Wellness Message of Support after the Tragedy in Yountville

In March, we shared the shock and sadness of learning of another mass casualty workplace shooting. While every one of these incidents is tragic, this one was particularly close to home, in more ways than one.

The Pathway Home on the campus of the Veterans Home of California-Yountville, where the shooting happened, is part of the broader Bay Area region. Their work to help veterans with emotional trauma to recover is very much like what we do in our San Francisco behavioral health care system every day.

For those of us working in health care and public health, we feel these losses acutely. The victims in this case – those who died and those who experienced the event -- were our brothers, sisters and clients. We are deeply saddened, and may question, why did this happen? It is natural to ask questions, and we may never have satisfactory answers. That uncertainty can add to our stress and grief.

This type of event impacts every one of us in unanticipated ways. It may prompt all kinds of feelings and concerns in our lives, including the workplace. At times, we can feel overwhelmed and need additional support. As professional caregivers, we must follow the advice we would give our patients and clients. Self-care is crucial to get through adversity and thrive.

If you find yourself needing more support, please access resources provided within SFDPH, through your agency, and in the community. As available, feel free to seek help from the Employee Assistance Program, for counseling. Supervisors, please be mindful that staff may be impacted and remind them of these resources. Providers, please continue to keep your eye out for signs of trauma among our clients, and offer them appropriate services.

Here are some practical tips for wellness and taking care of yourself:

- Talk about it with family, friends, co-workers and/or counselors and ask for support if needed
- Take a mental health break by limiting your amount of exposure to the news and/or internet
- Take care of yourself by eating balanced meals, exercising, getting rest, using relaxation techniques and avoiding excessive use of alcohol and drugs
- Trust your feelings -- it is okay to have a range of emotions
- Take time to heal before making any big decisions or life changes
- Take time to enjoy the little things—enjoying pets, hugs from family/friends, a walk in nature
- Be extra nice to and make time for your friends, family, clients and co-workers
San Francisco Healing Center Opens at St. Mary’s Medical Center

SFDPH is pleased to announce the opening of the San Francisco Healing Center, a new 54-bed facility located at St. Mary’s Medical Center. The 54 beds at the Center will add to the existing 47 beds at the Mental Health Rehabilitation Center (MHRC), located in the Behavioral Health Center on the campus of ZSFG Hospital, for those individuals who have a severe mental illness and are placed on conservatorship, who do not need acute care, but yet are not able to care for themselves on their own (i.e., on basic needs for food, shelter or clothing).

The new Center, is a public-private partnership, including San Francisco Department of Public Health, non-profit health provider Dignity Health, Crestwood Behavioral Health, and UCSF. The Center will be managed by Crestwood Behavioral Health, which offers a comprehensive program for recovery and wellness to help individuals participating in the programs develop the skills they need to pursue independent living. SFDPH will serve as the lead agency & oversee the project. In addition to significant funds from City & County of San Francisco, Dignity Health contributed to the cost of space and renovations at its St. Mary’s Hospital, where the program is located. UCSF is also contributing up to $1 million to the cost of renovation and programming for the Center.

1. MENTAL HEALTH SERVICES ACT (MHSA)

In partnership with Richmond Area Multi-Services, Inc. (RAMS), San Francisco’s Department of Public Health (SFDPH) – Mental Health Services Act (MHSA) welcomes Heather McDonnell Haney as the new Behavioral Health Services Liaison to the department’s Client Council and Quality Improvement Committee – as well as the leader of Client Council’s Stigma Busters’ committee. Her role is pivotal in bringing consumers’ voices and peers’ perspectives to planning, implementation and evaluation discussions that happen at SFDPH Behavioral Health Services. In her role with the Stigma Busters committee, Ms. Haney will lead local community outreach projects that aim to: a) reduce the stigma and discrimination that is commonly attached to mental health and b) encourage people to seek help when they need mental health support. For more information about SFDPH’s Client Council, Quality Improvement Committee and Stigma Busters committee, please contact Ms. Haney at HeatherHaney@ramsinc.org.

