

SAN FRANCISCO MENTAL HEALTH BOARD



Mayor
London N. Breed

1380 Howard Street, 2nd Floor
San Francisco, CA 94103
(415) 255-3474 fax: 255-3760
mhb@mhbsf.org
www.mhbsf.org
www.sfgov.org/mental_health

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MEETING OF THE MENTAL HEALTH BOARD

AGENDA

Wednesday, June 19, 2019
1380 Howard Street
4th Floor, Room 424
6:00 PM – 8:00 PM

6:00 PM Call to Order

Roll Call

Agenda Changes

6:10 PM Item 1.0 Report from Behavioral Health Services

1.1 Discussion regarding Behavioral Health Services Department Report, a report on the activities and operations of Behavioral Health Services (BHS), including budget, planning, policy, and programs and services.

1.2 Public Comment

6:25 PM Item 2.0 Mental Health Service Act Updates and Public Hearings

For discussion.

The passage of Proposition 63 (now known as the [Mental Health Services Act](#) or MHSA) in November 2004, provides increased annual funding to support county mental health programs. The Act addresses a broad continuum of prevention, early intervention and service needs and the necessary infrastructure, technology and training elements that will effectively support this system. This Act imposes a 1% income tax on personal income in excess of \$1 million. One of the requirements of the Act is that the county must provide annual updates as well as hearings for changes in the way the county implements the funding.

2.2 Public Comment

6:30 PM Item 3.0 Action Items

For discussion and action.

3.1 Public comment

3.2 **Proposed Resolution:** Be it resolved that the minutes for the Mental Health Board meeting of May 15, 2019 be approved as submitted.

3.3 **Proposed Resolution:** Be it resolved that the Mental Health Board approves the Annual Report 2018-19.

3.4 **Proposed Resolution:** (MHB 02-2019) The Mental Health Board urges the City of San Francisco to provide oversight and accountability for buildings providing permanent supportive housing to people with mental illness and substance use disorders. (Attachment A)

3.5 **Proposed Resolution:** (MHB 03-2019) The San Francisco Mental Health Board urges the City and County of San Francisco to provide additional funding to expand mental health and substance services and supported housing for Transitional Age Youth (TAY) who are experiencing behavioral health challenges. (Attachment B)

3.6 **Proposed Resolution:** (MHB 04-2019) The Mental Health Board urges the Department of Public Health and Behavioral Health Services to take significant steps to implement the findings of the Black/African American Health Initiative Health data and Health Action regarding African American health and wellness, and implement department wide policies, procedures and changes in response to this data. (Attachment C)

3.7 **Proposed Resolution:** (MHB 05-2019) The San Francisco Mental Health Board urges the City and County of San Francisco to initiate a study to determine the efficacy of providing Medically Assisted Substance Use Disorder service providers increased access to Buprenorphine and Naloxone to afford patients a greater degree of self-determination in their individual recovery plans. (Attachment D)

3.8 **Proposed Resolution:** (MHB 06-2019), that the Mental Health Board urges the mayor, the Health Commission and the Board of Supervisors to significantly increase the Department of Public Health budget for /Behavioral Health Services to provide increased supportive housing, staffing, and innovative programs. (Attachment E)

7:30 PM Item 4.0 Reports

For discussion

4.1 Report from Executive Director of the Mental Health Board

Discussion regarding upcoming events, conferences, or activities that may be of interest to board members; Mental Health Board budget issues and update on staff work on board projects.

4.2 Report from Co-Chairs of the Board and the Executive Committee.

Discussion regarding Chair's meetings with Behavioral Health Services staff, meetings with members of the Board of Supervisors and community meetings about mental health or substance use.

4.3 Reports from Committees

Discussion regarding committee meetings, goals and accomplishments.

4.3 a) Information Committee

4.3 b) Implementation Committee

- 4.4 People or Issues Highlighted by MHB: Suggestions of people and/or programs that the board believes should be acknowledged or highlighted by the Mental Health Board.
- 4.5 Report by members of the Board on their activities on behalf of the Board.
- 4.6 New business - Suggestions for future agenda items to be referred to the Executive Committee.
- 4.7 Public comment.

7:50 PM 5.0 Public Comment

Adjournment

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Sunshine Ordinance Task Force
City Hall, Room 244
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4689
Telephone: (415)554-7724
Fax: 4(15) 554-5163
E-mail: sotf@sfgov.org

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SUPPORTIVE HOUSING OVERSIGHT

June 19, 2019

Attachment A

PROPOSED RESOLUTION: (MHB 02-2019) The Mental Health Board urges the City and County of San Francisco to provide oversight and accountability for buildings providing permanent supportive housing to people with mental illness and substance use disorders.

