A message from Dr. Hillary Kunins: We are losing too many San Franciscans to drug overdoses – it doesn’t have to be this way

Dear Behavioral Health Services Colleagues,

At the end of August, we marked another International Overdose Awareness Day. In 2020 we lost nearly 700 San Franciscans to accidental overdoses and so far this year we have lost another 404 San Franciscans. These are our parents, friends, children, and loved ones. I grieve with the family and friends who have lost someone they love. Every death is a preventable tragedy.

As a primary care and addiction medicine physician, I cared for people at risk of overdose for nearly two decades in New York City. My patients’ deaths were not only caused by drugs – they were also the result of much bigger forces at play in their lives. One of my patients had just begun methadone treatment for her addiction. Then she lost her housing and access to medication, and that led to hospitalization for a seizure. The disruption, and the lack of stable housing, returned her to drug use and then, tragically, a fatal overdose.

I have also celebrated many successes with patients, colleagues, and friends. Among these was a man who entered addiction treatment without stable housing. When supported housing came through for him, his health and wellbeing improved dramatically. He was able to stay in treatment, get help for other medical conditions, rekindle his relationships with his children, a new partner and ultimately find employment. He told me his journey was a miracle – but it was not. His recovery was the result of having received housing and behavioral health supports, including effective treatment. This package of interventions set him on a path to wellness.

Like many other cities in America, the entry of the potent opioid, fentanyl, into the drug market led to a dramatic increase in San Francisco's overdose deaths. But like most crises, the most discriminated among us take the brunt.

Driven by structural forces like systemic racism, years of unjust drug policy that punishes rather than offers care, and unaffordable housing, the overdose epidemic exposes the profound health inequities faced by communities of color. In San Francisco, Black/African Americans have three times the rate of overdose deaths than white San Franciscans. One-third of overdose deaths are among people who are unhoused. As we tackle these structural forces, we must also act with urgency and compassion to slow the daily death toll with all the tools at our disposal, especially for those most at risk.

With investments from the voter-backed Proposition C, we are implementing new interventions to do what works to save lives from drug overdoses and to reduce the disproportionate impact among people
of color and people who experience homelessness. We recently launched the Street Overdose Response Team (SORT) to provide immediate follow up care to people who survive an overdose and are most at risk of another. In its first two weeks in operation, SORT attended to 56 overdose survivors.

Before the year’s end, we will open the SoMa RISE Center to bring people who are intoxicated with drugs safely off the streets and connect them to care and services, including housing.

To support individuals leaving residential addiction treatment, we will open 140 spaces for "step-down" care, so that they can build skills for independent living. These step-down beds are part of the City’s efforts to expand residential care and treatment for substance use and mental health by 20% -- amounting to more than 400 new “beds” to fill gaps in critical needs areas.

Meanwhile, we have made addiction treatment easier to access than ever. Buprenorphine, an effective medication for opioid addiction, is available by telemedicine and through street teams like SORT. Soon we will have 24/7 access to methadone treatment – becoming one of the only places in the country to do so.

Importantly, we are working with our own DPH behavioral health and primary care clinics, and our community partners to expand the distribution of the overdose reversal medication, naloxone, as well as fentanyl test strips and safe use kits – giving laypeople, including people who use drugs, the practical tools to save each other lives and check drugs for fentanyl.

Overdose deaths are preventable through immediate and longer-term measures. People who use drugs, their friends and family members, harm reduction and treatment providers, and other community members have been fighting to save lives for years. We need to join them to stop this tragic loss of life, extend compassion and care to people at risk of overdose, and advocate for policy changes that address the structural and immediate factors that worsen our overdose epidemic.

With gratitude,

Hillary Kunins, MD, MPH
Director of Behavioral Health Services and Mental Health SF
Thank you, Michelle Geier, Psychiatric Clinical Pharmacist Supervisor, and the Pharmacy Team at 1380 Howard Street for hosting a tabling event on Overdose Awareness Day.

