

Mental Health SF Implementation Working Group DRAFT Meeting Minutes

August 24, 2021 | 9:00 – 1:00 PM

This meeting was held by WebEx pursuant to the Governor's Executive Orders and Mayoral Emergency Proclamations suspending and modifying requirements for in-person meetings. During the Coronavirus Disease (COVID-19) emergency, the Mental Health San Francisco Implementation Working Group will convene remotely until it is legally authorized to meet in person.

Note: The agenda, meeting materials, and video recording will be posted at the Mental Health SF Implementation Working Group website:

<https://www.sfdph.org/dph/comupg/knowlcol/menthlth/Implementation.asp>

1. Call to Order/Roll Call

The meeting was called to order at 9:05 AM.

Committee Members Present: Dr. Scott Arai, Psy. D., Shon Buford, Kara Chien, J.D., Dr. Vitka Eisen, M.S.W., Ed.D, Steve Fields, M.P.A., Dr. Ana Gonzalez, D.O., Dr. Hali Hammer, M.D., Philip Jones, Dr. Monique LeSarre, Psy. D., Jameel Patterson, Andrea Salinas, L.M.F.T., Sara Shortt, M.S.W., Amy Wong.

Committee Members Absent: No members absent.

2. Discussion Item #1: Approve Meeting Minutes

Member Hammer suggested a correction be made on Item 7 to change department for Kelly Kirkpatrick from DPH to Mental Health San Francisco. Chair LeSarre acknowledged the correction.

3. Public Comment for Discussion Item #1

No public comment.

4. Action on Discussion Item #1

Member Eisen moved to approve the July 2021 meeting minutes; Chair LeSarre seconded the motion. Meeting minutes were approved by the IWG.

Dr. Scott Arai, Psy. D. - Yes
Shon Buford - Absent during Vote
Kara Chien, J.D. - Yes
Dr. Vitka Eisen, M.S.W. Ed.D, - Yes
Steve Fields, M.P.A. -Yes
Dr. Ana Gonzalez, D.O. - Yes
Dr. Hali Hammer, M.D. -Yes
Philip Jones -Yes
Dr. Monique LeSarre, Psy. D. - Yes
Jameel Patterson - Yes

Andrea Salinas, L.M.F.T. - Yes
Sara Shortt, M.S.W. - Yes
Amy Wong - Yes

5. Today's meeting goals

Dr. Monique LeSarre, IWG Chair, reviewed goals for today's meeting and asked the IWG to briefly review the group agreements. She reminded the IWG and the public that the chat functions have been muted to allow everyone has equal accessibility to the meeting.

6. Discussion Item #2: Conflicts of Interest & Contracting

Jon Givner from the San Francisco City Attorney's Office discussed Conflicts of Interest and contracting with the IWG. He informed the IWG that many Conflict-of-Interest rules that apply City officers do not apply to advisory bodies but that rule that does apply to advisory groups is Government Section Code 1090, which notes that you can't participate in making a contract and then benefit from that contract. Jon stated that IWG members should contact him directly if they need assistance with decision to recuse themselves. Jon also informed IWG of steps to take if any member needs to recuse themselves and confirmed that members who recuse themselves can still observe the meeting remotely as a member of the public. Jon reviewed a second rule -the Charter's non-interference rule- which applies to Board of Supervisors and the working group appointees. He reviewed the "Conflicts of Interest & Contracting" summary in the slide deck and explained that the slides include recommendations for both rules combined.

Member Fields inquired about a specific example of an IWG member providing case management expertise on the topic of Office of Coordinated Care (OCC). He specified that the IWG is there to assist in the design and if that Case Management expert would have a conflict of interest. Jon Givner clarified that participating in the high-level discussions is appropriate, but that IWG members should be cautious as members began to drill down into specifics.

Member Eisen asked for a recommendation on what to do regarding conversations starting broadly and then becoming more specific. Jon Givner recommended that if the conversation starts to get more specific and relates to a service that they might receive a contract for, the member should recuse themselves and step out during that portion of the discussion (per above, they can still listen in, but as part of the public, not the IWG).

Member Hammer stated a lot of what the IWG discusses are programmatic decisions, which can ultimately affect the contracts. Member Hammer acknowledged Jon Givner for giving the guidance for IWG to recuse themselves for parts of the discussion. Jon Givner indicated that having an agenda that specifies the boundaries of the discussion would help.