- 1. WHEREAS**, permanent housing residences providing supportive services and case management who serve vulnerable populations, and;
- 2. WHEREAS**, most of the people residing in these buildings have behavioral health issues and are very low income and rarely have other housing options, and;
- 3. WHEREAS**, permanent housing buildings require that building owners have contracts with property management services to collect rents and oversee building maintenance and repairs, and;
- 4. WHEREAS**, it is contractually necessary for property management services and City and County of San Francisco funded case management and behavioral health services provided in these buildings to maintain a separation of duties, and:
- 5. WHEREAS**, case management and behavioral health services require staff to conform to The Health Insurance Portability and Accountability Act (**HIPAA**), to protect the privacy of their clients, and;
- 6. WHEREAS**, some of these residences are not maintained in a livable condition, with incidents of mold, kitchen appliances not working for years, mice infestation, and rusty pipes with brown water, and;
- 7. WHEREAS**, residents of some of these buildings have shared with the Mental Health Board that they feel threatened with loss of their residence if they complain about, building conditions or property management practices, and;
- 8. WHEREAS**, residents of some of these buildings have shared with the Mental Health Board that case management staff does not assist residents with resolving issues with property management, and;
- 9. WHEREAS**, males significantly outnumber females in the majority of the permanent housing residences, with females feeling unsafe, and severe bullying incidents and direct threats to harm have been shared with the Mental Health Board, and;
- 10. THEREFORE, BE IT RESOLVED** that, even with separate responsibilities and legal requirements between case management services and property management duties, it

is essential that these differences do not result in intolerable conditions for residents, and;

11. FURTHER RESOLVED, that residents of permanent housing need an entity, agency, or City department to which they could file grievances heard and responded to, and;

12. THEREFORE, BE IT RESOLVED that The Mental Health Board urges the City and County of San Francisco to provide oversight and accountability for buildings providing permanent supportive housing to people with mental illness and substance use disorders.

TAY RESOLUTION
June 19, 2019
Attachment B

PROPOSED RESOLUTION, (MHB 03-2019) The Mental Health Board urges the City and County of San Francisco to provide additional funding for Transitional Age Youth to provide permanent housing, 24 hour crisis access, and services on the weekends.

1. **WHEREAS**, Transitional Age Youth (TAY) have difficulty accessing behavioral health services, and;
2. **WHEREAS**, TAY fall through the cracks transitioning from Children, Youth and Family Services,(CYF) and;
3. **WHEREAS**, Behavioral Health Services (BHS) System of Care (SOC) for CYF, only serve youth until the age of 18, and;
4. **WHEREAS**, over the age of 18, youth were served by the Adult and Older Adult (AOA) System of Care, and;
5. **WHEREAS**, in the fiscal year 2018-2019, CYF developed a SOC for TAY to be a transition to Adult Services, and;
6. **WHEREAS**, the new TAY SOC is creating more services that meet the needs of TAY, providing linkages for TAY moving between systems and levels of care, and;
7. **WHEREAS**, the new TAY SOC provides support for CYF and AOA providers working with TAY, and;
8. **THEREFORE, BE IT RESOLVED** while this program is highly commendable, additional funding is needed to provide permanent housing for TAY, 24 hour crisis access, and services on the weekends.

AFRICAN AMERICAN HEALTH AND WELLNESS

June 19, 2019

Attachment C

PROPOSED RESOLUTION: (MHB 04-2019) The Mental Health Board urges the Department of Public Health and Behavioral Health Services to take significant steps to implement the findings of the Black/African American Health Initiative Health data and Health Action regarding African American health and wellness, and implement department wide policies, procedures and changes in response to this data.

1. **WHEREAS**, African Americans are approximately 5% of the population of the nearly 900,000 people in San Francisco, and;
2. **WHEREAS**, Caucasians are 47%; Asian Americans are 34% and the Hispanic population is 15%, and;
3. **WHEREAS**, the per cent of African Americans receiving mental health services is 20%, four times the percentage of the population, and receiving substance use disorder services is 27%, more than five times the percentage of the population, and;
4. **WHEREAS**, African Americans are disproportionately represented in the San Francisco County Jail population, and;
5. **WHEREAS**, adverse childhood experiences, social inequities, and institutional racism, leads to disproportionate involvement of African Americans seeking mental health and substance use disorder treatment, and being incarcerated, and;
6. **WHEREAS**, inequities within the Department of Public Health and Behavioral Health Services are contributing to the disproportionate involvement of African American seeking mental health and substance use disorder treatment, and;
7. **WHEREAS**, these inequities include, but are not limited to, very few African American clinicians in the Department of Public Health, very few staff in all positions who are African American, and most staff aren't sufficiently trained in cultural humility and sensitivity to African American cultures, and;
8. **WHEREAS**, there have been complaints that African Americans who are outspoken or loud, are perceived as aggressive and frightening, and;

9. **WHEREAS**, there have been situations where one staff member who feels threatened by an African American client, especially males, has the authority to expel the person from the service, and;

10. **WHEREAS**, African American clients have shared that they often feel a general lack of respect, lower self-esteem and feeling devalued within programs.

