



Behavioral Health Services – *Monthly Communications Report*

In Loving Memory: Maria X Martinez



From DPH Director Grant Colfax

It is with a heavy heart that I share the sad news that a longtime member of the DPH family, Maria X Martinez, died peacefully in her home yesterday. She was surrounded by a loving circle of close family and friends and a more extended spiritual circle of all she has touched during her lifetime. Some of you may know that Maria has been on leave for the past couple of months due to illness. I am sorry to share this with you during this time of isolation and separation when we cannot be together.

Maria worked for San Francisco's Department of Public Health for 23 years, during which time she passionately championed the needs of vulnerable populations. She focused on building initiatives and developing care models for high-risk populations through new collaborations and system design. A key member of DPH leadership, she served in the following roles: Deputy Director of Community Programs, Senior Staff to the Director of Health, Chief Integrity Officer, and the Director of Whole Person Care. Maria continually strived to bring a racial and equity lens to creating a seamless network of services to engage and meet the most complex needs of San Francisco's most vulnerable residents.

The capstone of Maria's career was serving as the Director of Whole Person Care, a project that aims to improve outcomes for adults experiencing homelessness in San Francisco through enhanced care coordination. Maria solidified interagency partnerships among DPH, the Department of Homelessness and Supportive Housing (HSH) and the Human Services Agency (HSA), bringing these departments together to work in ways they previously had not. Under her leadership and vision, San Francisco adopted a population-based approach to providing holistic health, housing, and human services to vulnerable adults experiencing homelessness. The Shared Priority project piloted citywide care coordination and interagency data sharing to identify and problem-solve system barriers and create street-to-home plans with a "whatever it takes" approach.

DPH's Whole Person Care work will continue through the Shared Priority collaboration; direct clinical services which have coalesced as our new Whole Person Integrated Care section; and in the new Integrated Homeless Resources Center which will be located in our beautiful new supportive building at 1175 Mission Street.

Outside of her work with DPH, Maria helped build public-private coalitions, regional and community-based initiatives, and public policies. For the past 15 years, Maria was an active board member of the Chicana Latina Foundation, where she developed a leadership institute for scholarship recipients. We will share more information about how to donate in Maria's honor at a later date.

Maria truly led the way in creating care models and effective systems of care for people experiencing homelessness and other medically vulnerable people in our community. So much work that lives on in the Department of Public Health is a result of Maria's vision, commitment, and dedication to improving the lives of people experiencing homelessness or with unstable housing. She was a beloved colleague, leader, and mentor who touched innumerable lives during her 23 years with DPH.

We will miss our dear Maria tremendously and express our deepest condolences to her beloved daughter Paloma and the rest of her grieving family and close friends. I also know that many of you are really suffering with the news of Maria's death, especially during this time when there is so much loss and pain and when there are many barriers to taking care of ourselves and each other. Please do try to take time to honor Maria's memory and to reach out to those who bring you comfort as well as those who knew and loved Maria and may need support. The [Employee Assistance Program](#) can also provide support during difficult times.

May Maria's memory comfort and inspire us all.



In Loving Memory: Jim Smithson

From RAMS, Inc. Hire-Ability Vocational Rehabilitation Services Coordinator Mynor G. Ventura



It is with much sadness that we inform of the passing of our team member, Jim Smithson. Jim worked at the 1380 Howard Street 5th floor reception desk and the first thing that one noticed about Jim upon meeting him was his smile. Jim was always smiling. Jim smiled at you whether you were in a hurry; whether you were having a great day or you were having a bad day; whether it was your first day in the office or your last; whether he knew you or you were a complete stranger; or whether you even noticed him sitting at the receptionist desk at all. Nevertheless, Jim smiled.

I don't think he smiled because it was his job to be welcoming. Jim had his bad days. He at times was drawn into conflicts he didn't want to participate in. Jim was incredibly vulnerable and fragile, at times it was easy to forget the man stood over 6ft tall, towering over most of his colleagues.

