

SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION



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Judith Klain, MPH
Gregory Ledbetter
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Harriette Stallworth Stevens, EdD
Richelle Slota, MA
Supervisor Catherine Stefani, JD, LLM
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Idell Wilson
Benny Wong, LCSW

MINUTES

Behavioral Health Commission Meeting
Wednesday, January 15, 2020
1380 Howard Street
5th Floor, Room 424
6:00 PM – 8:00 PM

COMMISSIONERS PRESENT: Marylyn Tesconi, MA, Co-Chair; Njon Sanders, Co-Chair; Carletta Jackson-Lane, JD, Vice-Chair; Judy Drummond, MA, Secretary; Marcus Dancer; Richelle Slota, MA; Idell Wilson; Harriette Stevens, EdD; Ulash Thakore-Dunlap, MFT, CLNC; MFT; Benny Wong, LCSW, Judith Klain, MPH, Gregory Ledbetter, Toni Parks, Arthur Curry and Andrew Mullen (aide to Supervisor Catherine Stefani).

COMMISSIONERS ON LEAVE: Terry Bohrer, RN, MSW

COMMISSIONERS ABSENT: None

OTHERS PRESENT: Helynna Brooke (Executive Director); Loy M. Proffitt, MBA, (Assistant Director); Hali Hammer, MD, Department of Public Health (DPH), Director of Ambulatory Care for the DPH and SFHN; Jessica Brown, MPH, MHSA Director; Teresa Yu, LMFT, MHSA Program Manager, Interim Director; Liza Murawski; Winship Hillier; Joe Sciarrillo, African Advocacy Network; Stephen Banuelos, and Kai West.

Commissioner Sanders called the meeting to order at **6:10 PM**.

Roll Call

Ms. Brooke called the roll.

ITEM 1.0 PRESENTATION: Mental Health SF: A plan to transform the mental health and substance use system for people most in need of services; Abigail Rivamonte-Mesa, aide to Supervisor Matt Haney.

For discussion

1.1 Presentation: Mental Health SF: A plan to transform the mental health and substance use system for people most in need of services; Abigail Rivamonte-Mesa, aide to Supervisor Matt Haney.

Ms. Rivamonte-Mesa was unable to attend the meeting. Dr. Hali Hammer agreed to give an overview of Mental Health SF.

Dr. Hammer shared that the Board of Supervisors and the Mayor came to an agreement about Mental Health SF. It represents a compromise between the Mayor's Urgent Care plan and Mental Health SF. Anton Nigussie Bland, MD is taking a leadership role in the planning. There have been a number of stakeholder meetings and workgroups to develop the plan. They took major components of Mental Health SF and the current Behavioral Health Plan. They will have a drug sobering center, and the expanding Hummingbird Center. This center will have respite beds. There is a Steering Committee with Domain Groups, and currently it has 20 projects.

They are looking at expanding Board and Care, but it is a challenge, because there are less available homes providing this service. The hours in the Behavioral Health Access Center will be expanding and will eventually be 24/7. They are also working on case flow management and workforce issues.

Nothing has been funded yet, except that Tipping Point has assisted with the expansion of Hummingbird, but ongoing operating expenses are still needed. There is a website called findtreatmentsf.org which is updated Monday – Friday. It shows where beds are available. Soon residential treatment beds will also be available. There is 99% reporting. There are 5 – 25 vacancies daily. For residential step down, there are very few beds. They are looking to shift detoxification beds to step down when needed.

The Implementation Body sits in April 2020. They will give a report to the BHC.

Ms. Jackson-Lane asked how money will be leveraged when programs are funded by different City Departments.

Dr. Hammer said that 237 people will be getting housing first. This is a collaboration with the Department of Homelessness and Supporting Housing. There are 4,000 people experiencing homelessness who have a serious mental illness and substance use disorders. They will be looking for high risk and high users of the system. There will be a shared priority group.

Jelani House is re-opening under the expansion of Homeless Prenatal.

