



Behavioral Health Services - *Communications*

General COVID -19 (Novel Coronavirus) Guidance for Outpatient BHS Programs

We write to share updated guidance regarding the City's response to COVID-19 (Novel Coronavirus). As many of you have likely heard, the Centers for Disease Control and Prevention (CDC) have expanded screening criteria to include travel from locations outside of China to include Iran, Italy, Japan, and South Korea. The CDC advises that the following people be tested for COVID-19:

- People with a fever, **and**
- Respiratory infection, **and**
- Recent travel to one of the aforementioned places (or having had contact with someone being tested).

All outpatient BHS clinics should see below for general guidance information, and refer to the guidance table on the next page. Our BHS Nursing Director, Kim Schoen, is the BHS point person for the COVID-19 response. Please contact Kim (kim.schoen@sfdph.org) if you have questions or identify a client meeting the three screening criteria (listed above).

Universal Precautions

- Try to minimize non-essential, face-to-face contact with clients to reduce the risk of community spread of COVID-19.
- Post Novel Coronavirus Alert posters, requesting that visitors with lower respiratory symptoms plus COVID-19 exposure risk immediately put on a surgical mask and notify health care staff.
- Post signs (in SF threshold languages) advising good hygiene.
- Ensure there is hand sanitizer, tissues, and non-touch waste bins for clients and staff throughout clinic.

Screening

- Ensure you have identified staff members to help with screening.
- Identify a point person(s) (MD, RN, other clinician) to respond to and coordinate response to any positive screens.
- Identify a room that can be used to isolate patients who screen positive.
- Prescreen clients over the phone using the COVID-19 Travel Screen: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html>

Personal Protective Equipment (PPE)

Due to limited supply chains, and in order to protect our health care workers at highest risk of transmission, surgical masks and N95 masks are not currently available or recommended for all BHS programs.

If/when masks are available, please adhere to the following:

- Surgical masks: only for use with clients or staff who show active symptoms (cough and sneezing).
- N95 masks: only for use by nurses at integrated health primary care sites who will be collecting specimens from patient isolation rooms.

COVID-19 Updates

The following links provide additional information:

- For the general public: <https://www.sfcddcp.org/infectious-diseases-a-to-z/coronavirus-2019-novel-coronavirus/>
- For healthcare providers in clinics providing primary care: <https://www.sfcddcp.org/infectious-diseases-a-to-z/coronavirus-2019-novel-coronavirus/coronavirus-2019-information-for-healthcare->

BHS expects to receive regular COVID-19 updates from the City and DPH. Thank you in advance for your support with this emergency response.

Q1	Because this is the flu season and due to recent outbreak of Novel Coronavirus/COVID-19 in China, we are asking some additional questions? Do you have a cough or fever or difficulty breathing?
<p style="text-align: center;">If YES</p> <p><input type="checkbox"/> Front desk/first contact staff gives patient surgical mask</p> <p><input type="checkbox"/> Proceed to Question 2</p>	
<p style="text-align: center;">NO Proceed with regular check in</p>	
Q2	Have you traveled to Internationally to China, South Korea, Japan , Italy or Iran in the past 30 days, and/or been in contact with anyone under investigation for or tested positive for the Novel Coronavirus/COVID-19?
<p style="text-align: center;">YES</p> <ul style="list-style-type: none"> • Front desk/first contact staff contacts point person immediately <p style="text-align: center;"><u>Point Person Duties</u></p> <ul style="list-style-type: none"> • Isolate patient in private room immediately (If private room not available, “isolate” patient with a 6-foot radius around them). DO NOT send patient directly to ZSFG as they may not have an isolation room available. • Inform Program Director/Medical Director • First, contact Kim Schoen for confirmation of positive screen @ 415- 254-0843 • For clinics that have co-located primary care: Ensure isolation precautions are followed for anyone entering isolation room. Isolation precautions are for sites that have trained staff and supplies: <ul style="list-style-type: none"> ○ <u>Airborne: N-95 mask (fit tested)</u> ○ <u>Universal/Contact: Gown and gloves</u> ○ <u>Eye protection</u> • Contact Anna Robert @ 415-244-0289 • Contact SFDPH Communicable Disease Control @ 415-554-2830 • Communicable disease to provide next steps (confirm PUI status, destination/transportation/notification of hospital PRN) 	
<p style="text-align: center;">NO Proceed with regular check in</p>	

PROTECTING ASIAN AMERICAN AND PACIFIC ISLANDER WORKING PEOPLE

Employers must include anti-discrimination protocols in their responses to COVID-19 (coronavirus). APALA issues this guidance to protect Asian American and Pacific Islander (AAPI) workers.