2. CHILDREN, YOUTH AND FAMILIES (CYF) SYSTEMS OF CARE UPDATES

Spotlight on Mission Family Center, L.E.G.A.C.Y., Parent Training Institute, and Project 500

- Mission Family Center (MFC) says good-bye to José Hipólito, Director of Activities Therapy and Volunteer Services as he is retiring after 24 years of service. José worked under seven directors during his tenure and has always acknowledged that when he was working at what is now Cesar Chavez Elementary School, he met German Walteros, LMFT (currently Associate Director at Instituto Familiar de la Raza, Inc.), who encouraged him to apply to work at MFC. He has been here ever since! When he started, MFC had a Day Treatment Program and José was in charge of all the groups and activities, and he fostered the relationship with the Elks Club. Later he and Dr. Irene Sung (currently BHS Chief Medical Officer) founded “La Escuelita” at MFC and collaborated with Mission Neighborhood Centers and other childcare centers to provide a place for children experiencing difficulties to settle in to a structured therapeutic setting before entering or returning to their main stream pre-school program. He facilitated a group for middle school boys for many years and more recently helped co-facilitate FUERTE groups – a collaboration between CYF, SFUSD and UCSF. José was instrumental in helping to organize MFC’s community and school outreach efforts in his last four years including CARNAVAL and participating in the Chicano/Latino/Indigena Health and Wellness Task
José set the bar for working until his last day with as much enthusiasm as he had on his first. José’s positive energy will be truly missed. We wish him well in his world of travels and in the inspiring work he does with children in Thailand. *José Hipólito PRESENE y ADELANTE!*

- LEGACY hosted another successful Family Support Night on February 26th. After dinner, the families celebrated both Black History Month and Chinese New Year, through a game of Jeopardy with culturally-based questions around both these events & celebrations. Families enjoyed learning in a fun-filled way and was given the opportunity to share what both events meant to them and their families. LEGACY helped recruit participants for two of the DCYF African American Service Planning- focus groups; one for TAY, and one for parents & caregivers. The focus groups were held at LEGACY in February 26th. LEGACY staff also assisted with greeting the participants upon arrival and with child watch. Parent Support Group will hosted by LEGACY and Southeast Child/Family Therapy Center, and facilitated in Cantonese. The group will be held on Wednesday evenings from 6pm-8pm at LEGACT starting March 21st and ending on April 25th. As there has been a rise in teenage suicidal ideation and attempts amongst Cantonese-speaking, Chinese American families/teens, this group hopes to support these families with building healthy communication skills and referrals to community resources.

- Dr. Stephanie Romney represented the Parent Training Institute (PTI) at the Helping Families Change Conference (HFCC) in Santa Rosa, California. The HFCC is an international conference that brings together researchers, administrators, and practitioners focused on effective and culturally-responsive delivery of the Triple P parenting program. In addition to delivering three presentations that highlighted San Francisco's Triple P program, Dr. Romney also served as Co-Chair of the Conference this year. Further adding to the PTI's work with Triple P parenting, we also champion the Supporting Father Involvement (SFI) curriculum and are pleased to announce that the second SFI series at the Sunnydale Wellness Center has just begun. This evidence-based 16 week program has been shown to improve the emotional, interpersonal, and economic outcomes for fathers and their families. The PTI is proud to be supporting the Wellness Center team in implementing SFI with fidelity.

- Project 500 provides intensive resources, wrap-around services, and case management across City departments for families in San Francisco, and gives them the meaningful pathways up and out of poverty. The Project 500 Behavioral Health Team is working with SFPDH Maternal Child & Adolescent Health (MCAH) NFP (Nurse Family Partnership) on the roll-out of their new Intimate Partner Violence (IPV) assessment and intervention model. The goal is to develop a shared approach and language for supporting nurses on this important topic that impacts many families. On creating a Reflective Practice for Project 500 staff, Project 500 Behavioral Health Clinical Supervisor, Dr. Meghan Spyker, is teaming with the UCSF Infant-Parent Program to create a day-long training on Reflective Practice for MCAH Field Nurses and Project 500 CalWORKs staff. They will also co-create an ongoing support system for implementation and sustainability of the model.

