

Mental Health Liaison Meeting

Programmatic Deep Dive

Date of Meeting: February 14, 2024

Attendees:

<p>Controller's Office: Radhika Mehlotra, <i>Homelessness Policy Specialist;</i> Ivy Huwald, <i>Performance Analyst</i></p>	<p>Department of Public Health: Kelly Kirkpatrick, <i>Director of Administration and Operations, Mental Health SF;</i> Emily Gibbs, <i>Deputy Finance Officer Budget and Planning;</i> David Edelman, <i>Budget & Operations Analyst – Mental Health SF</i></p>	<p>Our City, Our Home Oversight Committee: Member Jennifer Friedenbach</p>
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1. Programming Update on Mental Health - What Mental Health programming in the OCOH fund was proposed by the Committee?

- Which programs have been fully implemented?
 - Budget-wise, programs have been roughly **80% implemented**.
 - DPH has implemented psychiatric follow up with **Jail Health Services** to improve pathways for people leaving incarceration.
 - DPH has implemented **Harm Reduction Drop-in space**.
 - Member Friedenbach asked how much funding went towards therapy for the harm reduction drop in space.
 - **Tenderloin Linkage Center** was piloted, and wellness hubs remain a policy choice.
- Which programs have been partially implemented?
 - **Managed Alcohol Program (MAP)**- 15 out of 20 beds filled, ramping up staffing for this and added 6 beds for Co-Op Housing
 - **Permanent Housing Advanced Clinical Services (PHACS)** is currently covering 97 PSH sites, 6,200 residents, and planning to expand to all 140+ PSH sites in 2024.
 - **Overdose Prevention and Services** has mostly rolled out. Pairing this funding with opioid settlement funds and state grants to expand services including **BART Market street clinic** hours expansion.
 - **Behavioral Health access center** hours expanded (this falls under Drop-in services with the expansion of hours being funded by Prop C).
- Which programs have not been implemented thus far?
 - **Crisis Stabilization Unit** is under construction and expected to be running by 2025.
 - Still looking for a site to acquire for **TAY residential recovery**.
 - Treasure Island's new building for existing **residential step-down units** is currently in design.
 - Pursuing acquisition of potential sites for the **Mental Health Service Center**.
 - Pursuing acquisition of facilities to house **remaining residential programs and/or relocate beds in-county**.
- **Measures of success across Mental Health programming** - Which programs have demonstrated success along those measures?

- DPH has identified **11 core metrics**.
- DPH has been collecting useful **utilization data** capturing how many individuals, households, and/or families are being served in each program.
- DPH is continuing to publish metrics tracking **overdose deaths**.
- What challenges are emerging across the programs?
 - **Outcome data** could continue to improve (linkage to care, quality of life, etc.).
 - **Behavioral health staffing challenges**
 - City workforce recruitment and retention barriers, especially for behavioral health licensed clinicians and health workers. Community-based providers facing same obstacles – part of a statewide challenge
 - Controller’s Office behavioral health staffing and wage analysis to be released in 2024
 - **Long timelines to contract for services**
 - Legislation pending to expedite the procurement of residential treatment services.
 - **Challenges in securing acquisition**
 - Difficulties locating and acquiring suitable in-county residential treatment facilities
 - Diverse set of programs with differing real estate needs and state licensure requirements.
- Are there Mental Health programs that are serving sub-populations including victims and survivors of domestic violence; larger family sizes; or pregnant people?
 - Launched a 33-bed expansion of the **HER House** using Prop C funding. Many of these women are in the family unification process.
 - DPH was recently awarded State bridge housing funds which is being put towards **15 TAY beds for women**.
 - Prop C Funded the expansions of the **Minna Project** which provides transitional housing and treatment for justice-involved adults with a dual diagnosis of mental illness and/or substance use disorder.
- How will CalAIM affect OCOH Mental Health programming and spending?
 - DPH is beginning to leverage CalAIM funding for some programs including, Enhanced Care Management in PHACS, Office of Coordinated Care, and Street Medicine.
 - CalAIM rates are negotiated with Medi-Cal managed care. CalAIM requires a complex billing processes that existing programs may not be designed to handle yet