RAISE AWARENESS ABOUT COVID-19 WITHOUT INCREASING FEAR

Help stop the fear by letting people know that being of Asian descent does not increase the chance of getting or spreading COVID-19. Share accurate information about how the virus spreads.

The CDC states that diseases can make anyone sick regardless of their race or ethnicity. People of Asian descent, including Chinese Americans, are not more likely to get COVID-19 than any other person.

SPEAK OUT AGAINST HOSTILE AND/OR AGGRESSIVE BEHAVIOR

Bystander intervention trainings are necessary so that everyone is ready to proactively intervene when they witness discrimination. You can:

- Create physical separation by standing in between the hostile person and the targeted worker.
- Distract the hostile person while the impacted worker is escorted to safety.
- Directly intervene by verbally stating that the hostile behavior is not acceptable in the workplace.
- Record the details of the incident including date, time, and location. With the permission of the person who was harassed, report incidents of discrimination at: www.standagainsthatred.org

OUTBREAK-RELATED JOKES ARE HARMFUL

Panic, prejudice, and xenophobia are, sadly, quite common during outbreaks. Stereotypes fuel misinformation and perpetuate harm upon communities.

When someone makes a "joke" or flippant comment about COVID-19, you can intervene by using one of the following responses: "I don't get it. Can you explain why that is funny?" or "That's not funny and that is not actually how the virus works."

ANTICIPATE REFUSAL OF SERVICE AGAINST WORKERS OF ASIAN DESCENT

Anticipate that patients, clients, and others may refuse service from workers of Asian descent. Prepare yourself and your staff to respond.

Assure the impacted worker that it's not their fault. Give them space and time to process, while making sure they are still able to complete their shifts and get paid. Under no circumstances should workers of Asian descent have their hours cut due to discrimination.

PUBLICLY DEMONSTRATE SOLIDARITY WITH AAPI WORKERS

Post this sign in support of AAPI workers in your workplace or place of business: www.apalanet.org/COVID19

COMMIT TO AN ONGOING PROCESS TO ADDRESS DISCRIMINATION

Organize trainings, cultivate a safe and healthy work environment, and create spaces for co-workers to support each other in an ongoing way.

Managers should set aside time at a staff meeting or before a shift to set expectations, share information, and re-affirm the dignity of AAPI workers and others who are typically targets of harassment and discrimination.

All staff should feel personally responsible for maintaining a safe and healthy workplace culture, as well as know how to respond and who to seek help from when experiencing or witnessing unwanted behavior.



Contact apala@apalanet.org if you have any questions

[Click here](#) to download the above infographic on combating xenophobia and discrimination while responding to COVID-19. (Asian Pacific American Labor Alliance, 2020).

Celebrating Women's History Month – BHS Staff Spotlights

March is Women's History Month, a celebratory time to acknowledge the contributions of women to society. The Office of Equity, Social Justice, and Multicultural Education (OESM) worked with Behavioral Health Services (BHS) leadership to highlight a few of the many women doing incredible work across the BHS section the San Francisco Department of Public Health (DPH).

Please note, some people may identify as *womxn* and/or *womyn*. First adopted in 2015, *womxn* (also *womyn*) is an alternative to *women* that explicitly includes transgender women. In doing so, it serves as a rejection of the folk etymology of 'woman' allegedly being 'of man'. *Womyn* has been used since 1975.

On **Toni Williams**, Lead Peer Specialist:

"Toni Williams was born and raised in the Fillmore district of San Francisco. She has been working as a Lead Peer Specialist in the MHSA Transgender Pilot Program for six years. She is a tireless advocate for needs of trans women of color in the public health system, specifically Black trans women. The Transgender Pilot Project is a five-year project funded by MHSA which provides peer support groups, outreach, and special events to trans women of color in both English and Spanish."