3. **ADULT & OLDER-ADULT (AOA) SYSTEMS OF CARE UPDATE**

**BHS Private Provider Network Revitalized**

BHS conducted trainings on clinical documentation to about 200 BHS Private Provider Network clinicians, with several separate cohort meetings since January 2018. The PPN providers are now all using revised assessment, treatment plan, and progress note forms designed to better ensure compliance with
Medi-Cal regulations. BHS is grateful for the enthusiasm and participation of our PPN providers.

PPN providers constitute a significant part of BHS Systems of Care, currently serving approximately 750 active San Francisco residents. They serve individuals who don’t have as much income as those who have private health insurance or ability to pay, meeting medical necessity for specialty mental health services.

The PPN unit within BHS has been revitalized in the last year, with Gloria Frederico, LMFT as its Program Manager. The PPN team are continuing to enhance the system, through various activities such as; renewing provider contracts, improving regular communication, providing technical assistance, establishing regular rate increases, creating website presence, and reviving the PPN annual meeting of providers.

The PPN team works in close coordination with BHS Compliance, BHS Clinical Documentation Specialist, Behavioral Health Access Center, BHS Billing Unit and IT Section, and SFDPH Office of Contract Management & Compliance. The Foster Care Mental Health and Family Mosaic Project are also partners of the PPN team, whose clients are served by PPN providers. BHS is committed to support our PPN providers in delivering excellent services and will assist PPN providers in navigating with as much ease as possible the various administrative and compliance-related structures that govern the funding of services.

**Mental Health Program Directors Review Progress of ICM/OP Client Flow initiative**

BHS Mental Health Outpatient (MH OP) and Intensive Case Management/Full Service Partnership (ICM/FSP) program directors regrouped to review the progress of three workgroups that have been meeting twice a month since December 2017 to come up with recommendations to ensure the successful connection into outpatient mental health programs of clients stepping down from ICM/FSP level-of-care. The three workgroups have been making progress in developing plans and proposed protocols.

Workgroup #1 is developing an Intervention Toolkit for use by ICM/FSP to promote a culture of recovery and expectation of completion in their work with the clients. They have also come up with a questionnaire on client readiness to step down from ICM/FSP to regular Mental Health Outpatient level-of-care.

Workgroup #2 is developing a referral process, from start to finish, to be agreed upon between ICM/FSP and MH OP programs, that will orchestrate the warm hand off of clients from ICM/FSP to OP in a way that ensures successful transfer and connection, as best as possible.

Workgroup #3 is exploring ways by which the receiving MH OP programs will work with clients stepping down from ICM/FSP in a especially individualized manner, in order to mitigate the steep drop of services and resources available to clients in MH OP as compared to in ICM/FSP, such as providing an "ICM-lite" level of transitional case management, monitoring the stepped-down client’s continued engagement with MH OP services, facilitating stepped-down clients’ continued connection to social support milieu, and problem-solving the absence of critical ICM-FSP adjunct services, such as rep payee.

All the Mental Health Outpatient and ICM/FSP Program Directors will be regrouping again to review the three work-groups’ final recommendations and plan for implementation.
4. **FORENSIC/JUSTICE INVOLVED BEHAVIORAL HEALTH SERVICES**

**Spotlight on Assisted Outpatient Treatment**

Assisted Outpatient Treatment (AOT) is preparing to submit its third annual report to the State Department of Mental Health (www.sfdph.org/aot). Many thanks to Harder+Company and USCF Citywide for their support in the evaluation process.

Some highlights include that individuals with contact with AOT, since the implementation of the program in November 2015, showed overall reduction in negative outcomes:

- 76% of participants were successful in reducing or avoiding PES contacts
- 60% of participants were successful in reducing or avoiding time spent psychiatrically hospitalized
- 79% of participants were successful in reducing or avoiding time spent incarcerated

Of note, there have been statistically significant reductions in Psychiatric Emergency contacts and days spent incarcerated when comparing an individual’s contact with these systems prior to working with AOT and after working with AOT. Additionally, only 17% of participants are referred to the court to request a court order to participate in outpatient mental health treatment, with an overwhelming number of individuals outreached accepting voluntary services.