Director of Health, Dr. Grant Colfax connects with the BHS team on our work to prevent overdose deaths on Overdose Awareness Day.

Dr. Hillary Kunins, Michelle Geier, and Dr. Grant Colfax examine fentanyl test strips. BHS is working with our partners to get fentanyl test strips into the community.

Theresa Maranon, BHS Pharmacist, fills a prescription for the opioid-blocker naloxone.
Reflecting on How Our Latina/o/x/e Children and Youth Clients Are Doing at This Time as We Celebrate National Latina/o/x/e Heritage Month

In celebrating this heritage month, it is important to acknowledge that the terminology used to describe individuals who trace their heritage to Latin America has been dynamic (thus the various banners on this page). As BHS providers, we have to first and foremost be culturally sensitive and validating of how our clients prefer to self-identify. Pan-ethnic terms such as Hispanic, Latina/o, Latinx, or Latine merge people from a number of different cultures, and thus many, particularly those who are foreign born, prefer to self-identify using their countries of origin rather than using a pan-ethnic term (see Pew Research Center survey here).

This heritage month also provides an opportunity to reflect on how our children, youth, and their families are doing at this time. The Child and Adolescent Needs and Strengths (CANS) assessments for 6 thru 20 Latina/o/x/e clients who were admitted for behavioral health services during the COVID-19 crisis (i.e., April 2020 to February 2021), as compared with clients who were admitted before the COVID-19 crisis (i.e., April 2019 to February 2020), showed a larger proportion of clients experiencing traumatic experiences such as disruptions in caregiving/attachment losses, traumatic stress symptoms such as emotional/physical dysregulation, behavioral/emotional needs such as anxiety, impact on functioning such as school achievement, and risk behaviors such as runaway. At the same time, Latina/o/x/e clients also showed increased strengths such as resiliency and talents/interests (see data story on the next page).

Latina/o/x/e clients’ experience of cultural stress also increased slightly during the COVID-19 crisis, from 16.3% to 17.9% (see chart). The most endorsed grouping of cultural stress categories was stress due to race/ethnicity, language, and socio-economic status, at 15.4% before and 16.6% during the COVID-19 crisis (data not shown).

When working with Latina/o/x/e clients and their families, it is essential to adapt our practices using a trauma-informed and culturally responsive lens as we intervene in cultural stress. Here are a few resources to get us started: Working with Latina/o/x/e Children/Youth and Families - CYF TIPs (Tools to Improve Practice) website; Culture and Trauma brief (NCTSN, 2007); and Healing Ethno-Racial Trauma in Latinx Immigrant Communities (Chavez-Dueñas et al., 2019).

Please reach out to Petra Jerman of QM (petra.jerman@sfdph.org) for questions around the CANS data, and Ritchie Rubio of CYF (ritchie.rubio@sfdph.org) for consult around practice.
Top Three CANS Strengths and Needs* Among Latina/o/x/e Children and Youth
Before and During the COVID-19 Crisis

**Before (Apr 2019 - Feb 2020) the COVID-19 Crisis**

- **Strengths**: Resiliency, Cultural Identity, Talents and Interests
- **Traumatic Experiences**: Disruptions, Caregiving/Attachment Losses, Witness to Family Violence, Witness to Community Violence
- **Traumatic Stress Symptoms**: Emotional/Physical Dysregulation, Avoidance, Hyperarousal
- **Behavioral/Emotional Needs**: Anxiety, Depression, Adjustment to Trauma
- **Impact on Functioning**: Family Functioning, School Achievement, Social Functioning
- **Risk Behaviors**: Suicide Risk, Danger to Others, Runaway
- **Cultural Stress**: 16.3%