-From Tracy Helton, (MHSA)

On **Elyssa Marangco**, Executive Assistant:

"Elyssa is the MVP for the Children, Youth, and Families (CYF) System of Care (SOC). Elyssa is always full of cheer and does so much to help support the flow and operations of the CYF SOC. She takes care of the management team along the way (e.g., making sure we eat lunch, celebrate each other's birthday's, etc). She is one of the most thoughtful and sweet team members, has incredible organization skills, and is so creative and artistic. We are so thankful to work with Elyssa every day!"

-From Farah Farahmand, (CYF)

On **Amber Gray**, Health Worker III:

"Amber has been key in [the BHS Behavioral Health Access Center's] efforts to transform lives. She believes that people can change, and that wellness and recovery are achievable by all. To her, no one is disposable. Thanks for all that you do, Amber!"

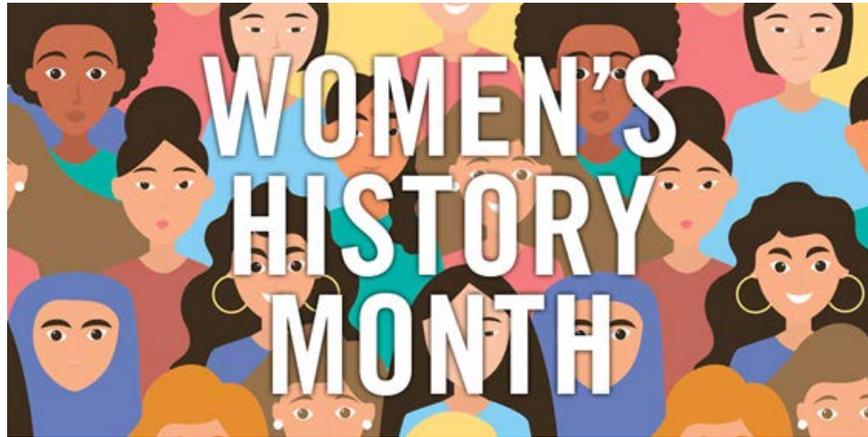
-From Craig Murdock, (BHAC)



On **Rita Perez**, Program Manager:

"Rita has so many wonderful qualities, and chief amongst them is her thoughtfulness, insightfulness, kindness, calmness, and compassion. She has high standards for both herself and others, yet as she fosters accountability in those around her, she graciously offers support to anyone who needs it. She possesses a quiet strength and self-confidence that is refreshing to be around., and those skills are complemented by her humility and self-awareness. It is joy to work with Rita each and every day, and to have her as part of the CYF SOC team."

-From Chris Lovoy, (CYF)



Leanna Lewis Conducts Cultural Humility Training for BHS Staff



On February 6, Behavioral Health Services sponsored the training, *Cultural Humility: People, Principles, and Practices in Behavioral Health*. The training, presented by Leanna Lewis, LCSW, was attended by 80 people.

Leanna Lewis is a Licensed Clinical Social Worker who works with the Program in Medical Education for the Urban Underserved (PRIME-US) at the UCSF School of Medicine and the UC Berkeley-UCSF Joint Medical Program. She has conducted trainings with Dr. Melanie Tervalon, one of the founders of the concept of cultural humility. The BHS workforce is always happy to train with Leanna, who brings with her many years of experience with providing clinical, mental health services to foster youth and their families in Oakland.

Although they are often confused, the concept of *cultural humility* offers a different framework than what is usually called *cultural competence*. Cultural competence stresses a mastery of a body of knowledge, while cultural humility is more of an ongoing process of learning.

The training delved deeply into the three principles of cultural humility. The first principle is lifelong learning and critical self-reflection, which recognize that we are all individuals with a unique set of experiences. The second principle stresses the need to challenge the relationship between culture, race, power, and privilege within clinical practice. The third principle stresses institutional responsibility, that an organization has a responsibility to develop and apply policies that further these principles.