I think Jim smiled because his most everlasting characteristic was his selflessness. Jim was immeasurably selfless. For Jim, his smile wasn't part of the job. It was part of a personal goal to try to minimize some of the mean spiritedness in the world, starting with the reception desk at 1380 Howard Street.

He was always offering to help in any way possible. He would take on shifts at late notice, work overnights at different facilities, and participated in any and every RAMS program he could. When shelter-in-place began, Jim was first to volunteer without asking. His reasoning was that he wanted to give back what was given to him.

Jim was a selfless individual yet he had so many beautiful characteristics that we could list off forever. In the end, it is hard to encompass such a complex and whole human being into a few paragraphs. Suffice it to say, we will remember Jim as our friend and a member of the RAMS and SFDPH family. He was a kind, gentle, empathetic, beautiful soul who thought about his fellow human more than himself. We will miss him and his smile always.

If you or a colleague are in need of support, please contact the Employee Assistance Program (EAP) for services or referrals. Employee Assistance Counselors are available for individual confidential telephone counseling and consultations 24 hours a day, 7 days a week: (628) 652-4600 or (800) 795-2351.



2020 J. Elliot Royer Award for Excellence in Community Psychiatry Congratulations Dr. Robin Randall!



Dr. Robin Randall, MD, MPH, is the 2020 recipient of the J. Elliot Royer Award for Excellence in Community Psychiatry. Every two years the Royer Award is given to a Community Psychiatrist who has shown evidence of service; teaching excellence; original, creative contributions to the field; and the general esteem and respect of the candidate's peers as a role model and mentor to others in the field. Dr. Randall has been the Medical Director at Edgewood for over 20 years and is also currently the Medical Director of SFDPH's Transitional Age Youth (TAY) System of Care.

Dr. Randall has devoted his career to serving vulnerable children and families in the Bay Area. He has similarly dedicated his career to teaching, demonstrating a commitment to Child and Adolescent Psychiatry trainees and their transition to becoming colleagues through mentorship and collaboration. Additionally, Dr. Randall has served as a leader in academic, public and community organizations in the Bay Area and California. He is a skilled clinician who is able to integrate systemic problems of poverty, racism and historical trauma into all parts of his practice while holding compassion in his interactions with others.



Dr. Robin Randall is pictured here with members of the TAY Clinic and TAY System of Care (SOC) team. For more information on the TAY SOC please contact Acting Director heather.weisbrod@sfdph.org



Celebrating 25 Years of Service: Maureen Edwards *There is no I in Team*

The TAY System of Care celebrates Maureen Edwards' 25 years of service to San Francisco and her work for racial equity, her unwavering commitment to TAY, and her part in the response to COVID-19. Maureen is a tireless and fearless advocate and her knowledge of the system and ability to find resources is unparalleled. Maureen has long worked for racial equity in San Francisco, helping to coordinate the annual DPH Black History Event for many years, continuously bringing attention to the needs of Black/African American staff and clients, and ensuring that services for TAY are culturally responsive. In her current role as the Clinic Director of the BHS TAY Civil Service Clinic, Maureen is responsible for 2 programs: the TAY Linkage program, which has served over 400 young people in need of connection to services, and the BHS TAY Full Service Partnership program, where she and the program's dedicated staff ensure young people with acute behavioral health needs receive high quality services.



Maureen and her son Elijah at the Women's March in January 2020 (above). Maureen and TAY clinic staff at a holiday celebration (below).

During COVID-19 Maureen has worked long hours to ensure TAY continue receiving essential services, spending much time in the field providing in-person outreach and crisis intervention while also managing both programs.



She has also simultaneously deployed on weekends to provide Isolation and Quarantine (I/Q) site coverage and has volunteered for on-call support for Shelter in Place (SIP) sites.

One of Maureen's favorite sayings is **"There is no I in Team"** and we think that perfectly exemplifies her leadership style, her collaborative spirit and her commitment to her work. We are immensely grateful for her.

For more information on the TAY Linkage Program please contact maureen.edwards@sfdph.org and for TAY System of Care please contact Acting Director heather.weisbrod@sfdph.org.