**During (Apr 2020 - Feb 2021) the COVID-19 Crisis**

- **Strengths**: Resiliency, Cultural Identity, Talents and Interests
- **Traumatic Experiences**: Disruptions, Caregiving/Attachment Losses, Witness to Family Violence, Witness to Community Violence
- **Traumatic Stress Symptoms**: Emotional/Physical Dysregulation, Avoidance, Hyperarousal
- **Behavioral/Emotional Needs**: Anxiety, Depression, Adjustment to Trauma
- **Impact on Functioning**: Family Functioning, School Achievement, Social Functioning
- **Risk Behaviors**: Suicide Risk, Danger to Others, Runaway
- **Cultural Stress**: 17.9%

*From baseline 6-20 CANS assessment*
Robán San Miguel  
National Latina/o/x/e Behavioral Health Excellence in Prevention Award 2021

Robán is a community mentor, described by many as the essence of "Tlamatini," a wise person that leads truly exemplary lives (Náhuatl translation). In her various roles through the years and across our systems, she has strengthened not just the resiliency of many Latina/o/x/e individuals but also of programs that serve Latina/o/x/e families. For example, many young immigrant teenagers found sanctuary within solid non-profit programs in the SF Mission District, such as Real Alternatives Program (RAP) and Danza Xitlalli (i.e., a group teaching indigenous dances of the Mexica tradition), both organizations where Robán has held pivotal roles. She is highly respected by the community for her understanding of indigenous teachings and has been a mentor to younger generations who pursue indigenous practices as part of their path to healing; and countless youth who eventually became community workers, case managers, and social workers across the city and state. During her time at RAP, Robán authored an unpublished manual, highly valued and adopted by clinicians doing violence prevention work, which integrated community ethics and social work theories to support Latina/o/x/e youth with a holistic, indigenous approach. This handbook, described by many of her mentees as the essence of "La Cultura Cura" (i.e., our culture cures), has helped inform guiding principles of many SF community mental health programs such as Instituto Familiar de la Raza (IFR).

Robán’s innovative work involving the use of culturally appropriate prevention strategies

As director of Mission Family Center (MFC) since 2014, and as a Latina and Indigenous clinician, Robán has grounded her treatment and leadership by centering culturally-responsive practices and community. She has insured that mental health services are provided in the language of the family, and focus on the family in the context of community. She has provided training, supervision, and leadership at MFC to ensure that traditional, spiritual, cultural, and intergenerational practices have been interspersed with western treatments, and that healing is co-created and collaborative. Robán understood through her own involvement in traditional dance and ceremony that healing must be holistic incorporating the mind and body. As an example, following a tragic shooting in an SF housing development witnessed by many residents, staff and children in 2014; Robán co-led healing circles that integrated mindfulness, use of sage, and culturally-adapted healing practices for trauma.

Robán’s most recent and ongoing innovative work is with the successful implementation of the Fuerte program in San Francisco (SF). Fuerte is an intervention and prevention program for Latina/o/x newcomer (LN) immigrant youth, which uses a sociocultural and ecological lens; and an evidence-based Attachment Regulation and Competency (ARC) framework. Robán co-led efforts to implement Fuerte in a way that was community-engaged, culturally-responsive, and trauma-informed. She has been integral in setting up partnerships between behavioral health and educational systems, as this program is based in schools, allowing the intervention to be available to youth in a safe and easily
accessible location. This helped address barriers to treatment for LN youth including documentation status fears, distrust of institutions, and stigma attached to mental health services. Details of the program have been described in a published book chapter that she co-authored: “Patient and community engagement for mental health disparities in Latinx youth immigrant populations: the Fuerte program” (Martinez et al., 2020).