To date there has been a great deal of positive feedback from families and program participants about the support offered to them by the AOT program. Feedback from participants has been overwhelmingly positive with 81% of individuals surveyed reporting feeling hopeful about their future and 82% of individuals surveyed reporting that they have been treated with respect. One court ordered participant reported, “I didn’t want to get anybody involved with my issues. I just wanted to work it out myself, but I found that there is support in the community when you need it” and another reported, “My experience with the AOT program has been positive. Overall, I’ve been feeling like a better me.” Further, a family member was noted to say, “AOT saved my family in a way I can’t explain. I’m very grateful to this amazing program and team”, and family members have reported having increased awareness about services in San Francisco, as well as a better understanding of mental health symptoms.

If you would like more information about AOT, please visit SFDPH website at www.sfdph.org/aot. If you would like to make a referral to AOT, please contact us at 415-255-3936.

5. **Pharmacy Report**

**Health Living Wellness Group at Mission Mental Health Clinic/Program**

Organized by the clinical pharmacist, the Healthy Living group was started at Mission Mental Health Clinic/Program with the goal of assisting clients with severe and persistent mental illness to take steps towards a healthier life style. Their diagnosis as well as some of the medication treatments put this population at a higher risk for metabolic complications. The group has evolved over the years from a 12 week program focusing on weight-reduction to an ongoing weekly group that it is today. The group aims to provide skills to clients who may have limited academic skills gain knowledge that can assist them in making small changes in their living and eating habits. Providing an ongoing weekly support group allows clients to gain new information and make gradual changes in a supportive environment.
The group takes into account language, cultural and financial factors to assist clients in group. Clients join the group with different goals however weight reduction is generally the most prominent goal. Clients are introduced to health consequences of being overweight and sedentary and are taught ways to take small steps towards improving their overall health. Many topics are covered in group and are revisited in a cyclic rotating fashion while adding new information to allow for new members to join at any point in time. Topics include but not limited to the following:

How to read a nutrition label, basics of a healthy eating plate, stress management, portion control, basic concepts of fats, proteins and carbohydrates, benefits of adding fruits and vegetables, introduction to diabetes, hypercholesterolemia, eye health, dental health, benefits of exercise, goal setting, mindful eating, introduction to mindfulness training, etc.

The group has also teamed with other organizations to provide healthy, economical and easy cooking classes to clients in the group. Pharmacy students have assisted with the groups and we are also beginning to collaborate with other clinicians in the clinic to provide well rounded opportunities for clients to work towards their healthier living goals.

Most members have incorporated skills learned in group into their daily routines. Several clients have become more adherent with medications which has led to better control of their medical condition. Weekly vitals are taken in group, which helped identify a member who had untreated hypertension. The client was referred to the primary care provider and ultimately was prescribed antihypertensive medication. However, the biggest benefit that has been observed is the support that clients find in group. The current incorporation of mindfulness training has provided clients new ways to manage psychiatric symptoms while working towards healthier life skills. Recently, the group started a quick check-in before & after class and clients share how they are feeling. Below are some examples of their before and after check-in words:

<table>
<thead>
<tr>
<th>Before:</th>
<th>After:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>Less pain</td>
</tr>
<tr>
<td>Restless</td>
<td>Centered</td>
</tr>
<tr>
<td>Stress in my neck</td>
<td>Calm, relax, aware</td>
</tr>
<tr>
<td>Rushed</td>
<td>Happy</td>
</tr>
<tr>
<td>Flustered</td>
<td>Relaxed</td>
</tr>
<tr>
<td>Out of touch</td>
<td>Centered</td>
</tr>
<tr>
<td>Nervous</td>
<td>Happy</td>
</tr>
<tr>
<td>Fidgety</td>
<td>At ease</td>
</tr>
<tr>
<td>Scattered</td>
<td>Content and peaceful</td>
</tr>
</tbody>
</table>

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