Welcome New BHS Training Unit Staff!



Soumia Laktebi
Training Support Specialist
BHS Training Unit

I grew up in Morocco from a bicultural Arabic and French household in Casablanca and migrated to the US in 2011. I went to SF State University where I earned a Peer Support Certificate with Richmond Area Multi Services (RAMS) Program, Entry and Advance Classes, and a 9-month Internship with the Positive Resource Center (PRC). I like cooking and organizing parties.

August 2020 Trainings

	Time	Training	Location	Trainer	CE's Offered
Tue 8/4	9:00am – 10:30pm	Race, Police & the Pandemic	https://us02web.zoom.us/j/84461212623	Gavin.Morrow-Hall	N/A
Thu 8/6	3:00pm – 4:30pm	Supporting & Learning about the Mental Health Needs of LGBTQIA+ Community during COVID-19 Webinar Series	https://zoom.us/j/91919191919	Tuquan Harrison	N/A
Thu 8/6	1:00pm – 3:00pm	De-escalation and Conflict Management	https://www.eventbrite.com/e/de-escalation-and-conflict-management-sfdph-hrti-online-training-tickets-114554162584	Charles Hawthorn Harm Reduction Training Institute	2 CEU
Thu 8/13	1:00pm – 2:30pm	Adapting Trauma-Focused CBT for Telehealth during COVID-19	https://bit.ly/3gpmDK9	Regan Stewart, PhD	Pending
Thu 8/13	10:00am – 12:00pm	Safer Sex in the COVID-19 Era	https://www.eventbrite.com/e/safer-sex-in-the-covid-19-era-sfdph-hrti-online-training-tickets-114554948936	Charles Hawthorn Harm Reduction Training Institute	2 CEU
Mon 8/17	1:30pm – 4:45 pm	Trauma-Informed Healthcare during COVID-19 and Racism Pandemics	https://bit.ly/3gl966q	Leigh Kimberg, MD	Pending
Thu 8/20	1:00pm – 3:00pm	Sex Work in the COVID-19 Era	https://www.eventbrite.com/e/sex-work-in-the-covid-19-era-sfdph-hrti-online-training-tickets-114556922840	Charles Hawthorn Harm Reduction Training Institute	2 CEU
Mon 8/24	1:00pm – 3:00pm	The War on Drugs, the Prison Industrial Complex and Harm Reduction	https://www.eventbrite.com/e/the-war-on-drugs-the-prison-industrial-complex-harm-reduction-online-tickets-114559332046	Charles Hawthorn Harm Reduction Training Institute	2 CEU
TBD	TBD	Staff Wellness	Virtual-link to be posted on www.sfdph.org/training	TBD	N/A



BHS Avatar eForms are Live!



Since 2016, the BHS Implementation Team has been working to create a full Electronic Health Record (EHR) for the system of care. This project included the development of a scheduler in 2016, the deployment of more than 1,000 signature pads in 2017, along with the introduction of the full electronic Treatment Plan of Care, Consent for Psychiatric Medications, and Consent for Mental Health Services. The eForms component of the project started in June 2017 with the revision of each form. The forms were then reviewed by a panel of experts from the DPH Business Office of Contracts and Compliance (BOCC), Compliance Department, Billing, and Clinical Services. After the review was complete, the forms were converted to an electronic format and tested across three sites including South of Market Mental Health, Sunset Mental Health, and Mission Mental Health.

The final step, completed in February 2020, involved translating the eForms into Tagalog, Russian, Chinese, Vietnamese and Spanish, at which time the translated versions were converted into a digital format and are now ready to be used system wide. An eForms user guide was developed and distributed to all BHS staff. With the implementation of eForms, the BHS system of care will have full electronic patient charts, which are easy to use and will produce status reports to help maintain record updates and chart reviews electronically.

Big thanks to Giovanni Herrera Psy.D, BHS Clinical Coordinator, for championing this critical effort!

For more information please see the **BHS eForms Bulletin** and **BHS eForms User Guide** posted on the [BHS GoogleDrive](#).