11. **THEREFORE, BE IT RESOLVED** that that The Mental Health Board urges the Department of Public Health and Behavioral Health Services to take significant steps to implement the findings of the Black/African American Health Initiative Health data and Health Action regarding African American health and wellness, and implement department wide policies, procedures and changes in response to this data.

SUBSTANCE USE DISORDER RESOLUTION

June 19, 2019

Attachment D

PROPOSED RESOLUTION: (MHB 05-2019) The San Francisco Mental Health Board urges the City and County of San Francisco to initiate a study to determine the efficacy of providing Medically Assisted Substance Use Disorder service providers increased access to Buprenorphine and Naloxone to afford patients a greater degree of self-determination in their individual recovery plans.

1. **WHEREAS**, there are approximately 2,204 consumers currently enrolled in Methadone Maintenance Treatment (MMT) in the City and County of San Francisco, and;
2. **WHEREAS**, MMT requires that patients receive onsite treatment daily, and;
3. **WHEREAS**, MMT patients do not have the option to obtain their medication in pharmacies, and services are generally provided in areas of the city suffering the highest densities of illicit drug trade, and;
4. **WHEREAS**, mandated onsite treatment impedes patients' dignity, ability to travel, maintain regular employment or education, or to deviate, in any way, from a restrictive daily treatment regimen, and;
5. **WHEREAS**, the stigma of opioid addiction and its treatment are closely associated with an indefinite physical dependency on Methadone, and;
6. **WHEREAS**, MMT remains largely accepted as a standard modality despite its relatively elevated risk of dependency and difficult withdrawal and;
7. **WHEREAS**, in 2009, the CDC determined that methadone contributed to one in three prescription painkiller deaths, and;
8. **WHEREAS**, when administered in fixed doses, Buprenorphine is equal to Methadone in the reduction of illicit opioid use and patient retention, and;
9. **WHEREAS**, Buprenorphine has been found to be safer, with a greatly reduced incidence of overdose, and;
10. **WHEREAS**, According to The American College of Obstetricians and Gynecologists guidelines, Buprenorphine is the preferred treatment for opioid-dependent women in pregnancy and is safer than both Methadone and medical withdrawal, and;

11. **WHEREAS**, when Buprenorphine is prescribed in conjunction with Naloxone, an opioid antagonist, patients report few or no cravings and a lack of physical dependency;

12. **THEREFORE, BE IT RESOLVED** that The San Francisco Mental Health Board urges the City and County of San Francisco to investigate the efficacy of providing patients being treated for opioid addiction increased access to Buprenorphine and Naloxone in an effort to complement the individualized and voluntary nature of recovery that is vital to many receiving services.

BUDGET RESOLUTION

June 19, 2019

Attachment E

PROPOSED RESOLUTION (MHB-06-2019): The Mental Health Board urges the Mayor, the Health Commission and the Board of Supervisors to significantly Increase the Department of Public Health Services Budget for Behavioral Health Services to provide increased supportive housing, staffing, and innovative programs.

1. **WHEREAS**, San Francisco is enjoying significant prosperity, and the passage of legislation that increases funding sources for Behavioral Health Services, and;
2. **WHEREAS**, A significant increase of successful businesses have financial resources that could benefit Behavioral Health Services clientele, and;
3. **WHEREAS**, Many San Franciscans are complaining about the number of people with mental illness and substance use who are living on the streets, and;
4. **WHEREAS**, Behavioral Health Services has spent years developing a strategic, cost-effective system of care with a focus on community-based treatment replacing institutional care, which meets the Bronzan-McCorquodale guidelines, as detailed and mandated in the Welfare and Institutions code for the State of California, and;
5. **WHEREAS**, the Mental Health Board believes a strong and effective public health system directly benefits all neighborhoods and economic sectors of the community; and;
6. **WHEREAS**, many people with serious mental illnesses and substance use disorders, in San Francisco, are unable to find adequate housing with appropriate supports, and;
7. **WHEREAS**, the Mental Health Board believes our community has a moral and ethical duty to care for those people who are ill, suffering, in trouble, and in need, now, therefore,
8. **THEREFORE BE IT RESOLVED**, that the Mental Health Board recommends the City and County of San Francisco do everything in its power to protect the long-term investment it has made in community behavioral health services, and to increase funding to provide the many services still needed, and;
9. **BE IT FURTHER RESOLVED**, that the Mental Health Board urges the mayor, the Health Commission and the Board of Supervisors to significantly increase the Department of Public Health budget for /Behavioral Health Services to provide increased supportive housing, staffing, and innovative programs.