

SAN FRANCISCO MENTAL HEALTH BOARD



**Mayor
London N. Breed**

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ADOPTED MINUTES
Mental Health Board Meeting
Wednesday, June 19, 2019
1380 Howard Street
4th Floor, Room 424
6:00 PM – 8:00 PM

BOARD MEMBERS PRESENT: Marylyn Tesconi, Co-Chair; Njon Sanders (formerly Weinroth), Co-Chair; Carletta Jackson-Lane, JD, Vice Chair; Judy Z. Drummond, MA, Secretary; Arthur Curry; Marcus Dancer; Judith Klain, MPH; Gregory Ledbetter; Toni Parks; Richelle Slota, MA; Idell Wilson; Benny Wong, LCSW; and Samuel Bennett (on behalf of Supervisor Catherine Stefani).

BOARD MEMBERS ON LEAVE: Terry Bohrer, RN, MSW, CLNC; Ulash Thakore-Dunlap, MFT; and Harriette Stevens, EdD.

BOARD MEMBERS ABSENT: None

OTHERS PRESENT: Helynna Brooke (Executive Director); Loy M. Proffitt (Chief Financial Officer); Hali Hammer, MD, Department of Public Health (DPH), Director of Ambulatory Care for the DPH and SFHN; Samuel Bennett, proxy for Supervisor Catherine Stefani; Sarah Dardick, ECS SF START; Liza Murawski; Winship Hillier; David Elliott Lewis, PhD, MHA-SF, NAMI-SF; and two additional members of the public.

Ms. Tesconi called the meeting to order at 6:05 PM.

Roll Call

Ms. Brooke called the roll.

Agenda Changes

The order of the agenda has been changed to accommodate Dr. Hali Hammer's schedule. She is in a clinic serving clients until 6 PM, so it is difficult for her to get to 1380 at the beginning of our meeting. She will get here as soon as she can as she does want to hear the presentations.

ITEM 2.0 REPORT FROM BEHAVIORAL HEALTH SERVICES DIRECTOR (See Attachment A)

The full director's report can be viewed at the end of the minutes or on the internet.

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

Dr. Hammer shared that The posting for the position BHS Director is in the process of being finalized. It should be posted in the next couple of weeks. It will be posted for a month. The BOS approved the new Conservatorship legislation for SF, AB1045.

Gloria Wilder, Director of Pharmacy, is retiring.

The City was awarded Prop 47 dollars in the amount of \$80 million and Corrections \$6 million for the STARR program to divert people from jail. Forensic and Justice involved services.

2.2 Public Comment

Mr. Hillier said that 2,500 San Franciscans have been adjudicated into longterm involuntary psychiatric treatment, for longer than 30 days, as well as incompetence to stand trial and crimes due to substance use. He is particularly concerned about people involuntarily committed for incompetence to stand trial. He believes BHS should know how many people are there.

Ms. Murawski shared that officers who hold people on a 5150 need to handle clients with care.

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.

2.1 Mental Health Services Act Updates

Please see the director's report.

2.2 Public Comment

[No public comments.](#)

ITEM 3.0 ACTION ITEMS

For discussion and action.

3.1 Public comment

Mr. Hillier commented that Robert's Rules explain how to formulate resolutions.

Dr. Lewis said that the proposed Mental Health San Francisco (MHSF) addresses many of the goals the Board has in its resolutions. He shared that San Francisco Mental Health Education Funds (SFMHEF) voted to endorse MHSF and the corresponding tax initiative.

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

The resolution unanimously approved.

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

The resolution unanimously approved.

3.4 RESOLUTION: (MHB 02-2019) The Mental Health Board urges the City and County of San Francisco to develop a system of oversight and accountability for buildings providing permanent supportive housing to people with behavioral health challenges.