State Releases LPS Audit Report

The Lanterman-Petris-Short Act (LPS Act) allows county-designated professionals to provide involuntary mental health treatment to people who, because of a mental illness, are a danger to themselves or others, or cannot provide for their basic personal needs of food, clothing, or shelter. In late 2019, the California State Auditor's Office conducted an audit of the implementation of the LPS Act in three counties: San Francisco, Los Angeles and Shasta.



See the full report: [Lanterman-Petris-Short Act: California Has Not Ensured That Individuals With Serious Mental Illnesses Receive Adequate Ongoing Care, July 2020.](#)

Overall Findings:

- San Francisco has appropriately administered and overseen mental health conservatorships.
- The definition of grave disability was applied similarly across the 3 counties, and auditors found no reason to recommend a clarification or expansion of the definition.
- Individuals with five or more 5150 holds were often discharged without connection to intensive follow-up treatment through FSPs or Assisted Outpatient Treatment (AOT). The report noted that inadequate care coordination is largely due to the lack of access to data on individuals who are on LPS holds, and without this data, it is difficult, if not impossible, to connect individuals to ongoing treatment.
- State and local facilities lack adequate capacity to treat all individuals who require care under the LPS Act.
- State public reporting of all mental health funds received by counties, and associated outcomes, should be improved.

Select Recommendations for the Legislature:

- Adjust reporting requirements for LPS Act holds to ensure that counties can access existing state-managed data about the specific individuals placed on holds.
- Require counties to adopt AOT programs and allow for medication requirements.
- Assign the Oversight Commission responsibility for developing, implementing, and overseeing a framework for reporting mental health spending across all major fund sources, as well as program-specific and statewide mental health outcomes.
- Direct counties to spend MHSA funds for the purpose of connecting individuals leaving LPS Act holds or conservatorships to community-based services.

San Francisco-Specific Recommendations:

1. Adopt systematic approaches to identifying individuals with multiple involuntary holds, obtaining mental health histories for these individuals, and connecting them to services that support their mental health.
2. Assess the number and type of treatment beds needed to provide adequate care for individuals who require involuntary treatment.

Progress on implementing recommendations will be reported at 60 days, 6 months, and 12 months following the report date. For more information please contact BHS Quality Management Director Deborah Sherwood at deborah.sherwood@sfdph.org.



Drug Medi-Cal Organized Delivery System (DMC-ODS) External Quality Review

Similar to the Mental Health quality review discussed in May's newsletter, the Substance Use Services team is also reviewed annually by an External Quality Review Organization (EQRO). The upcoming review is scheduled for August 18-20 and will produce a report with a detailed analysis and evaluation of our DMC-ODS programs/services, performance measures, performance improvement projects, information systems, and client and staff perceptions.



Some noted strengths in last year's report include significant efforts to treat clients with co-occurring serious addiction and serious mental illness and centralized data storage and data sharing for providers who mutually share responsibility for common clients. Some of the recommendations in last year's report include establishing a specific initiative to outreach and engage the API community and implementing a process to improve the Treatment Access Program's re-authorization process.

Usually, EQRO assesses the timeliness, access, and quality of services through reviews of data and reports, on-site reviews, in-person focus groups, and interviews with clients, civil service and contracted providers and other stakeholders. However, due to the shelter in place ordinance and COVID-19 safety guidelines, this year's review will happen remotely via teleconferences. Our county will be the first to conduct client focus groups remotely. COVID-19 has significantly impacted operation, making beneficiary feedback exceptionally important. We are working closely with programs to ensure that we have strong and diverse client participation.

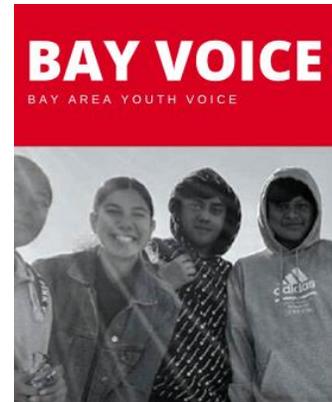
DMC-ODS leaders are looking forward to presenting the significant changes and key initiatives since the last review, reporting on their progress on recommendations, and learning from the report that EQRO produces the opportunities for improvement for fiscal year 2020-2021.

