revisions.*

We usually vote on items for approval, however per MHSA Regulations, we will instead collect comments/revisions for the FY23-26 Three-Year Integrative Plan. We will include your comments and revisions in our Final Report that we submit to the SF Board of Supervisors and the State.

# Thank you for your time



Jessica N. Brown, MPH

Director, Office of Justice, Equity, Diversity and

Inclusion/Mental Health Services Act

Behavioral Health Services

1380 Howard Street

San Francisco, CA 94103

415-255-3963

Jessica.N.Brown@sfdph.org