Robán’s impact on the quality and access to treatment in Hispanic/Latina/o/x/e communities
San Francisco has been providing targeted specialty mental health services to Latina/o/x/e immigrant youth since the 1970s, as a result of community advocacy given the dearth of culturally and linguistically competent clinicians. One of two primary clinics serving this population is MFC. As director of MFC, Robán leads and manages a diverse group of mostly Latina/o/x/e staff with different professional backgrounds. Through her leadership, she bridges clinical services between MFC and schools, across generations of families, and within a community of varying degrees of needs. To strengthen the quality and access to culturally-responsive treatment in Latina/o/x/e communities, she has: (a) implemented extended clinic hours; (b) spearheaded health outreach efforts during events such as Latina/o/x/e Heritage Month, Carnaval, and Fiestas de las Américas; (c) supervised clinicians in providing school-based mental health services; and (d) organized a Latina/o/x/e access committee to ensure timely access to services for all families in need. Since 2014, Robán has also actively led two committees that became the pillars of ensuring quality and access to services: Spanish-speaking Providers’ group and Unaccompanied Minors Workgroup (UMW). As a seasoned community organizer, Robán steers these two networks, and strengthens collaborative efforts amongst clinicians, social services providers, legal services agencies, and housing advocates.

Robán’s life work in San Francisco
Robán is a Licensed Clinical Social Worker (LCSW) and holds a Master’s in Social Work from San Francisco State University. She was Associate Director and Clinical Supervisor at Real Alternatives Program (1985-1998), which serves multi-ethnic youth and their families in the SF Mission district. She was Program Coordinator of the SF Department of Public Health (DPH) Community Substance Abuse Services (1998-2002). She served as program director of three BHS CYF SOC programs: (a) Family Mosaic Project (2003-2005) for youth at risk of out-of-home placement; (b) Special Programs for Youth - Youth Guidance Center (2006-2014) for juvenile justice-involved youth; and (c) Mission Family Center (2014-present) for mostly Latina/o/x/e children, youth, and families.

For all these and more, Robán was aptly selected and awarded the Latina/o/x/e Behavioral Health Excellence in Prevention Award by the National Latino Behavioral Health Association (NLBHA). She will be recognized and celebrated on September 16 at the 2021 National Latino Behavioral Health Virtual Conference. More information about the conference can be found here.

Congratulations Robán! We are so proud of you!
TAY SOC Spotlight: TAY Peer Intern

Our TAY System of Care (TAY SOC) has partnered with RAMS, to implement both the TAY Leaders Certificate Program and TAY Leaders Employment programs, which provide leadership, behavioral health skill development, workforce and academic opportunities for TAY (16-24) in San Francisco. TAY, who participate in the Employment program, get to intern at different partnering agencies across our system of care. This month, TAY SOC is happy to spotlight TAY Peer, Christina Yu who is interning at Felton Institute’s (re)MIND program!

Meet Christina Yu (she/her),
Peer Support Specialist

In her role as a peer support specialist at Felton Institute’s (re)MIND program, Christina meets with participants one-on-one and provides them with different kinds of peer support depending on their needs. In their sessions, they explore the participant’s interests and work on any skills they may want to improve on. Additionally, Christina helps lead group sessions with participants which focus on healthy communication skills. When asked about what she enjoys about her current work, Christina said:

“I really enjoy getting to know my clients. All of them seem shy in the beginning but as the relationship grows, the clients start opening up to me. Seeing them smile or laugh as we go through the activities makes me feel happy. Nothing beats the trust and bond I create with my clients.” - Christina

Fun Facts: In her free time, Christina enjoys exercising with her friends and playing pickleball in Golden Gate Park. If she could have any superpower, she would have the ability to imagine the dish she wants to eat and then have it appear in front of her in less than one minute! While she finds cooking fun, it can also be a hassle especially when she’s in a rush heading to the office! We look forward to hearing more about the wonderful accomplishments Christina will achieve interning at Felton's (re)MIND!

For more information about the Behavioral Health TAY System of Care, contact kali.cheung@sfdph.org.
Personnel Updates for BHS

Welcoming our new Health Care Analyst for Quality Management!

Yuk Kiu Lee is a Health Care Analyst for Quality Management’s new Network Adequacy unit. She will be responsible for conducting network analysis and supporting BHS in meeting federal requirements to maintain a network of providers that is sufficient in number, mix (e.g., cultural and language diversity, level of care, age specialty), and geographic distribution to meet the needs of adults and children/youth eligible for behavioral health services.

