

Mental Health SF Implementation Working Group DRAFT Meeting Minutes

December 14, 2021 | 9:00 AM – 12:00 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 and meeting materials will be posted at the Mental Health SF Implementation Working Group website:

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

1. Call to Order/Roll Call

The meeting was called to order at 9:07 AM.

Committee Members Present: Dr. Scott Arai, Psy. D., Kara Chien, J.D., Dr. Vitka Eisen, M.S.W., Steve Fields, M.P.A., Ed.D, 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.

Committee Members Excused Absent: Shon Buford, Amy Wong
Committee Members Unexcused Absent: None

2. Welcome and Review of Agenda

Facilitator Jennifer James opened the meeting and reviewed the meeting goals and agenda, due to Chair LeSarre having technical difficulties. Facilitator James asked IWG members to notify the meeting facilitators if they needed to step away from the meeting, in order to maintain quorum. Facilitator James reviewed the main presenters for today's MHSF domains and reviewed the group agreements, highlighting the group agreement around critiquing idea not the person.

3. Discussion Item #1: Remote Meeting Update

Facilitator James reviewed required findings for State and Local Requirements regarding continuing to meet virtually. She reminded the IWG that these will be reviewed and updated on a monthly basis.

4. Public Comment for Discussion Item #1

No public comment.

5. Vote on Discussion Item #1

Member Hali Hammer moved to approve the Remote Meeting Update findings; Member Eisen seconded the motion. The IWG approved the remote meeting findings.

Dr. Scott Arai, Psy. D. - Yes

Shon Buford – Absent during vote
Kara Chien, J.D. - Yes
Dr. Vitka Eisen, M.S.W. - Yes
Steve Fields, M.P.A., Ed.D - Yes
Dr. Ana Gonzalez, D.O. - Yes
Dr. Hali Hammer, M.D. - Yes
Philip Jones - Absent
Dr. Monique LeSarre, Psy. D. - Yes
Jameel Patterson - Yes
Andrea Salinas, L.M.F.T. - Yes
Sara Shortt, M.S.W. - Yes
Amy Wong – Absent

6. Discussion Item #2: Approve Meeting Minutes

The IWG members did not have any updates or corrections to the November 2021 IWG meeting minutes.

7. Public Comment for Discussion Item #2

No public comment.

8. Action on Discussion Item #2

Member Fields moved to approve the November 2021 meeting minutes; Member Arai seconded the motion. The meeting minutes were approved by the IWG.

Dr. Scott Arai, Psy. D. - Yes
Shon Buford – Absent during voting
Kara Chien, J.D. - Yes
Dr. Vitka Eisen, M.S.W. - Yes
Steve Fields, M.P.A., Ed.D - 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 - Absent

9. Discussion Item #3: New Beds and Facilities: Crisis Diversion Site and Discussion Group Updates

Chair LeSarre reminded the IWG of the MHSF Domains and briefly reviewed the Recommendation Roadmap which provides an overview of where the IWG is currently, as it relates to this domain.

The Crisis Diversion Unit Discussion Group provided an update on their recommendations. Member Salinas reminded the IWG that the workgroup met on November 30th and will meet again in early January 2022. She invited members to participate in the discussion group and offered to send meeting information.

Dr. Pating presented on the possible acquisition of new building at 822 Geary Street for the DPH Behavioral Health Bed Expansion. He acknowledged that real estate is difficult to acquire in San Francisco. He explained that this would be a site for both the Crisis Diversion and Safe

Consumption site and would be a one-time purchase with Proposition C funds. He indicated that this site acquisition is being taken to the Board of Supervisors soon. Dr. Pating stated that extra beds are needed, particularly with the Street Crisis Response Team being out in the field. He clarified that this site will provide services to individuals with higher acuity and do not necessarily meet 5150 criteria and mild to moderate substance use interventions – in addition to psychiatric services.

Chair LeSarre inquired about potential timeline for when the site will be providing services. Dr. Pating stated that he anticipates that it could be open a year after the papers are signed and that there are multiple processes that need to be complete – including finding a vendor to run the site. He stated that there are some plumbing issues that need to be addressed. Chair LeSarre inquired if it would be better to purchase a building with existing plumbing. Dr. Pating clarified that there is plumbing but there will need to be certain amenities built (i.e., exam rooms and kitchenette)– that will require moving pipes.

Member Arai stated that this purchase is happening quickly and inquired if combining the Crisis Diversion and the Safe Consumption services is a result of the pressure to purchase the site or if there was thought put into combining them into one building. Dr. Pating replied that the building fits many of the needs for those two services, including an open space and large enough floorplan that can potentially fill the gap for services from DORE Urgent Care. He stated that there are two design teams working on these services and that he is leading the Crisis Diversion Unit.