Member Fields indicated that he may be out for the next two meetings, given the current discussion. He explained his concern regarding certain areas of expertise being silenced, due to the conflict-of-interest issue. He inquired if he should recuse himself from the Jamboard activity, given that he does not know if the conversation will get specific and perhaps be considered a conflict of interest. He inquired if his agency has no intention of applying to a contract if he is still able to participate in the discussion? Jon Givner indicated that there is not conflict of interest if Member Fields' agency does not plan on applying for City funding. Jon Givner suggested the option of bringing other experts to meetings who are not members of the IWG to make presentations to assist in the discussion. Member Fields emphasized the irony of the legislation requiring expertise, but then having experts to recuse themselves from providing that expertise.

Facilitator Jennifer James explained the steps to the JamBoard and inquired if the broad brainstorming could be done by everyone and then members recuse themselves in subsequent meetings as the conversation gets more specific. Givner replied that would be best practice and recommended that Facilitator James or Chair LeSarre connect with him after the meeting to discuss

the Jamboard process in more detail.

Vice-Chair Patterson inquired about a scenario in which an IWG member participates in the broad conversation, recuses for the specific conversation, and then the IWG's member agency ultimately receives a contractor for the work. Givner suggested that when you see the discussion begins to drill down, the IWG member should take it upon themselves to recuse. He clarified that there is not an issue with participating in the broader discussion.

7. Public Comment for Discussion Item #2: Conflicts of Interest & Contracting

No public comment.

8. Discussion Item #3: Principles to apply when developing MHSF Recommendation

Facilitator James informed the IWG that the discussion group has submitted 2 additional principles, bringing the total to 9, and that no formal vote is needed during this item.

Member Eisen informed the IWG that the original recommendations only had minor revisions. She also reminded the IWG that that the principles are not rules and that the Board of Supervisors and the Mayor's office decide whether to implement the recommendations or not.

Member Eisen reviewed proposed additional Principal 8 and invited IWG to ask questions. Member Hammer inquired if IWG has a common definition of parity wage. Member Eisen replied that determination for wage can be determined by employee salaries that are available to the public. Member Hammer informed that having a definition for parity wage in the recommendation can help and expressed concern that this would mandate a certain methodology for budgeting of certain programs. Member Eisen indicated that it is not purview of the IWG to mandate anything and that the recommendations can be modified at any time. Member Hammer expressed agreement with Member Eisen. Member Buford expressed concern that using "parity wage" is not as clear as "prevailing wage." Member Salinas expressed agreement "parity wage" and expressed that it has a clearer definition.

Facilitator Dadkhah polled the IWG for Level of Agreement for Principal 8. Facilitator James indicated that all members agreed at either a Level 3, 4 or 5.

Member Eisen reviewed proposed Principal 9 and invited IWG to ask questions. IWG did not have any questions or comments for Principal 9. Facilitator Dadkhah polled IWG's level of agreements. James indicated that IWG members expressed agreement with Proposed Principal 9 with either a Level 3, 4 or 5.

9. Public Comment for Discussion Item #3

No Public Comment.

10. Discussion Item #4: New Beds and Facilities Discussion

Chair LeSarre reviewed the Mental Health SF Domains and the presenters for this Discussion Item.

Facilitator James reviewed the Recommendation Roadmap and briefly reviewed the questions provided by the IWG during the July 2021 meeting.

Dr. David Pating introduced himself and Yoonjung Kim. He reviewed the range of SFDPH Behavioral Health Service and the various points of entry and points of exit to the different levels of service. He also reviewed the Baseline Care Continuum, providing definitions and service provided for the different levels of care.

Dr. Pating reviewed the purpose of "New Beds & Facilities". He showed a dashboard with the number and

types of beds that will be funded with the expansion. Dr. Pating addressed the question regarding beds at Hummingbird. He stated that Hummingbird are pre-existing beds fall under Residential and Adult Systems of Care and will be handled outside of New Beds activities. He also informed the IWG that there will be 12 new Mental Health Rehabilitation (Board and Care) beds added, along with 73 Residential Care Facility (RCF) or Board and Care, which are under development. Dr. Pating also addressed the questions regarding the Crisis Diversion program. He stated that it is under development, but that it might be a place to reduce crisis or respond post-crisis. He informed the IWG that there is a plan to increase cooperative living, such as Richardson Apartment, and housing with mental health capacity, but indicated that they are run by HSH. Dr. Pating reviewed the 6 ways that equity is being implemented into the New Beds & Facility components.