Commissioner Klain: She asked about regular empty beds in programs.

Dr. Hammer said it is the Mayor's directive to fill the beds. They are working with agencies to make sure they know how to refer clients and getting an authorization within 24 hours.

Commissioner Parks asked about vacancies due to lack of staffing.

Dr. Hammer said that Healthrite 360 manages a large number of beds. There are staffing issues that are preventing them from expanding hours for intake. Currently it ends at 5:00 PM but they

want to expand it to evenings. There are two steps to the interview process and it is a challenging process. They want the possibility of an immediate overnight and doing the intake the next day.

Overall there will be a focus on recruitment and retention of staff, peer and intern programs.

Commissioner Curry inquired about what providers are available to support (Behavioral Health Access Center) BHAC referrals after hours? How will BHAC deal with probationers? And didn't Hummingbird have to cut back?

Dr. Hammer shared that Hummingbird is using some Adult Residential Facility (ARF) beds and have to move back in April 2020.

Commissioner Curry inquired about how the department addresses a drug sobering center that is packed, and people do not have other places to go to for their sobriety.

Dr. Hammer mentioned that there is a new Tenderloin center that is primarily for people using methodone. Nurses run the model with supporting backup staff through contractors.

Commissioner Curry stated that Bayview Hunter's Point (BVHP) communities need to know about treatment options. Communities in Tenderloin and Mission areas are aware.

Dr. Hammer shared that licensed clinicians, nurse practitioners, and psychiatrists wouldn't have to come to centers where clients are in order to do assessments and referrals. They could be assessed with an IPAD and referred.

Commissioner Drummond recommended that probationary forms during the intake process are too lengthy and need to be simplified.

Dr. Hammer responded that changing of forms is done at the State of California level.

Commissioner Slota asked how the department is addressing the need to increase salaries, because many programs are having difficulty recruiting and retaining staff.

Dr. Hammer stated that there is money in the budget for that.

Commissioner Tesconi stressed the importance of having clean injection and overdose prevention sites.

Mr. Mullen shared that Mayor Breed mentioned clean injection and overdose prevention sites, but they are not part of the Mental Health SF program.

1.2 Public Comment

Mr. Banuelos retired after decades of civil service work, stated that he has seen incremental improvement, but there are much more urgent needs for beds for people with mental health, substance use disorder, or both. He is hearing many of the same things that were going on when he was working with BHS, and at that time, he remembers beds being at a 90-bed capacity.

It seems to have gotten worse. One can change the system, but if someone is housed and getting treatment, but still shooting up on the street it is a problem. Some people may be disconnected from BHS. Maybe it would be good to be conserving more people.

Ms. Murawski shared that the salary range for outreach workers is between \$48,000 - \$54,000; There are about 86 outreach workers. However, in the most needed places for workers like the Tenderloin, there are only two outreach workers.

Helping people in the Tenderloin, she shared that residential buildings are not adequately maintained. The area is unsafe for women. She feels that people are forced to live in deplorable conditions. Furthermore, she believes navigational centers can determine who gets in and who does not; people do not have safe places to be.

ITEM 2.0 REPORT FROM BEHAVIORAL HEALTH SERVICES DIRECTOR

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 16 BHS staff joined the DPH Racial Equity Champions Program, and the program is a collaboration with the Office of Equity, Social Justice and Multicultural Education (OESM).

2.2 Public Comment

No comments

ITEM 3.0 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.

3.1 Mental Health Services Act Updates

Ms. Brown shared that MHSA finished the community engagement and planning process, and 25 meetings with various communities took place from March to December 2019.

MHSA has projects with Be Magic and Mo Magic. They also have a project with local law enforcement and Maternal Child and Prenatal Health, who are including fathers in the birth.

MHSA staff are preparing for the State of California audit from February 10 to February 12. The complete examination includes treatment plans, programs, site visits, housing sites with the Department of Homelessness and Supportive Housing, Full Service Partnership (FSP) clients and the implementation of administrative services. She hoped the review results in more guidance, but still wants to be innovative.