For more information please contact BHS Quality Improvement Coordinator Liliana De La Rosa at liliana.delarosa@sfdph.org.



Bay Area Youth Voice: Alcohol Awareness

High school students with the [Youth Leadership Institute \(YLI\)](#) **Bay Area Youth Voice** project, in collaboration with [BHS Substance Use Disorders \(SUD\)](#) services, completed a project to change youth perceptions on the harm of drinking alcohol. We are so proud of the youth! They were able to complete this project with their YLI adult ally, Stephanie Franco, during the COVID-19 pandemic. Their creativity is off the charts!



<h3>MY OPINION ON ALCOHOL</h3>  <p>I don't have anything against alcohol but I think people shouldn't drink to forget how they feel. I think people should drink for fun. Drinking responsibly is better for yourself, way healthier. I also think you should always be cautious around alcoholic drinks because bad things can happen.</p>	<h3>MY EXPERIENCE WITH ALCOHOL</h3>  <p>My experience with alcohol is very common in my culture. I am hispanic and my people love to party. I grew up watching my family members drink. I've seen them struggle but they didn't realize or don't want to admit they might have a problem. I didn't really understand the effects of alcohol until I grew up, but now I understand you have to be careful with alcohol.</p>	<h3>ALCOHOL</h3> <p>SONGS THAT TALK ABOUT EFFECTS OF ALCOHOL</p> <p>SWIMMING POOLS - KENDRICK LAMAR In this song Kendrick Lamar is reminiscing about his childhood that consisted of adults consuming alcohol</p> <p>DARK TIMES- THE WEEKEND FT. ED SHEERAN Dark times talks about how the artist struggled with alcohol and drugs. He also said that it's easy to fall back to his old ways and he's trying hard to not think about it.</p>
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For more information and to view the whole project, please see [Bay Area Youth Voice](#).



Health Disparities Among Black Americans with Substance Use Disorders (SUD): How Do We Make a Difference?

On July 30, the Behavioral Health Services Training Unit sponsored a training, [Health Disparities Among Black Americans with SUD: How Do We Make a Difference?](#) presented by [Nzinga Harrison MD](#). Dr. Harrison, a board certified psychiatrist and addiction medicine specialist, is Chief Medical Officer of [Eleanor Health](#), which provides outpatient substance use disorders treatment in Atlanta and is the host of the [In Recovery](#) weekly podcast.



During her presentation Dr. Harrison reviewed the horrific disparities that Black Americans face and the way those disparities are rooted in historical, systemic, and cultural factors. Tracing how these disparities manifest in medicine, including substance use treatment, Dr. Harrison brought out concrete ways that physicians can address implicit biases that contribute to racial disparities, sometimes even more than explicit bias.

How Do We Make a Difference? The attendees drew up an action plan to address racism on individual, programmatic, systemic, and policy levels. One clinician’s plan stated they will:

“Review notes and interactions with my clients, evaluate my outcomes and look for and correct biases that are revealed. Slow down and be more curious about my clients' lives and their lived experiences.”

Over 130 participants attended the webinar and responded with an abundance of gratitude.

This was a MEMORABLE training and life changing. It put language to my thoughts and I am INSPIRED!

Really appreciated the concrete data, mixed with personal experience, and tied together with concrete tools to use. THANK YOU!

[Health Disparities Among Black Americans with SUD: How Do We Make a Difference?](#) along with other BHS Training Webinars, are available on the [BHS Training Unit Vimeo Page](#). Recently posted webinars also include:

- Lessons Learned From the Front Lines: Client Outreach During COVID-19 with SF-FIRST
- Making Zoom sessions trauma-informed, engaging, and playful for children and youth clients (Ritchie Rubio, PhD)



Disaster Service Worker (DSW) Staff Highlight *It Takes a Village*



Josephine Ayankoya

A recent interview from the DHR Newsletter

What's your regular work at DPH?