Yuk Kiu’s last position was as a Senior Eligibility Worker for Human Services Agency (HSA). Prior to that she served with Water Department for 16 years, beginning in the Cashier Unit, Collections & Liens Unit, then the Business and System Support Unit, and supervising the Customer Contact Center. She has a lot of experiences in customer service, accounting and collections. She also has strong technical background and participated in many projects. She was bilingual certificated and helped the Communication team both verbal and written translations. She is looking forward to doing work that makes our communities better.

Yuk Kiu has a lot of hobbies including drawing, painting, jewelry making, sewing, leatherworking, dancing and gardening. She enjoys travelling and visiting museums. She likes to try different kinds of food and listen to various kinds of music. She appreciates the culture and diversity in Bay Area.

Welcoming our new BHS Internship Coordinator!

Ryan Fuimaono (he/him/his) was born and raised on Kumeyaay land in the area known as San Diego, CA. He is the proud son of the late Letemi Vimoto Fuimaono of A’oloa, Tutuila, Amerika Samoa and Milda Jo Davis of El Centro, CA. Ryan is a graduate of UC Berkeley where he earned his MSW after interning with the DPH at Dimensions Queer Youth Clinic and Balboa High School Teen Clinic. He has since been working with the DPH for the past almost 10 years providing behavioral health services and clinical supervision in a range of settings including primary care, intensive case management and outpatient community mental health. Most recently he worked at Mission Mental Health where he served on their leadership team, supervised clinical staff and interns and provided direct services to our consumers both in English and Spanish. He is inspired by the work of BIPOC communities to decolonize mental health systems and hopes to bring these perspectives to the fore in his work as BHS Internship Coordinator. He is excited to bring his skills and experience to support the work of the BHS Office of Equity and Workforce Development by fostering the next generation of community leaders through the internship program and is guided in his work by the Samoan proverb o le ala i le pule o le tautua - the path to leadership is through service.
Racial Equity Champions 2021 Train-the-Trainer Series

In June, the Office of Equity and Workforce Development (OEWD) held a series of “Train-the-Trainer” sessions for our Racial Equity Champions which was led by Jason Seals and Associates. Jason Seals, and his Learning & Transformation Specialist, Selena Wilson provided our Equity Champions with an opportunity to expand their knowledge and capacity on racial equity concepts and principles to assist BHS with providing more culturally relevant and responsive care to our diverse clients. In the facilitation training series, BHS worked to center African voices and integrate best practices from African-centered psychology, organizational change, and racial equity.

At the end of each session, our Equity Champions built their capacity to understand how to apply cultural humility as a facilitator. They learned the importance of and practices to prepare for facilitation through collective/self-nurturing and grounding, while understanding how to cultivate and maintain a sacred and spiritually, psychologically, and emotionally safe space. Lastly, we developed strategies to effectively adapt and facilitate learning sessions based on the Unlearning Racism curriculum. This series was a part of larger equity efforts within BHS to prepare for the BHS Racial Affinity/Accountability Groups launch in Fall 2021.

Please be on the lookout for more information on other opportunities to engage in OEWD, Racial Equity Action Priorities in Fall 2021!
## September 2021 Trainings