WHEREAS, permanent supportive housing residences provide behavioral health services and case management to vulnerable populations, and;

WHEREAS, the people residing in these buildings have behavioral health issues, are very low income and rarely have other housing options, and;

WHEREAS, permanent housing buildings require that building owners have contracts with property management services to collect rents and oversee building maintenance and repairs, and;

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;

WHEREAS, it has been reported that supportive service staff are violating the 1996 Health Insurance Portability and Accountability Act (**HIPAA**), that protects the privacy of their clients, and;

WHEREAS, some of these residences are in varying states of neglect and disrepair with incidents of mold, structural damage, missing or broken fixtures and appliances, vermin infestation, and outdated and potentially hazardous plumbing, electrical, and mechanical systems with rusty pipes and brown water, and;

WHEREAS, after seeking resolution with case management, some residents have escalated their concerns through the designated channels and still fear retaliation for voicing their concerns around building conditions and property management practices, and;

WHEREAS, males significantly outnumber females in the majority of the permanent housing residences, and many female residents have expressed feeling unsafe, and site incidents of severe bullying incidents and direct threats to harm, and;

THEREFORE, BE IT RESOLVED that, even with separate responsibilities and legal requirements between case management services and property management, it is essential

that this mutual exclusivity not result in unsafe or unnecessarily stressful conditions for residents, and;

FURTHER RESOLVED, that residents of permanent supportive housing need an entity, agency, or City department where their grievances can be heard and addressed, and;

THEREFORE, BE IT RESOLVED that the Mental Health Board urges the City and County of San Francisco to develop a system of oversight and accountability for buildings providing permanent supportive housing to people with behavioral health challenges.

[Approved unanimously following votes on changes for specific phrases.](#)

3.5 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.

WHEREAS, the transition from child to adulthood is can be a precarious period and requires developmentally specific support that address the difficulties many TAY have accessing services, and;

WHEREAS, many TAY fall through the cracks when transitioning from health and social service systems designed to serve children, to those that serve adults, and;

WHEREAS, in the fiscal year 2018-2019, Behavioral Health Services (BHS) Division began the development of a System of Care for TAY (TAY SOC) to enhance coordination and communication across TAY-serving systems, to build provider capacity and to develop and expand services customized for TAY, and;

WHEREAS, the new TAY SOC complements and serves as a bridge between the BHS Children, Youth and Families and Adult Systems of Care by adding services, providing linkages and supporting providers, and;

THEREFORE, BE IT RESOLVED that, while the TAY SOC launch is highly commendable, additional funding is urgently needed to expand the range of services, including the provision of housing and residential treatment for TAY with serious behavioral health challenges, additional training opportunities for providers, and the extension of crisis support to evening and weekend hours.

BE IT FURTHER RESOLVED that 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.

[Approved unanimously following votes on changes for specific phrases.](#)

3.6 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.

WHEREAS, African Americans are approximately 5% of the population of the nearly 900,000 people in San Francisco, and;

WHEREAS, Caucasians are 47%; Asian Americans are 34% and the Hispanic population is 15%, and;

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;

WHEREAS, African Americans are disproportionately represented in the San Francisco County Jail population, and;

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;

WHEREAS, inequities within the Department of Public Health and Behavioral Health Services are contributing to the disproportionate involvement of African Americans seeking mental health and substance use disorder treatment, and;

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 are not sufficiently trained in cultural humility and sensitivity to African American cultures, and;

WHEREAS, there have been complaints that African Americans who are outspoken or loud, are perceived as aggressive and frightening, and 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;

WHEREAS, African American clients have shared that they are negatively affected by institutional racism resulting in frustration and hopelessness, a general lack of respect, and feelings of being devalued within programs.

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.

[Approved unanimously following votes on changes for specific phrases.](#)

3.7 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 Naltrexone to afford patients a greater degree of self-determination in their individual recovery plans.

WHEREAS, there are approximately 2,204 consumers currently enrolled in Methadone Maintenance Treatment (MMT) in the City and County of San Francisco, and;

WHEREAS, MMT requires that patients receive onsite treatment daily, and;

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 the illicit drug trade, and;

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;

WHEREAS, the stigma of opioid addiction and its treatment are closely associated with an indefinite physical dependency on Methadone, and;

WHEREAS, MMT remains largely accepted as a standard modality despite its relatively elevated risk of dependency and difficult withdrawal and;

WHEREAS, in 2009, the Centers for Disease Control and Prevention (CDC) determined that methadone contributed to one in three prescription painkiller deaths, and;

WHEREAS, when administered in fixed doses, Buprenorphine is equal to Methadone in the reduction of illicit opioid use and patient retention, and;

WHEREAS, Buprenorphine has been found to be safer, with a greatly reduced incidence of overdose, and;

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;

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

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 Naltrexone in an effort to complement the individualized and voluntary nature of recovery that is vital to many receiving services.

[Approved unanimously following votes on changes for specific phrases.](#)

3.8 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.