I serve as the Acting Director for the Office of Equity, Social Justice, and Multicultural Education (OESM) in the Behavioral Health Services section of DPH.

What does your everyday work at DOC/Integrated Command Center look like?

I am activated as the Equity Lead for the Information and Guidance (I&G) Branch, in the Operations section of the San Francisco COVID-19 Command Center. In this capacity, I am directing organizational change and process development projects to optimize equity in the generation, dissemination, translation, and cataloging of guidance needed to prevent and mitigate COVID-19 in communities at increased risk of morbidity and mortality.

How do you juggle regular and DSW work?

Finding balance between my two roles has not been without challenge (and is still a work in progress). The biggest support in juggling my regular work and DSW work has been communication with my supervisors. Both my BHS supervisor (Marlo Simmons) and my DSW supervisors (Rita Nguyen and Alecia Martin) have been incredibly supportive of my need for a balanced workload.

I have also juggled my work by learning from best practices shared by many dynamic colleagues across the County, such as the Office of Racial Equity who released a Citywide Racial Equity Framework, and the expertise of the Equity Leads working with the Office of Health Equity.

I have also started to force myself to take short wellness breaks throughout the day, visiting the Wellness Room at the Emergency Operations Center (EOC) when time permits. Thanks to that team in the Wellness, I started doing yoga again!

What has been the highlight of your experience as a DSW?

A highlight of my DSW experience has been seeing how the OESM team which I supervise has stepped up to leadership during my activation. I could not have dedicated time and energy into my DSW work without my team being willing to take on new roles and operate differently during the COVID-19 response and recovery.

I believe in the African proverb that states, "**It takes a village**" and it's been impressive to see the village band together during my time with the COVID-19 response.



Pet Therapy for BHS Disaster Service Workers



We are at a point in our crisis response where we are all struggling with burnout and compassion fatigue. The team with Forensic and Justice Involved Behavioral Health Services has largely been leading the charge to respond to the behavioral health needs at the Shelter in Place Sites, with the amazing support from some of our CBO's and deployed staff. This has been exhausting while straddling the needs of the more than 2,000 individuals at these sites, as well as the ongoing needs of existing clients and the courts.

One of the staff, Dee Gotthardt, has been kind enough to integrate a little pet therapy into the work. We thank Dee, and her kittens, Hunter Pence and Buster Posey, for helping staff to take a moment and experience some much needed cuddles and support.

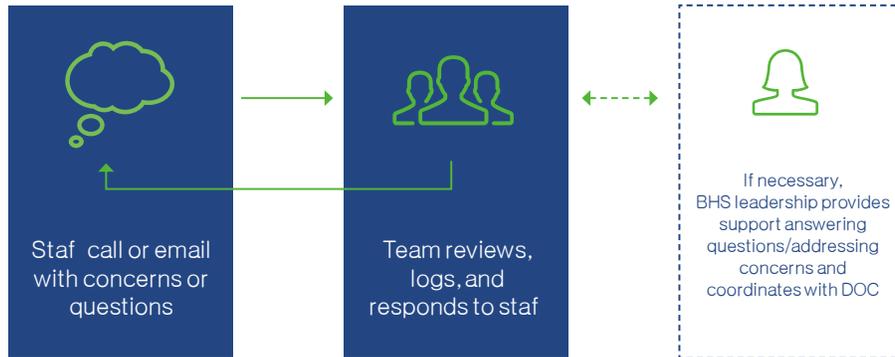


For more information please contact Forensic/Justice Involved BHS Director
Angelica Almeida at angelica.almeida@sfdph.org



Do you have general questions about being a Disaster Service Worker (DSW) or are you currently deployed and have concerns you need help getting answers for?

The BHS Clearinghouse team is available to support you regarding your deployment needs.



415-255-3427



bhsclearinghouse@sfdph.org



San Francisco Health Network
Behavioral Health Services

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