This training addressed the unique and individual needs of SFDPH Behavioral Health Services staff, and provided tools for clinical and organizational transformation. After the training, one attendee wrote, "*Great topic and important lessons learned and new ideas to take back to the workspace and incorporate with our clients.*"

For more information on BHS trainings, contact BHS-OESM@sfdph.org.

Updates from the Human Rights Commission, Office of Racial Equity

The San Francisco Office of Racial Equity (ORE), a division of the Human Rights Commission which launched earlier this year, has appointed Shakirah Simley as the first ORE Director. Ms. Simley previously worked as a Legislative Aide for District 5, supporting Supervisor Vallie Brown, and as former Director of the Southeast Community Center for the SF Public Utilities Commission in Bayview.

Shakirah assumes this responsibility with a wealth of knowledge; a combination of lived, academic, and professional experience championing racial equity issues. BHS welcomes and looks forward to collaborating with Ms. Simley and the Office of Racial Equity to achieve effective and sustainable change via the ORE legislative mandates which include:

- A Citywide Racial Equity Framework,
- City department Racial Equity Action Plans,
- Racial Equity Leaders,
- Capacity building and technical assistance,
- City Budget Equity Tool, and more.



City and County employees who are interested in getting involved with the ORE are invited to attend monthly Citywide Racial Equity Working Group (CREW) meetings on the third Tuesday of the month, from 3:00 PM – 5:00 PM. CREW is a group of city employees committed to advancing racial equity in San Francisco. Convened by the Office of Racial Equity (ORE), CREW supports the movement to address institutional and structural racism embedded in contracting, hiring, program design and implementation, budget decisions, and community engagement strategies. The ORE and CREW define racial equity as, "the just and fair inclusion in society so that all people participate, prosper, and reach their full potential, no matter their race, ethnicity, or background."

For more information on the ORE and CREW, please contact Sami Iwata, ORE Senior Advisor, at sami.iwata@sfgov.org

MHSA State Review Update

The San Francisco's Mental Health Services Act (SF-MHSA) team participated in a thorough State Review conducted by the California Department of Healthcare Services (DHCS) between February 10-12, 2020. This was the first triennial audit that consisted of an extensive review of program documents, a sample review of our FSP charts, and site visits to various MHSA-funded programs. SF-MHSA submitted over 500 documents pertaining to program implementation, evaluation, policy development, budgeting, and our Community Program Planning (CPP) process in which we gather community and stakeholder feedback. In addition, we toured nine different MHSA sites, allowing the State to interview staff and participants about best practices and areas of opportunity.

We are happy to announce that the State Review was a huge success! The DHCS representatives were very pleased with the MHSA programming and the evaluation outcomes we achieved. They were most impressed with our Community Planning Process, and how we engaged stakeholders and community members by hosting 23 community engagement meetings in FY18/19. They also noted that, "San Francisco MHSA is a model County Program," and DHCS representatives asked if they could point other counties to San Francisco for guidance on implementation, policies, and evaluation. Lastly, DHCS commended our successful integration of peer staff throughout the entire behavioral health system, since we currently have 352 MHSA-funded peer specialists working in various roles throughout BHS.

DHCS identified only 10 findings needing fixing, all of which administrative and easy to resolve. Every County is issued a Corrective Action Plan within 60 days following the review. These 10 findings will be included in the Corrective Action Plan, and SF-MHSA will have 60 days after receipt of the Corrective Plan to submit a response and plan to resolve them. We are confident that we will be able to correct these minor administrative items within the timeline provided.

We would like to thank the MHSA Director, Jessica Brown, MPH, for her flawless leadership and guidance through our first State Review, as well as all the programs, staff, and consumers who participated in the meetings, site visits, file reviews, and consumer focus groups. We could not have had such a successful review without everyone's support.

For additional information about our DHCS Review, please contact the Interim MHSA Director, Teresa Yu, LMFT at Teresa.Yu@sfdph.org.