WHEREAS, San Francisco is enjoying significant prosperity, and the passage of legislation that increases funding sources for Behavioral Health Services, and;

WHEREAS, A significant increase of successful businesses have financial resources that could benefit Behavioral Health Services clientele, and;

WHEREAS, San Franciscans are extremely concerned about the number of people with behavioral health issues who are living on the streets, and;

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;

WHEREAS, the Mental Health Board believes a strong and effective public health system directly benefits all neighborhoods and economic sectors of the community; and;

WHEREAS, many people with serious mental illnesses and substance use disorders, in San Francisco, are unable to secure housing with appropriate supports, and;

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,

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;

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.

[Approved unanimously following votes on changes for specific phrases.](#)

Item 4.0 Reports

For discussion

4.1 Report from Executive Director of the Mental Health Board

Ms. Brooke gave an overview and discussed the upcoming awards event on June 25, 2019. She mentioned that there are 31 awardees.

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

Ms. Tesconi announced that the next Executive Committee meeting is Monday, July 8, 2019 at 4:00 PM at 1380 Howard Street, Mental Health Board office, Room 226.

4.3 Reports from Committees

[No reports.](#)

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.

Ms. Klain recognized Liza Murawski for her advocacy about conditions in supportive housing.

Ms. Drummond commended Liza Murawski for her bravery to speak up, to bring insights, and to shared lived experiences about systemic issues in supportive housing.

4.5 Report by members of the Board on their activities on behalf of the Board.

[No reports.](#)

4.6 New business - Suggestions for future agenda items to be referred to the Executive Committee.

Ms. Klain suggested a presentation from Gnosis Reiter.

4.7 Public comment.

Mr. Hiller suggested the Board look at the issue of Conservatorship.

5.0 Public Comment

Adjournment

The meeting was adjourned at 8:06 PM.



Behavioral Health Services - *Communications*

Director's Message

By Irene Sung, MD, Director of Behavioral Health Services



Irene Sung

Recently, I was honored to speak at a two-day conference called *Soul Work*, presented by the Eikenberg Institute. The conference was designed to work towards healing the invisible wounds of racial trauma and oppression. The theme of the conference was: *voicelessness*. I spoke from a personal perspective on how my voice had been silenced through conditioning – from my parents who were in fear of what would happen if I spoke up, to teachers who would rarely acknowledge my presence in class. This happened often to immigrant youth when I was growing up in Minnesota.

The conference was filled with clinicians and educators from across the country with the majority of them identifying as persons of color. I heard personal stories ranging from people who experienced blatant racism to those who experienced racism that was more subtle from implicit bias. It made me think of how these biases in our society today affect us and our clients. We must stand together and understand the impact of all the *isms* in our society that create trauma and stress; such as racism, sexism, classism, ableism, anti-Semitism, ageism and heterosexism. This understanding is very necessary so that we can effectively serve and be a voice for our clients – whose own voices are sometimes further silenced due to the stigma associated with mental illness and substance use.

Let us continue to serve as advocates and pillars of strength for our clients as we support them through their wellness and recovery journey. Thank you to everyone working in our behavioral health systems of care, helping our clients find their voices against the odds that exist in our society.

SFPDH Harm Reduction Training Institute Summer/Fall 2019 Training Calendar		
Date	Time	Workshop Topic
July 15	8:30am-12:30pm	Motivational Interviewing 201 (Half Day)
August 27	12:30pm-4:30pm	De-escalation and Conflict Management (Half Day)
September 10	8:30am-5:00pm	Foundations of Harm Reduction (morning) Boundaries and Disclosure (afternoon)
October 25	8:30am-12:30pm	Drugs 101 (Half Day)
November 14	8:30am-5:00pm	Harm Reduction Case Management (Full Day)
December 3	8:30am-12:30pm	Self-care and Resilience (Half Day)

All listed trainings will be held at 25 Van Ness Avenue, Room 610.
Please contact Hanna.Hjord@sfdph.org for any questions or registration information.

Staff and Program Spotlight – SF FIRST



Karen Lancaster

Karen Lancaster is the Program Director of the San Francisco Fully-Integrated Recovery Services Team (SF FIRST). She is a licensed Marriage and Family Therapist with a Bachelor and Master's Degree in Psychology. She has more than 17 years of experience providing intensive case management services to homeless individuals with co-occurring psychiatric, substance use and chronic medical conditions.