The Innovation component received 30 applications for ideas such as faith based, with peers in African American churches, Telehealth, outreach approaches to youth and transitional age youth (TAY).

The MHSA initiatives three year report will be ready in March 2020, and will be presented to the Behavioral Health Commission.

Regarding the No Place Like Home project, from the \$2 billion bond, San Francisco received \$27 million in December 2019 to build 500 units. The first round of 127 units will be for clients with severe mental illnesses, and homeless adults and older adults. New places are located at 1064 Mission and 1068 Mission, and they should be completed for permanent supportive housing in 2021.

Commissioner Tesconi inquired about having on-site case management at these new places.

Ms. Brown replied that the bond is only for construction. Contractors working with the county departments will provide supportive services.

Commissioner Drummond inquired about vacant units.

Commissioner Jackson-Lane inquired about the 30 applications for innovation program status.

Ms. Brown stated that the Executive Team will review the applications, and some innovative programs will get funding this fiscal year, and then others will be added. The March report will have comments from meetings and innovative projects.

She announced that Ms. Theresa Yu will be the MHSA Interim Director who will present the report to the BHC starting in March 2020.

Commissioner Dancer shared that he and Commissioner Stevens were on the California Association of Local Mental Health Boards/Commissions (CALMB/C) call, and innovation funding is about 5% of the MHSA.

Commissioner Stevens asked how are we supporting clients regarding stigma about mental illness in housing.

Ms. Brown responded that MHSA staff are working on helping clients move into housing, meeting with property managers, and case managers.

Commissioner Klain asked how the BHC could support in advocacy to the state.

Ms. Brown will follow up later with BHC commissioners.

Dr. Hammer suggested the California Institute of Mental Health (CIMH) and CALMB/C would be good to advocate to.

Commissioner Jackson-Lane mentioned that non-profits in Bayview Hunter's Point (BVHP) do not get as much access to mental health services. Information needs to get there.

3.2 Public Comment

Mr. West shared that a five-year-old kindergardner experiencing a crisis was responded to by the Oakland Police. As much as behavioral health can collaborate will help alleviate services down the line. He recommended school training in behavioral health education and community collaboration can be valuable.

Mr. Banuelos inquired about the intersection between MHSA and MHSF.

Ms. Brown stated that MHSA is working on a collaboration.

ITEM 4.0 ACTION ITEMS

For discussion and action.

4.1 Public comment

4.2 Proposed Resolution: Be it resolved that the minutes for the Behavioral Health Commission meeting of November 20, 2019 be approved as submitted.

Approved unanimously

4.3 Proposed Resolution: Be it resolved that the notes for the Behavioral Health Commission retreat, December 7, 2019, be approved as submitted.

Approved unanimously

Item 5.0 REPORTS

For discussion

5.1 Report from Executive Director of the Behavioral Health Commission

Ms. Brooke reported that the Nominating Committee just met, and Commissioners Drummond, Jackson-Lane, and Slota are interested in the co-chair.

5.2 Report from Co-Chairs of the Commission and the Executive Committee

Commissioner Sanders read his farewell speech.

Please see the attachment at the end of the minutes.

5.3 Reports from Committees

Commissioner Dancer offered his committee members the option to meet the third Monday or the third Thursday at 4:00 PM.

Commissioner Jackson-Lane informed Implementation committee members will meet at 3 PM on the first Monday.

5.4 People or Issues Highlighted by BHC: Suggestions of people and/or programs that the board believes should be acknowledged or highlighted by the Behavioral Health Commission
Commissioner Dancer informed that his committee

No suggestions

5.5 Report by members of the Commission on their activities on behalf of the Commission.

Commissioners shared about being at the inauguration of Mayor Breed, and meeting with Supervisors Walton and Mandelman.

Commissioner Jackson-Lane shared that the MLK celebration will be at Yerba Buena Center.

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

A resolution about the need for supportive housing residents to pay only 30% of their income.