Member Shortt expressed that she liked the synergy component of Crisis Diversion and Safe Consumption. She also expressed her concern about the community opposition to the Safe Consumption site and inquired if the two projects were severable. She inquired if the Safe Consumption site were to end due to political reasons, the Crisis Diversion Unit would still be moving forward. She also inquired if the Safe Consumption site would operate under Mental Health San Francisco. Dr. Pating acknowledged the community opposition and stated that real estate acquisition is separate from the programs themselves, and the building is still slated to be purchased, pending approval. He stated that the Crisis Diversion Unit and the Safe Consumption site are separate programs, despite being in the same location. He stated that there will be outreach and community input requested so that the community can speak on both programs. He stressed that the immediate focus is on the purchase of the building, given that it is difficult to find adequate space that can house these types of programs and services. He also replied that the Safe Consumption Site is not funded by MHSF.

Member Shortt also expressed her concern of the lack of community outreach before going to the Board of Supervisors. She encouraged Dr. Pating to engage community organizations and neighborhoods in Tenderloin who already have relationships and credibility in the community. She also inquired if and how the IWG can offer support in the outreach. Dr. Pating reiterated that purchasing the building is separate from programs and that once the building purchase was complete, some agencies will be invited into conversations regarding the Safe Consumption site, but not Crisis Diversion. Dr. Pating acknowledged that the IWG should refer to the IWG Charter or other rules in place regarding the IWG assisting with outreach. Dr. LeSarre agreed with Dr. Pating and indicated that the advocacy questions require a separate discussion.

Member Fields echoed the question regarding the fate of the Safe Consumption site affecting the purchase of the building. He stated that Dr. Pating's previous response satisfied his question.

Member Salinas commented that this is an ideal location but inquired if there was a way to create separate entrances in the design. She expressed her concern that because of the high needs of individuals seeking services, the entrances and triage areas may get chaotic. Dr. Pating clarified that there are two separate entrances to the building, and each program would have a separate entrance. Member Salinas acknowledged that this was well-thought out and was a great idea.

Member Eisen inquired if the MHSF legislations excludes the Safe Consumption site from being funded by Proposition C, considering the Crisis Diversion Unit and overdose prevention can be

complementary services. Dr. Pating confirmed that Our City Our Home is the overseeing body of the Prop C and will be addressing it.

10. Public Comment for Discussion Item #3: New Beds and Facilities Crisis Diversion Recommendations Review

No public comment.

11. Discussion Item #4: Office of Coordinated Care Recommendation Discussion

Chair LeSarre reviewed the Recommendation Roadmap for this Office of Coordinated Care (OCC) domain to orient IWG members on the progress. Facilitator James shared the [recommendations that were developed by the Office of Coordinated Care Discussion Group](#).

Facilitator James briefly reviewed the principles that the Discussion Group applied as they were drafting these recommendations.

Recommendation 1: Chair LeSarre stated the importance of working within all systems of care – both public and private - so that providers do not lose their clients. She also stated that it is important to look at equity and compensation as to not overload staff. Member Shortt commented that this recommendation aligns with the spirit of the legislation, in terms of what Care Coordination should be. She also stated that this is not a case management role and that a new title should be used. Member Shortt recommended using the title of "Connector." Member Gonzalez suggested using "Care Coordinator." Member Chien agreed that there needs to be a more accurate title.

Recommendation 2: Member Fields indicated that under Case Management, there needs to be clarification regarding who responds to crises on off hours. Currently, some off-hours crises are routed to 911. Chair LeSarre indicated that, currently, there are no better ways to document or create alerts. She suggested taking those considerations into the next parts of the recommendation. Member Chien suggested implementing a tech system to help identify when someone needs immediate assistance, given that members cannot foresee crises between the hours of 9-5. She stressed the importance of utilizing technology to reduce duplicate files and to avoid passing individuals around without providing support.

Recommendation 3: An IWG member, not recorded by the facilitation team, noted that there should be consideration of the potential disruption to current systems that are part of the housing coops. They suggested that the recommendation should include a referral to and coordinated entry into housing assessment and ultimately housing.

Recommendation 4: Member Gonzalez inquired what the caseload size is anticipated to be. Chair LeSarre indicated that she is not sure and asked for recommendations from the IWG for an appropriate caseload size. Member Gonzalez did not feel comfortable making recommendations regarding case size. Member Hammer suggested that having a case size might create issues and suggested taking a more holistic approach where all "Case Managers" are responsible for providing appropriate services and care.

Recommendation 5: no refinements suggested.

12. Public Comment for Discussion Item #4

No public comment.

13. Discussion Item #5: Housekeeping and future meetings

Heather Littleton provided updates regarding the vaccine mandate, including the due date and what counts as fully vaccinated. Facilitator James reminded the IWG that by the group's bylaws, the Chair of the IWG is the formal representative for media requests. She clarified that this does not preclude members from making comments in their own personal or professional capacity. Chair LeSarre

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reminded that IWG meetings will continue to be remote until further notice and that the meeting will continue to be scheduled the 4th Tuesdays of the month from 9:00 am – 1:00 pm.

14. Public Comment for Discussion Item #5

No public comment.

15. Adjourn

Chair LeSarre moved to adjourn the meeting and a member, unrecorded by the facilitation team, seconded the motion. The next meeting will be on Tuesday, January 25, 2022 from 9:00 AM- 1:00 PM. Meeting adjourned at 11:15 AM.