Member Wong inquired about the goal for increasing permanent beds and why they are not attempting to get BHC Hummingbird beds back from contractors. She also referred to Page 7 of the SFDPH Behavioral Health Committee Optimization report, which states that temporary beds should be matched 1:1 by permanent beds. She stated that based on the New Beds Dashboard that is not happening. Dr. Pating indicated that the goal was to add new beds – not replace existing beds. Yoonjung Kim informed the IWG that Hummingbird is not under MHSF New Beds and Facilities domain. Dr. Pating stated that Hummingbird is monitored under the regular system of care and would have to be addressed by operations team.

Chair LeSarre asked if it would be possible to forward those questions to the Operations Team. She also inquired why there are still out of county beds and what the plan is to operationalize the accountability process for monitoring equity. Yoonjung Kim indicated that there is a desire to have more services within the City, but property is expensive and potential vendors are resistant to provide services within SF due to different issues, such as minimum wage. Dr. Pating responded that the operationalization of accountability would occur via the contract and through annual compliance. He indicated that the New Beds and Facilities team would reach out to the IWG for recommendations.

Commented [JJ1]: CON: follow up needed?

Member Fields inquired about the difference between the new and current diversion programs. Dr. Pating stated that the legislation required a crisis diversion program. He indicated that the department is using an A3 methodology and explained that process. Dr. Pating clarified that the new crisis diversion will probably target people that are in crisis that do not want treatment. Yoonjung Kim added that New Beds and Facilities met with various stakeholders, and they discussed that there was a need for a place for people who are not ready for treatment. She reviewed what the Crisis Diversion entails and what is being proposed.

Member Fields requested that the IWG have a revenue picture for future recommendations. He stated that the more revenue that can be leveraged for an appropriate program, the better the resources can be spread. He also expressed that there is no outcome for New Beds, besides “better movement of people” – but there are still other outcomes, such as recidivism, that are not tracked. He suggested that these other outcomes be measured, on a longitudinal basis, for individuals that go through the system of care.

Member Salinas commented that the A&A Facility in San Pablo is the nicest Board & Care she has ever seen and commended the department for contracting with A&A. Yoonjung Kim stated that Morningstar Board and Care closed down and A&A was just onboarded. She reiterated that the goal is to bring clients back to SF. Member Salinas expressed her concern that the A&A facility has high capacity – over 200 clients and doesn't see how they can provide adequate services and supervision. Yoonjung Kim stated that the A&A is unique because it provides a medical care component – with nursing care. Dr. Pating reiterated that there is a challenge to bring these services back into the City.

Member Patterson inquired about how the Sobering Center is set up for rehabilitation. Dr. Pating clarified that it is not designed for treatment, just to help people in crisis and receive a referral to services if needed/wanted. Member Patterson suggested having relationships with rehab facilities and suggested individualizing the services and providing monitoring. He indicated that some people get “lost in the shuffle.” Dr. Pating responded that a substance use treatment provider is linked with the shelter and what it will be mostly staffed by peers. Member Patterson suggested that one of the missing components in that model is ministry. Chari LeSarre commended Dr. Pating and agreed that relationship is key.

Member Arai inquired about the relationship with HSH and the more permanent housing. He expressed his opinion that this plan seems steered toward institutionalization. Yoonjung Kim acknowledged Member

Arai's concern and stated that they built a relationship with HSH and individuals that stay at residential treatment will become a housing priority. She also stated that the IWG advocacy is needed in conversations moving forward.

Member Salinas asked for specifics regarding the prioritization to housing. Yoonjung Kim recommended having the client entered into CES to facilitate the process.

Dr. Pating reviewed the Core Questions regarding clients that need residential crisis diversion services. He asked for suggestions for identifying community stakeholders. Chair LeSarre informed IWG that this item will have to be tabled to September meeting.

11. Public Comment for Discussion Item #4: New Beds and Facilities

- Sarah Larson expressed that she is having a hard time keeping up with the goals of the group. She indicated that there are 105 BHC beds are being ignored for ARF. She expressed that the complete picture is not being looked at and the result will be a confusing web of services due to contracting out. She also stated her concern regarding harm reduction being applied across the City and her opinion that she doesn't think that is going to work.

12. Discussion Item #5: Mental Health SF Office of Coordinated Care

Facilitator Jennifer James reviewed the Recommendation Roadmap and introduced the presenters for MHSF Office of Coordinated Care (OCC) – Deputy Director Marlo Simmons and Heather Weisbrod.