SF FIRST is a multi-disciplinary behavioral health program serving adult residents of San Francisco. SF FIRST works with a diverse group of highly-vulnerable individuals who have multiple medical, psychiatric, substance abuse and psychosocial difficulties. At enrollment, the clients are often homeless or marginally housed and are among the highest users of San Francisco's emergency medical and psychiatric services.

SF FIRST uses principles of wellness and recovery and a trauma-informed approach to meet the needs of clients who have typically experienced difficulty engaging in traditional systems of care. The team provides an array of individualized client-driven mental health services that emphasizes a partnership between client and provider focused on establishing and strengthening access to community supports and resources. SF FIRST services include: intensive case management, linkage to housing, payee services, peer support, crisis intervention, psychiatric services, harm reduction, integrated primary care, vocational services and community integration.

Newly Approved Conservatorship Program



On June 4th the San Francisco Board of Supervisors adopted [Senate Bill 1045](#), legislation that works to support some of our most vulnerable community members by allowing conservatorship in cases where an individual is unable to care for their basic needs, has both a serious mental illness and substance use disorder, and has a minimum of eight involuntary holds in the last 12 months. At the end of the conservatorship process they are guaranteed permanent supportive housing.

As is true of all Behavioral Health Services' programs, we look forward to working with our service providers, community members, advocates and city partners to ensure that the program is implemented in a thoughtful, client centered and trauma informed way. Our primary goal is to engage individuals in voluntary services and support them on their journey to recovery and wellness. The Assisted Outpatient Treatment program, including peer and clinical staff, will be working to do outreach and engage participants prior to conservatorship.

"With this compassionate step forward, more people in our city will benefit from care for persistent substance use and mental health issues," said Dr. Grant Colfax, Director of Health. "The SB 1045 conservatorship bill will help people who are suffering to interrupt the cycle of crisis by remaining in care, filling a crucial gap in our system that has allowed them to continually slip through the cracks. We know that recovery and wellness are possible, and we are gratified to have an additional tool to help some of our most vulnerable residents."

For more information contact Angelica Almeida at Angelica.Almeida@sfdph.org.

Behavioral Health Services - Equity Learning Series



BHS is proud to announce an ongoing forum called the *Equity Learning Series (ELS)*. This forum is presented by the BHS Office of Equity, Social Justice, and Multicultural Education in partnership with the DPH Black/African American Health Initiative (BAAHI). This monthly forum reviews articles, videos, or invites speakers in an effort to create a safe space to discuss barriers and opportunities to enhance the health of Blacks/African Americans. One of the major goals of the Equity Learning Series is to increase sensitivity among providers by recognizing the social determinants of health and its impact on Black/African Americans and to build empathy in the delivery of services.

Behavioral Health Services held its first ELS forum on June 4th with representation from various DPH programs. A rich discussion ensued and was focused on an article entitled *Improving the Health of African Americans in the USA: An overdue Opportunity for Social Justice*. The authors provided statistics about the current disparities that exist in Black/African American communities and ways that the healthcare workforce can begin to identify and address these needs. In particular, the article shared the impact of historical traumas and everyday discrimination which continues to be a major contributor to the morbidity challenges faced by this community. The forum ended with participants sharing some ideas on how DPH could address some of the equity needs of our Black/African American residents within San Francisco.

The next forum of the Equity Learning Series is on July 2, 2019 at 1380 Howard St., Room 424, San Francisco. An article entitled *Unhealthy Interactions: The Role of Stereotype Threat in Health Disparities*, will be the focus of the discussion. We encourage you to join us for this exciting opportunity to support improved health outcomes in our communities. For more information contact Jonathan Maddox at jonathan.maddox@sfdph.org.

Help Desk Training

i-Ability: Vocational IT Training Program

Program Benefits:

- Real-world healthcare information technology (IT) support training in a positive environment
- Paid, supportive, on-the-job training
- Preparation for office and IT-related jobs
- Resume assistance, job interview practice, and linkage to job placement services
- Develop transferable skills that will make you more competitive for future jobs
- Counseling services to assist in building self-care habits to prepare you for employment

rams
Richmond Area Multi-Services



Informational Session: July 2, 2019, 10 a.m. to 11:30 a.m.
1380 Howard Street, San Francisco, CA 94103
To learn more visit: www.hire-ability.org

Farewell to Gloria Wilder - Director of BHS Pharmacy

Narrated by Ana Gonzalez, DO, Acting Co-Chief Medical Officer



Gloria Wilder

At the end of June, BHS will say goodbye to one of my favorite people in the department, an action-oriented leader with laser-like focus and efficiency, the brains behind many of the initiatives that brought BHS into the 21st century. She also happens to be a very stylish girl. Gloria Wilder is the rarest kind of San Franciscan, a native, having grown up in North Beach amongst Italians and recently-arrived Chinese immigrants. She herself is the daughter of Chinese immigrants who understood the value of education as the key to success. So it's no surprise that Gloria finished Lowell High School in 2 ½ years and Berkeley undergrad and UCSF School of Pharmacy in just six years.