5.7 Public comment.

6.0 PUBLIC COMMENT

Ms. Murawski encouraged the board to do more program reviews.

Adjournment

The meeting was adjourned 8:10 PM.

Mr. Sander's farewell speech

Loy: for keeping us prepared and organized

Helynna: for recruiting and developing commissioners and keeping us compliant and productive.

Marcus: for his humanity, positivity, and willingness to step up

Judy: for her passion for equity and relentless curiosity

Idell: for her consistent community support and showing up to everything

Ulash: for her infusion of genuine kindness and institutional knowledge in everything we touch

Carletta: for making a vocation of opening doors for individuals and families

Richelle: for her bravery and willingness to engage

Toni: for demonstrating the ability to self-advocate and serve the community at the same time

Harriette: for creating the connective tissue with the state and helping us benchmark our activity and its impact

Greg: for setting a high bar for community advocacy

Benny: for his laser focus on the consumer experience and championing the needs of residents

Judith: for helping shine a light on gaps in services

Arthur: for giving us insight into program efficacy from the inside

Marilyn: for her ability to cut to the chase and promote action leveraging the tools that we create and source

Andrew and Supervisor Stefani's office: for helping us align our efforts with those of the BOS

Terry: for her encyclopedic knowledge of potential opportunities and serving as our Yoda in all things

All past commissioners I've had the pleasure to serve with for leading the way

Our amazing members of the public and BHS staff and administrators who have inspired and motivated me much more than I could have imagined

It's been a pleasure to collaborate with you all

Behavioral Health Services - *Communications*

BHS and Partners Host Largest Peer and Family Conference in Twelve Years!

On December 13, the 12th Annual Peer and Family Conference was held at the Google Community Space. A variety of organizations partnered to coordinate the event, including the Behavioral Health Services (BHS) Division, Mental Health Services Act (MHSA), Richmond Area Multi-Service (RAMS), and the San Francisco Behavioral Health Commission.



The theme of this year's conference was *Inclusion, Connections, and Wellness*. With over 100 peers, their family members, support staff, and community partners participating, this was the largest Peer and Family Conference in the event's history!

The purpose of the event is to promote wellness and recovery within our community through education and encouragement. This celebration included wellness workshops, a holiday lunch, RAMS Christmas Carolers, and performances by the fabulous MGM Grand.

Welcoming remarks were given by MHSA Director, Jessica Brown. Afterwards, Natalie Ah Soon, API Mental Health Collaborative and Pacific Islander Wellness Initiative Program Manager, highlighted local efforts to render culturally responsive services.



A wellness workshop at the Peer and Family Conference



Michael C. Webb delivers keynote address

Lastly, keynote speaker Michael C. Webb, from Lift Every Voice and Speak, Peers Envisioning and Engaging in Recovery Services (PEERS), spoke of his lived experience overcoming homelessness, addiction, and mental health challenges. Webb emphasized that, "Peer to peer support occurs when people provide knowledge, experience, emotional, social, and practical help to each other."

For those interested in learning about the next Peer and Family Conference, please contact Kristalia Williams at kristalia.williams@sfdph.org.

Sixteen BHS Staff Accepted into DPH Racial Equity Champions Program



Congratulations to the sixteen Behavioral Health Services (BHS) staff who were recently accepted into the first cohort of the Department of Public Health (DPH)'s Racial Equity Champions Program! The program includes 80 total champions across all DPH divisions, who will complete a one-year term which includes learning and project implementation phases. The Racial Equity Champions program consists of dedicated staff time to increase our collective capacity to understand and address racial equity needs in DPH programs and services. BHS Racial Equity Champions will be supported by the Office of Equity, Social Justice, and Multicultural Education (OESM), led by Josephine Ayankoya, Interim OESM Director.

Please help us congratulate and welcome our BHS Racial Equity Champions to the program!