<table>
<thead>
<tr>
<th>Time</th>
<th>Training</th>
<th>Location</th>
<th>Trainer</th>
<th>CE’s Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>MWF 9/1</td>
<td>11:45 am – 12:00 pm</td>
<td>Trauma Informed Systems (TIS) Mindful Moment</td>
<td><a href="https://us02web.zoom.us/j/87186407110">https://us02web.zoom.us/j/87186407110</a></td>
<td>SF TIS Team</td>
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<tr>
<td>Tue 9/7</td>
<td>9:00 am – 10:30 am</td>
<td>BAAHI Equity Learning Series: The difference between being &quot;not racist&quot; and antiracist</td>
<td>Ibram X. Kendi</td>
<td>Gavin Morrow-Hall</td>
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<tr>
<td>Thu 9/9</td>
<td>3:30 pm – 5:00 pm</td>
<td>Gender Affirming Voice and Communication Therapy</td>
<td><a href="https://www.eventbrite.com/e/gender-affirming-voice-and-communication-therapy-registration-167374645069">https://www.eventbrite.com/e/gender-affirming-voice-and-communication-therapy-registration-167374645069</a></td>
<td>Sarah L. Schneider, CCC-SLP, MS</td>
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<tr>
<td>Fri 9/10</td>
<td>1:00 pm – 2:30 pm</td>
<td>Improving Substance Use Treatment for Older Adults</td>
<td><a href="https://sfph.webex.com/sfph/onstage/g.php?MTRID=e6b4b37150a94b4c08059686a">https://sfph.webex.com/sfph/onstage/g.php?MTRID=e6b4b37150a94b4c08059686a</a></td>
<td>Derek D. Satre, PhD</td>
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<tr>
<td>Tue 9/14</td>
<td>9:00 am – 10:30 am</td>
<td>BAAHI Equity Learning Series: Part 2 Training to promote safety and Empower</td>
<td>Linda Hill</td>
<td>Gavin Morrow-Hall</td>
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<tr>
<td>Tue 9/14</td>
<td>9:00 am – 12:30 pm</td>
<td>New Employee TIS 101: Transforming Stress &amp; Trauma During COVID</td>
<td><a href="https://www.eventbrite.com/e/new-employee-tis-101-transforming-stress-trauma-during-covid-training-tickets-147857603071">https://www.eventbrite.com/e/new-employee-tis-101-transforming-stress-trauma-during-covid-training-tickets-147857603071</a></td>
<td>For more information contact</td>
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<td>Wed 9/15</td>
<td>9:00 am – 11:00 am</td>
<td>Foundations of Harm Reduction (small training)</td>
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<td>Kristen Marshall &amp; Frances Fu, NHRC</td>
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<td>Thu 9/16</td>
<td>9:00 am – 11:00 am</td>
<td>Foundations of Harm Reduction (large training)</td>
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<td>Tue 9/21</td>
<td>12:00 pm – 1:30 pm</td>
<td>BAAHI Equity Learning Series: Stacey Abrams Talks African American Men's Health and Health Activism</td>
<td><a href="https://us02web.zoom.us/meeting/register/Z2Ydp-ugrzklHNOXXuA2U4PvdEMPOiXVF">https://us02web.zoom.us/meeting/register/Z2Ydp-ugrzklHNOXXuA2U4PvdEMPOiXVF</a></td>
<td>Gavin Morrow-Hall</td>
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<tr>
<td>Wed 9/22</td>
<td>2:30 pm – 4:30 pm</td>
<td>Grief and Bereavement: Lessons Learned in the COVID-19 Pandemic</td>
<td><a href="https://sfph.webex.com/sfph/onstage/g.php?MTRID=e88Be6119f9f870d2cf3ed7624">https://sfph.webex.com/sfph/onstage/g.php?MTRID=e88Be6119f9f870d2cf3ed7624</a></td>
<td>Stephanie Eckhaus, LCSW</td>
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<td>Thu 9/23</td>
<td>9:00 am – 10:30 am</td>
<td>BAAHI Equity Learning Series: Emmanuel Acho</td>
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<td>Gavin Morrow-Hall</td>
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<td>Thu 9/23</td>
<td>10:00 am – 12:00 pm</td>
<td>Self-Care and Resilience (small training)</td>
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<td>Kristen Marshall &amp; Frances Fu, NHRC</td>
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<td>Mon 9/27</td>
<td>9:00 am – 12:00 pm</td>
<td>Skills for Emotionally Dysregulated Youth: Part 2 Training to promote safety and stabilization for complex youth during the COVID-19 crisis (1st Session)</td>
<td><a href="https://sfph.zoom.us/meeting/register/UAvufGq78jHNDM2wxB8PaAsFgVEykVxNEq">https://sfph.zoom.us/meeting/register/UAvufGq78jHNDM2wxB8PaAsFgVEykVxNEq</a> (Participants need to attend BOTH sessions to get credit, second session info will be sent in October)</td>
<td>Sabrina Darrow, PhD</td>
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<tr>
<td>Mon 9/27</td>
<td>10:00 am – 11:15 am</td>
<td>Youth and Families Gender Consultation Group: For Providers Supporting Transgender, Nonbinary, and Gender Expansive Children, Youth, and their Caregiving Systems</td>
<td><a href="https://ucsf.zoom.us/j/91769027924?pwd=KzV5MUJeunlMrKRG7G40RHtvy22hdz09#/success">https://ucsf.zoom.us/j/91769027924?pwd=KzV5MUJeunlMrKRG7G40RHtvy22hdz09#/success</a></td>
<td>For questions, please contact</td>
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<td>Wed 9/29</td>
<td>10:00 am – 11:30 am</td>
<td>DOPE Project’s Overdose Prevention and</td>
<td><a href="https://secure.eventa.com/ir3XikL_iKuh-Nz9FhvRHa2">https://secure.eventa.com/ir3XikL_iKuh-Nz9FhvRHa2</a></td>
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### Naloxone Training