Gloria describes her job as Director of BHS Pharmacy as her dream job but she didn't always want to be a pharmacist. She entered university thinking she'd become a civil engineer. Fortunately for us, she wasn't enamored with physics, was advised against engineering (it was not female-friendly at the time), and encouraged to choose a career in pharmacy. She has no regrets about her choice.

After two decades working at Stanford, her mentor and the former Director of BHS Pharmacy, Mary Ann Sullivan, announced her plans to retire. Having grown weary of the long commute, she seized upon the opportunity and the rest is history. Since 2008, Gloria has transformed pharmacy's role in patient care, improving the safety and efficiency of the medication support services. She's accomplished much but is most proud of implementing e-prescribing and building a functional team who, she assures me, is well-equipped to continue the work without her.

As for retirement, she doesn't have a set plan or itinerary. She'd like to do more of everything she loves: swimming, traveling, and exploring her hometown, from her home base in North Beach - the same house she grew up in. Thank you, Gloria! We will miss you.

Read About It: BHS Staff Featured in UCSF Magazine

The May issue of UCSF's Magazine featured a story by DPH's own Richard Feng. Dr. Feng is a psychiatrist at Sunset Mental Health Center and also works as a consultant with DPH's primary care behavioral health program at Chinatown Health Center. In the article he shares some of his own story of growing up in San Francisco and his path to Community Psychiatry. His musings on the complexities of the work we do help to remind us of the importance of collaboration and commitment:

"Mental health is part of every major social issue of our time: housing affordability, criminal justice reform, economic inequality, you name it. We community psychiatrists have a chance to inject ourselves into discussions on countless consequential matters. That prospect simultaneously daunts me and inspires me on a daily basis."

Read the full article [here](#) or visit <https://medium.com/ucsf-magazine/mental-health-on-the-margins>

BHS Strategies for Transitional Age Youth Experiencing Homelessness

*One in five people experiencing homelessness in San Francisco is a youth under the age of 25
- Department of Homelessness & Supportive Housing, 2017 Point in Time Count Report*



Since launching in 2017, SFDPH Behavioral Health Services' (BHS) TAY System of Care (TAY SOC) has worked to expand access to behavioral health services for TAY experiencing homelessness, one of the TAY SOC priority populations. This is accomplished using a variety of service strategies informed by the TAY SOC's 2016-17 Needs Assessment and robust partnerships with city agencies such as the Department of

Homelessness and Supportive Housing (HSH) and the Department of Children, Youth and Families (DCYF).

The TAY SOC has developed service strategies in its effort to expand access to TAY experiencing homelessness. These strategies include: (i) Specialized Behavioral Health Services; (ii) TAY Step-Down Beds; (iii) Behavioral Health Services at Coordinated Entry Access Points; (iv) TAY Linkage Services; and (v) Housing for Youth Experiencing Homelessness.

The TAY SOC continues to work collaboratively with HSH to build a rich partnership, including monthly coordination meetings and TAY SOC participation in HSH youth initiatives such as Rising Up and the Youth Homelessness Demonstration Project.

In regard to workforce development, the TAY SOC, in partnership with the MHSA, is collaborating with Dr. Sal Nunez to pilot a 15-week Community Mental Health Academy for frontline staff in HSH-funded programs, which will cover foundational behavioral health skills including crisis intervention, motivational interviewing, and mental health first aid.

For more information contact either Heather Weisbrod at heather.weisbrod@sfdph.org, Kali Cheung at kali.cheung@sfdph.org, or Marlo Simmons at marlo.simmons@sfdph.org.

Mental Health Matters Day in Sacramento



On May 22, 2019, The Mental Health Association of San Francisco (MHA SF) organized a trip of MHA SF program participants and interested parties to Mental Health Matters Day in Sacramento. This annual celebration is put on by Mental Health America of California. It is an opportunity to hear prominent speakers from the field and for organizations to come together to share resources on mental health services. The day provides a space for folks impacted by mental health issues to come together as a community. MHA SF had 25 individuals spend the day in the sun participating in all the festivities.