- Carla Colbert, Facilities and Operations
- Cindy Nolan, Mission Mental Health Clinic
- Crystal Holmes, Foster Care Mental Health
- Deandre Jurand, Behavioral Health Access Center
- Jamil Cromartie, Foster Care Mental Health
- Jenya Kauffman, Sunset Mental Health
- Lisa Mestayer, Transitional Age Youth Full Service Partnership
- Lucy Arellano, Quality Management
- Mario Leiva, Mission Mental Health Clinic
- Mary Senchyna, Ocean View-Merced-Ingleside Family Center
- Michael Huff, Forensic/Justice Involved Behavioral Health Services
- Michelle Roberts, Central City Older Adult Clinic
- Natalie Henry-Berry, South of Market Mental Health Clinic
- Orlando Tolbert, Mission Mental Health Clinic
- Reisel Berger, Pharmacy and Ocean View-Merced-Ingleside Family Center
- Ritchie Rubio, Children, Youth and Families System of Care

For more information on the Racial Equity Champions Program and/or the BHS Office of Equity, Social Justice and Multicultural Education (OESM), please contact Josephine Ayankoya at josephine.ayankoya@sfdph.org.

TAY System of Care Partners with City Agencies to Host Cross Systems Training



Panel discussion with community leaders and member of the TAY workforce in San Francisco

Last month, the Behavioral Health Services, Transitional Aged Youth (TAY) System of Care (SOC) co-hosted *Exhale – Self-Care and Wellness*. The two-and-a-half-hour event for TAY providers focused on managing the stress and strains of supporting youth during the holiday season.

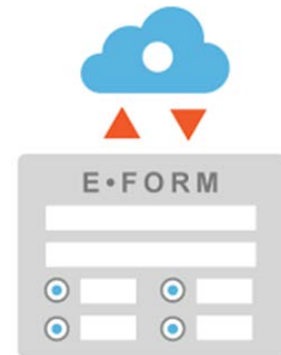
The inaugural event we implemented in partnership with the Department of Children, Youth and Families (DCYF), Adult Probation Department (APD), Human Services Agency (HSA), Office of Economic Workforce Development (OEWD), Our Children Our Families Council (OCOF), and

the Department of Homelessness and Supportive Housing (HSH). The collaborative training was designed to support and celebrate the work of TAY providers, while creating a space to build relationships across our City systems. Case managers, program coordinators, program directors, and transitional aged young adults participated in reflective sessions which taught tools for self-care. Additionally, a panel of young adults spoke to providers about their lived experiences with navigating and accessing services.

This is the first of many ongoing, cross-systems trainings designed to support staff and programs working with TAY. To learn more about this event or about the Behavioral Health TAY System of Care, please contact Kali Cheung at Kali.cheung@sfdph.org or Heather Weisbrod at Heather.Weisbrod@sfdph.org.

Digitizing Health Forms: The e-Forms Project

The e-Forms Project is part of the larger Electronic Health Record (EHR) project. The first phase of this project started in 2016 and was completed by January 2018. In this initial phase, providers were able to obtain signatures from the clients in electronic format for several forms: *Treatment Plan of Care*, *Medication Consent*, and *Consent to Release Protected Health Information (PHI)*. The project launched as a pilot at the Ocean View-Merced-Ingleside (OMI) Clinic. Additionally, more than 1,000 signature pads were deployed among the Adult/Older Adult; Children, Youth, and Families; and Substance Use Disorder Systems of Care to support the increased use of electronic health forms in BHS programs.



The second phase of the EHR Project (e-Forms Project) started in June 2017 and concluded in December 2018. Phase two involved the following forms: *Advance Beneficiary Notice of Non-coverage*, *Acknowledge of Receipt of Materials*, *Consent for Behavioral Services*, *Authorization to Release Billing Information*, *HIPAA Privacy Practices*, and *Uniform Method of Determining Ability to Pay (UMDAP)*. Each form was selected and reviewed by identified experts from Business Office of Contract Compliance, Medical Records, Compliance and Billing departments. Once reviewed, Information Technology (IT) Services converted each

file to an electronic format. By July 2018, South of Market Mental Health and Central City Older Adult Clinics started a pilot to test the forms.