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<th>Date</th>
<th>Time</th>
<th>Event Description</th>
<th>Link</th>
<th>Instructor</th>
<th>Credits Available for</th>
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<tr>
<td>Thu 9/30</td>
<td>9:00 am – 11:00 am</td>
<td>Self-Care and Resilience (large training)</td>
<td><a href="https://www.eventbrite.com/e/self-care-and-resilience-large-training-tickets-16788359603">https://www.eventbrite.com/e/self-care-and-resilience-large-training-tickets-16788359603</a></td>
<td>Kristen Marshall &amp; Frances Fu, NHRC</td>
<td>RN, LMFT, LCSW, LPCC, LEP, and CCAPP</td>
</tr>
<tr>
<td>Thu 9/30</td>
<td>12:00 pm – 1:30 pm</td>
<td>BAAHI Equity Learning Series: Equity Currents (Topic TBD)</td>
<td><a href="https://us02web.zoom.us/meeting/register/tZwuf-muqT0jE9PTp6pzCTwkL5pFmLTsIg">https://us02web.zoom.us/meeting/register/tZwuf-muqT0jE9PTp6pzCTwkL5pFmLTsIg</a></td>
<td>Gavin Morrow-Hall</td>
<td>N/A</td>
</tr>
</tbody>
</table>

If you have feedback including future training suggestions, please contact Michelle Meier, LCSW, BHS Training and Internship Manager ([Michelle.Meier@sfdph.org](mailto:Michelle.Meier@sfdph.org)).

**BHS Training Resources**: All archived BHS Training Webinars are available on the [BHS Training Unit Google Drive](https://example.com). All recorded webinars can be viewed at [Behavioral Health Webinars Vimeo Showcase](https://example.com).
STREET CRISIS RESPONSE TEAM (SCRT) PILOT
JULY 2021 UPDATE

The goal of the San Francisco Street Crisis Response Team is to provide rapid, trauma-informed response to calls for service about people experiencing crisis in public spaces in order to reduce law enforcement encounters and unnecessary emergency room use.

The SCRT now has five fully operational teams that provide full geographic coverage across San Francisco. These teams operate 7 days per week, 12 hours per day. The sixth team, providing citywide overnight coverage 5 days per week, launched at the end of the month with coverage expansion likely in the coming weeks. As of April, all of the teams are supported by the Office of Coordinated Care staff who continue to provide follow-up and linkage support to clients within 24 hours of the initial encounter.