For more information or if you are interested in attending next year, contact Meghan O'Brien at 415-421-2926 or meaghan@mentalhealthsf.org.

Imani: Reigniting Black Love and Black Joy



On May 31st and June 1st, the Rafiki Coalition for Health and Wellness hosted their 12th annual Black Health and Healing Summit in the Bayview for community members, community-based organizations, and the public health workforce. Over the course of the two days, over a hundred people of all ages engaged in dialogue with renowned speakers, including Dr. Joy DeGruy, author of "Post Traumatic Slave Syndrome: America's Legacy of Enduring Injury & Healing;" Dr. Brenda Wade, author and relationship expert; and Cheryl Davis, Executive Director of the San Francisco Human Rights Commission.

The Black Health and Healing Summit included speakers, panel discussions, performances, a community drumming circle, a film screening, and an outdoor vendor fair to promote dialogue and increase knowledge about health inequities in African Descent/Black communities.

The event was well received by community members. One person shared on social media, "I was at the annual event yesterday and as always, I am humbled by the outpouring of love and graciousness and a clear call to heal Black lives and communities."

Rafiki Coalition is a holistic community wellness organization dedicated to eliminating health disparities in Black and marginalized communities. For more information contact Vincent Fuqua at vincent.fuqua@sfdph.org, or Josephine Ayankoya at josephine.ayankoya@sfdph.org.

CYF Participates in Asian Pacific American Mental Health Day Event

May was Asian Pacific American Heritage Month, and RAMS held a youth-focused conference in San Francisco in celebration of Asian Pacific American Mental Health Day (May 10). RAMS invited Behavioral Health Services, Children, Youth & Families System of Care (CYF SOC) to present. Max Rocha, LCSW, Interim Director of CYF SOC, Farahnaz Farahmand, PhD, Assistant Director, and Ritchie Rubio, PhD, Director of Practice Improvement & Analytics, presented on the topic of "San Francisco County, Children, Youth, & Families Behavioral Health Services: Spotlight and Stories of API Children and Youth."



(L-R): Ritchie Rubio, Farahnaz Farahmand, and Max Rocha.

The presentation (1) described the range of services provided by CYF SOC; (2) identified the prevalence of API children and youth who engage in specialty mental health services; (3) identified services and initiatives CYF SOC have implemented to best support their access and engagement in services; and (4) shared the value of using API youth outcomes data to inform clinical assessment, formulation, and intervention. This was an excellent opportunity for CYF SOC to review and reflect on its Child and Adolescents Needs and Strengths (CANS) data which helps to tell the story of the behavioral health needs of API children and youth in San Francisco.

BHS Community Celebrates Mental Health Awareness Month

Many San Francisco communities made *May - Mental Health Awareness Month* a success by promoting mental health and wellness in an effort to reduce stigma and promote access throughout the City and County of San Francisco.



We want to thank all those San Francisco community organizations who held wellness, educational, and advocacy events, and who through tireless efforts managed to distribute almost 5,000 mental health educational and promotional items to the community during the month of May. These items included bilingual materials in Spanish, LGBT Pride resources, brochures, resource cards, and fun giveaways like t-shirts, hoodies, water bottles and tote bags. For more information, please contact MHSA@sfdph.org.

Spotlight on Mission Family Center's Participation at CARNAVAL

Since 2015 Mission Family Center (MFC) has selected CARNAVAL as their clinic's annual outreach event during the month of May in honor of Mental Health Awareness Month. MFC were fortunate to collaborate with staff from Foster Care Mental Health (FCMH) in the Health and Wellness Pavilion.



Each year MFC creates art projects to draw families in and then talk to them about matters around mental health, housing, immigration resources, etc. This year FCMH distributed *Wellness Tips* in English, Spanish and Chinese, which were a big hit. Thanks to the Mental Health Service Act (MHSA) program, especially Anthony Sarabia, for providing us with *Mental Health Month - Swag Kits*. The "Each Mind Matters/Sana Mente" bracelets, cards, ribbons, and magnets were very popular. We look forward to this outreach event every

year. Thanks to Jaime Arcila, Augusto Guerra, Ana Magaña, Mauricio Rodriguez, Craig Schiltz and Robán San Miguel from MFC and Angelique McGuire and Ikeda Brown from FCMH, for staffing our booth through rain and shine. For more information contact Robán San Miguel at roban.sanmiguel@sfdph.org.