Currently, each form is in the process of being translated into the City's five threshold languages: Tagalog, Chinese, Spanish, Russian, and Vietnamese. Once the e-forms are uploaded onto Avatar; clinics, prescribers, and clerks will be able to create a complete electronic chart for each client. The third phase will be to implement electronic charting for contracted, community-based organizations. Further integration with digital platforms will continue the push for an improved client experience and a more efficient work environment for the BHS workforce. For more information contact Giovanni Herrera at giovanni.herrera@sfdph.org.

Progress within BHS Vocational Services

Vocational Services has long aimed to affirm the power of resilience, recovery, and representation of people experiencing behavioral health challenges. BHS endeavors to uphold these values by providing clients with meaningful work opportunities that enrich their lives while supporting system needs. Richmond Area Multi-Service (RAMS) and the University of California, San Francisco (UCSF) Citywide collaborate with the BHS Division to offer the majority of BHS' peer employment opportunities.



Travis Hill, Vocational Programs Outreach Coordinator, conducting outreach at the May 2019 Vocational Co-op Summit

We are grateful for their partnership in integrating peer professionals with lived experiences throughout the behavioral health workforce. Below are some updates on vocational programs in the division.

- In Collaboration with the California Department of Rehabilitation (DOR), BHS created the Vocational Co-op Program, which focuses on supporting BHS clients in securing employment. Collaborating partners on this effort include, RAMS, UCSF Citywide, Caminar, and the Occupational Therapy Training Program (OTTP). In Fiscal Year 2018-2019, it was reported that 426 clients were served. Of the people served, 280 peers were placed in competitive employment as a result of participation in the Co-op
- In October 2019, Anthony Sarabia filled the Vocational Programs Specialist position on the MHSA team. In this capacity, he supports the tremendous amount of outreach conducted to promote vocational service opportunities in the greater San Francisco community



- In December 2019, it was reported that on average, the BHS Division conducts fourteen outreach efforts per month to increase community knowledge of vocational services. Such outreach took place in various locations such as outpatient sites, residential sites, clinics, and resource fairs. In alignment with DPH-wide goals of promoting health equity, much of BHS' outreach for vocational services prioritized underserved populations like those experiencing homelessness; identifying as lesbian, gay, bisexual, transgender, and/or queer (LGBTQ); and transitional aged youth

Moving forward, vocational service outreach will focus on contracted programs that do not use Avatar, as clients of these programs were previously ineligible for Vocational Co-op programming. Finally, efforts will be made to share vocational services as a resource for perspective clients not yet receiving mental health services through BHS, such as people connected to navigation centers. BHS looks forward to collaborating with our partners to sustain and strengthen a robust pipeline of peer professionals in our workforce.

To learn more, contact Juan Ibarra at juan.ibarra@sfdph.org.



MHSA Community Program Planning Summary for Fiscal Year 2019-2020

From March through December 2019, San Francisco's Mental Health Services Act (MHSA) team conducted nineteen Community Program Planning (CPP) meetings which were attended by over 430 community members, community-based organization representatives, and civil service staff from BHS, DPH, and other County departments.

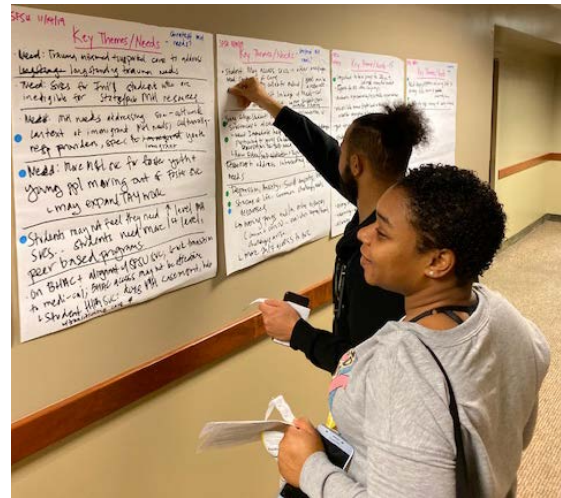
In these sessions, participants:

- identified some of the City's most vulnerable populations in need of mental health supports and services,
- shared feedback regarding training and workforce development needs, and
- gave input on proposed innovative ideas which could potentially be funded to address unmet mental health needs.