OPERATIONS UPDATE

KEY PERFORMANCE INDICATORS

<table>
<thead>
<tr>
<th>Crisis Calls Handled by SCRT</th>
<th>July</th>
<th>Cumulative*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>542</td>
<td>2,504</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>800-B Calls that Received SCRT Response**</th>
<th>July</th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>48%</td>
<td>30%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Average Response Time</th>
<th>July</th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>15min</td>
<td>15min</td>
</tr>
</tbody>
</table>
Referral Source: Cumulative

- 911 Dispatch: 79%
- SCRT Observed in Community - "On view": 13%
- Non-Crisis Community Support: 5%
- Other: 3%

* Cumulative counts are on data since pilot launch (Nov 30, 2020 – July 31, 2021)

** 800-Bs are a type of call code from 911 emergency communications center which indicate an individual in behavioral health distress with no weapon involved. In 2019, SF 911 received over 10,000 of these calls. Percentage shown excludes “800-B On Views” and a small number of 800-Bs not dispatched to SCRT for other reasons. SCRT aims to respond to 100% of dispatched 800-Bs once fully launched.
The Street Crisis Response Team now has a website!
For more information on the SCRT please visit: Street Crisis Response Team Background
To view our Preliminary Evaluation Report please visit: SCRT_Preliminary_Report.pdf
The goals of the San Francisco Street Overdose Response Team are to reduce the risk of opioid-related death of individuals who have recently experienced an overdose, contribute to an overall reduction in overdose deaths through referrals and care coordination with community-based organizations, and to provide support to people who have survived any overdose.

**Key Performance Indicators**

<table>
<thead>
<tr>
<th>Category</th>
<th>8/23 – 9/5</th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calls Handled by SORT*</td>
<td>76</td>
<td>188</td>
</tr>
<tr>
<td>Calls Including an Overdose</td>
<td>45</td>
<td>101</td>
</tr>
<tr>
<td>Calls That Include Buprenorphine** Starts</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Clients who accepted harm reductions supplies</td>
<td>24</td>
<td>70</td>
</tr>
</tbody>
</table>

*Cumulative counts are on data since pilot launch (August 2, 2021 – September 5, 2021). The SORT Response Team monitors and responds to calls that clearly state or appear to be for an overdose as there is not an overdose-specific dispatch call code. As a result, some calls the team responds to might not include an overdose.

**Buprenorphine is a medication that is used for treatment of opioid use disorder. It is prescribed by SORT’s Street Medicine providers. Buprenorphine prevents withdrawal and reduces cravings. Because it’s somewhat similar to opioids, there are some effects from it that are similar to opioids (mild sedation, respiratory depression, and euphoria) but to a much lesser extent. If someone is taking buprenorphine every day, their risk of overdose is greatly reduced.
### Behavioral Health Services – Communications

A monthly report from BHS System of Care Leadership: BHS-Director-Communications@sfdph.org

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#### Overdose Engagement Outcomes: Cumulative

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client remained in the community</td>
<td>13%</td>
</tr>
<tr>
<td>SORT follow up at Emergency Department**</td>
<td>23%</td>
</tr>
<tr>
<td>Client accepted harm reduction supplies</td>
<td>52%</td>
</tr>
<tr>
<td>Ambulance transport to hospital</td>
<td>85%</td>
</tr>
</tbody>
</table>

* A single client engagement may result in multiple outcomes.
** The initial SORT response can include engaging clients in the ED. Either this is where they were first able to meet the client or they follow to the ED to try to engage the client.

---

#### Overdose Engagement Location: Cumulative

<table>
<thead>
<tr>
<th>Location</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>36%</td>
</tr>
<tr>
<td>Hospital</td>
<td>48%</td>
</tr>
<tr>
<td>Home</td>
<td>1%</td>
</tr>
<tr>
<td>Shelter</td>
<td>1%</td>
</tr>
<tr>
<td>Business</td>
<td>4%</td>
</tr>
<tr>
<td>Facility</td>
<td>9%</td>
</tr>
<tr>
<td>No Entry</td>
<td>21%</td>
</tr>
</tbody>
</table>

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#### Client Characteristics

**Race & Ethnicity**

- White: 45%
- Black: 15%
- Latinx: 14%
- Asian: 3%
- Other/Unknown: 2%
- No Entry: 21%
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