San Francisco Behavioral Health Services - Fourth Annual Vocational Summit

On May 15, the 4th Annual Vocational Summit was held at the San Francisco (SF) Public Library, with over 60 attendees including BHS staff, consumers, peer leaders, representatives from California Department of Rehabilitation, and other vocational programs. The summit highlighted the successes of vocational co-op graduates representing all five programs. The vocational co-op programs include RAMS Hire-Ability, UCSF Citywide Employment Services, Caminar Jobs Plus, Occupational Training and Therapy Program, and PRC.



L – R: Anthony Sarabia and Teresa Yu

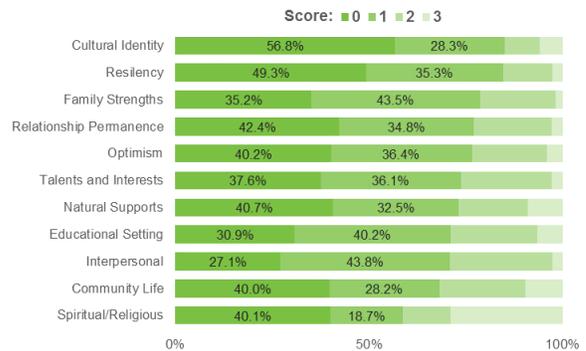
Thank you to Juan Ibarra, William Hill, Teresa Yu, Hannah Abarquez, and Anthony Sarabia, who helped plan and organize such a successful summit. For more information contact the William "Travis" Hill, at william.hill@sfdph.org.

Assessing Strengths Among Children and Youth

The Behavioral Health Services' Children, Youth, & Families System of Care (CYF SOC) uses the Child and Adolescent Needs and Strengths (CANS) assessment tool to supplement clinical decision making and to monitor the outcomes of services children and youth receive. The CYF SOC monitors outcomes through four CANS Needs domains: Behavioral/Emotional Needs; Traumatic Stress Symptoms; Impact on Functioning; and Risk Behaviors.

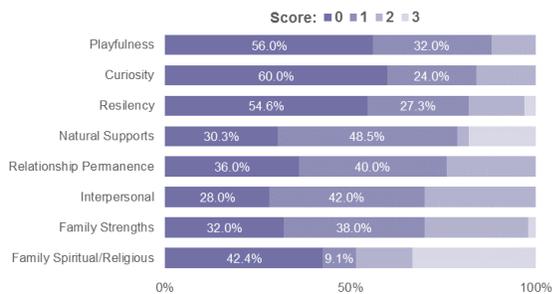
The CANS also assesses clients' strengths, and to underscore the importance of building client strengths, CYF has a new performance objective this year focused on maintaining and developing client strengths.

Figure 1. Strength Scores for Children/Youth Ages 6 through 20 Years (number of episodes = 1360)



CANS strengths items are rated on a scale of 0 to 3, as follows: 0 – denotes a "centerpiece" strength; 1 – denotes a "useful" strength; 2 – the strength must be built further to become useful; and 3 – the strength has not been identified for the client.

Figure 2: Strength Scores for Children/Youth Ages 0 through 5 Years (number of episodes = 50)



Children and youth can use "centerpiece" and "useful" strengths to help them overcome their difficulties. Providers can also help children/youth build strengths that are currently rated as a 2 or a 3 as part of the treatment plan.

QM's reports for the first three quarters of FY18/19 show that approximately three-quarters of children/youth strengths are rated as "centerpiece" or "useful." Among

children/youth ages 6 through 20, Cultural Identity and Resiliency are the most prominent centerpiece or useful strengths (Figure 1), and among children ages 0 through 5, Playfulness and Curiosity are the most prominent (Figure 2).

For more information contact Petra Jerman at petra.jerman@sfdph.org.

Job Opening

1824- Principle Administrative Analyst - Manager, Behavioral Health Services – Contracts Office

Department Public Health
Filing Deadline 6/28/2019
Salary \$109,148.00 - \$132,678.00/year
Job Type Permanent PBT
Employment Type Full-Time

For more info visit:

<https://www.jobapscloud.com/SF/sup/bulpreview.asp?R1=PBT&R2=1824&R3=094295>