Deputy Director Simmons reviewed the purpose of MHSF Office of Coordinated care. She acknowledged that OCC is very ambitious and that systems are difficult to navigate, which leads to clients falling through the cracks. She reviewed the starting target populations for OCC and the BHS Organization Chart. She stated that staff from Transition team will join OCC. She also informed the IWG that there are new regulatory mandates and major changes happening to BHS – both at the federal and state levels. She indicated that state and federal governments are concerned with coordination of service and explained that there is a new interdisciplinary requirement "Enhanced Care Management." She reviewed the high-level next steps for OCC for each of the Components presented. Deputy Director Simmons provided a brief overview of the Case Management Expansion, including challenges and proposal developments.

Member Wong inquired about the composition of the full-time employees. Deputy Director Simmons replied that there will be a lot of civil service hiring but there will also be expansion for CBOs. Vice-Chair Patterson commended Deputy Director Simmons on the presentation and asked to receive the presentation. He also talked about the importance of finding pathways for people to get out of homelessness and to get treatment for people with drug addictions. Deputy Director Simmons stated that the goal is to build and reinforce pathways and to help people achieve wellness and recover, and that housing is a big piece to that. Member Patterson expressed concern that people don't know their options when they are in the system.

Member Salinas inquired if case load sizes and composition will remain the same. Deputy Director Simmons replied that the focus is on highest clinics and the largest population of people experiencing homelessness. She indicated that there needs to be a balance between all the goals. Member Salinas inquired if there have been projections for Intensive Case Management (ICM) services resulting to increase Street Outreach. Heather Weisbrod indicated that there are projections and there are ways to divert individuals, such as keeping people at the outpatient level or care – rather than sending to ICM. She indicated that they will come back to IWG with precise numbers.

Commented [JJ2]: CON team: follow up needed

Member Eisen inquired how the system decides that a person no longer needs ICM, given that people have ebbs and flows. She indicated that it is possible for people to drop out of care and become acute. Deputy Director Simmons stated that there would be a Coordinate Care system, where dedicated staff will monitor clients. She stated that they will start with specific populations.

Member Fields expressed his concern that mental health services are siloed and that he has not

heard if there is a plan to consolidate services and have fewer individual providers. He stated that in the continuum of care, an individual can be stepped down and receive less support and, as a result, they will return to higher level of care. He inquired if there is a 24/7 case management that will be put in place. He provided an example of a co-op individual having a crisis and being able to access a familiar face to help through the crisis. Member Fields also addressed that people do not move out of case management because it has become an individual's safety net. Deputy Director Simmons thanked Member Fields for his comments.

Member Shortt expressed appreciation for the commitment to increase wages and the relationship between that and the ability to provide services.

Chair LeSarre inquired about how the wage parity will work on a structural level. Deputy Director Simmons replied that it is challenging to do it across budgets because it is such a specialized service. She stated that she is confident that this year's budget allows CBOs to provide ICM providers similar pay.

13. Public Comment for Discussion Item #5: Office of Coordinated Care on any matters within the Working Group's

- Sara Larson express that having more civil servants will lead to more centralized and expedient services, as well as decrease turnover. She indicated that there is need for more Case Managers and rather than have 10 contracted provider and 6 civil service providers, all Case Managers should be hired as civil servants.

14. Discussion Item #6: What's coming up

Facilitator James reviewed the possible report structure and the due date for that report. She informed the IWG that the draft report will be submitted to IWG by Sept 13th. She highlighted what will be sent to the IWG in post-meeting communication.

Facilitator James invited the IWG to provide input and feedback on the duration of the meetings. Member Shortt would like the meeting duration to be reduced. Member Salinas requested more information in order to make a decision, i.e. timeline of when recommendations should be made. Facilitator James showed the Potential IWG Meeting topics for the recommendations. Member Chien gave her opinion about changing the meeting dates for the holidays. She also suggested getting "homework" to help prepare for the IWG meetings and have more efficient discussions. Member Buford expressed that one 4-hour meeting is easier to attend than semi-monthly meetings. Member Fields acknowledged that the process and the technology have been exhausting but that the IWG has been more efficient with the time. Facilitator James indicated that the 4-hour meetings will continue.

15. Public Comment for Discussion Item #6: What's coming up

No public comment.

16. Discussion Item #6: Public Comment on any matters within the Working Group's jurisdiction not on the agenda

No comments.

17. Adjourn

The next meeting will be on Tuesday, September 28, 2021, from 9:00 AM- 1:00 pm. Meeting adjourned at 12:49 PM