Staffing Updates

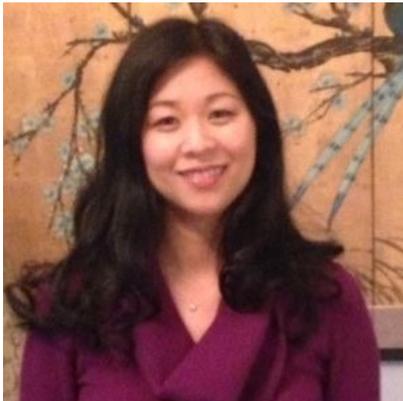
Community Justice Center (CJC)

There are some important staffing changes taking place at Community Justice Center! Case manager, Dalicia Nance, who has been an integral part of CJC for 10 years, is transitioning to a position within the Comprehensive Crisis Team. Dalicia will definitely be missed. CJC staff wish her well and appreciate all her work with CJC clients!

At the same time, CJC would like to recognize Erick Reijerse, who is transitioning from his role with the Assisted Outpatient Treatment (AOT) Program to join CJC in March. The AOT Program thanks Erick for his contributions to AOT, and is glad to still have Erick as a colleague within Forensic and Justice Involved Behavioral Health Services.

Congratulations, Dalicia and Erick! Please contact Akiko Allen, (akiko.allen@sfdph.org) with any questions about CJC.

Mental Health Services Act (MHSA)



In February, Teresa Yu, LMFT, Program Manager for the Mental Health Services Act (MHSA), was appointed Interim MHSA Director. She will be serving until August 2020, when Jessica Brown will return from maternity leave. Teresa Yu has been serving as an MHSA Program Manager for the last 4 years, where she has been overseeing the development, funding, and implementation of Innovation Programs and supporting consumer activities, such as the Client Council and the Peer and Family Conference.

For over 10 years, she worked as a non-profit Program Manager overseeing domestic violence services, contracts, and budgets, and has provided advocacy on regional and state bodies, such as the California Partnership to End Domestic Violence. As a clinician, she also has supported adults living with severe mental health challenges and at risk youth while working for the City of San Jose, and medically fragile older adults at California Pacific Medical Center.

As Interim MHSA Director, Teresa oversees the activities of the Mental Health Services Act in San Francisco, which has funded innovative and traditional mental health programs and services across the City and County since its introduction in 2004, with a recent focus on increasing equitable access to high-quality, mental health care for all. The principles that guide the MHSA Program include community collaboration, recovery & wellness, health equity, client and family member involvement, and integrated and client-driven services.

Congratulations, Teresa! For information on MHSA, please contact: MHSA@sfdph.org.

March BHS Trainings Postponed

Due to the local health emergency regarding COVID-19, the Training Unit of the OESM team is postponing March trainings. We apologize for the inconvenience, and are working to reschedule trainings. For information, contact Michelle Meier at michelle.meier@sfdph.org

Upcoming Trainings

Please note the postponed trainings on the table below. For registration and information, visit www.sfdph.org/training and click on "Behavioral Health Services." Future trainings will be posted once registration is open.

March 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 3/11 POSTPONED	9:00 AM – 4:30 PM	Trauma-Sensitive Mindfulness	7 Hills Conference Center, San Francisco State University	David Treleaven, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Thursday 3/19 POSTPONED	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 3 Women and Misogyny	1290 Fillmore Street	Jazz Hudson	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
Tuesday 3/31 POSTPONED	9:00 AM – 4:30 PM	ASAM Criteria-(A): Assessment	TBD	James Gilmore	6 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
April 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 4/1	9:00 AM – 4:30 PM	Law and Ethics Update 2020	TBD	Daniel Taube, JD, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Tuesday 4/28	1:00 PM – 4:15 PM	Unlearning Racism to Transform Behavioral Health Practice Part 4 Wellness & African American Culture	1290 Fillmore Street	Ifetayo Flannery	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
May 2020	Time	Training	Location	Trainer	CE's Offered
Monday 5/18	9:00 AM – 4:30 PM	Acceptance and Commitment Therapy (ACT) for Coping with Trauma	TBD	Robyn Walser, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Wednesday 5/20	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 5 Colorism and Anti-Blackness	1290 Fillmore Street	Selena Wilson	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
June 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 6/10	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 6 Classism and Low Income Communities	1290 Fillmore Street	Jason Seals	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)

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