Josephine Ayankoya, Interim OESM Director, facilitating the December 2nd MHSA CPP meeting at the San Francisco Public Library

In 2019, MHSA made a concerted effort to strengthen the integration of community feedback into MHSA priorities. Given each of the nineteen meetings resulted in a plethora of suggestions, the MHSA team implemented a standard prioritization activity. At the conclusion of CPP meetings, attendees were asked to vote for what believed were the top mental health needs. Such efforts made the CPP meetings more interactive, and the CPP data more robust.



Participants from the November 14th SFSU CPP participate in prioritization activity

Communities identified as having high priority mental health needs included:

- Single fathers in recovery
- Undocumented communities
- Low-income communities
- Transgender women of color
- Individuals and families experiencing homelessness
- Communities facing mental health disparities who also lack of adequate linguistic and/or cultural representation among the BHS provider workforce
- Children and TAY traumatized from violence
- Mothers who lost partners and/or fathers of their children to violence
- Filipino youth with higher rates of suicidal ideation
- Older adults, including elders experiencing dementia and life-long trauma
- Veterans who have difficulties accessing services

When discussing the greatest mental health needs in the County, CPP participants consistently shared input on BHS training and workforce development needs. A variety of suggestions were shared, such as increasing use of student loan support for increased retention of the current behavioral health workforce.

Finally, MHSA was accepting Innovation project ideas in the fall and used the CPP meetings as a space to get feedback on submitted ideas. CPP attendees shared that the use of the entertainment-education technique, a method of promoting behavior change through entertainment, is a promising tool for culturally-responsive mental health promotion among youth, young adults, and people of color.

MHSA thanks the hundreds of people who participated in the 2019 CPPs meetings, and extends heartfelt gratitude to all partners who helped make the CPP meetings successful! For more information, contact MHSA@sfdph.org.

Upcoming Trauma Informed Systems 101 Trainings



The Trauma Informed Systems (TIS) 101 Training is a foundational three-and-a-half-hour training required for all Department of Public Health (DPH) staff. The TIS 101 Training introduces a shared language and understanding of trauma across our workforce. The training content explores the application of six principles of trauma-

informed systems: Understanding Stress and Trauma; Cultural Humility and Equity; Safety and Stability; Compassion and Dependability; Empowerment and Collaboration; and Resilience and Recovery. The Department of Public Health offers the training monthly at 25 Van Ness, Room 610. Upcoming trainings will be held on February 6, March 3, and April 14. To register, please visit the DPH TIS Eventbrite webpage, found [here](#).

Staffing Updates

Office of Equity, Social Justice, and Multicultural Education



The Office of Equity, Social Justice, and Multicultural Education (OESM) is pleased to announce that beginning on January 6, Michelle Meier joined the team as the new Training and Internship Manager. In this capacity, Michelle will lead the Training Unit of the OESM team in implementing a robust training calendar to meet BHS workforce needs. Michelle will also lead the BHS Internship Program, a staple pipeline program in the BHS Division which provides practicum and training opportunities for masters-level interns and trainees.

Michelle is replacing Jonathan Maddox, who left DPH in August to serve in the City of Berkeley. Michelle brings with her years of experience as the BHS Quality Improvement Coordinator, where she spearheaded various projects around quality improvement and compliance measures, along with preparing the BHS Systems of Care for State audits.

A debt of gratitude must be extended to Michael Barack, who stepped in to serve as the Interim Training Coordinator over the past five months. Michael remains a member of OESM's Training Unit as The Substance Use Disorder (SUD) Training Officer.

We look forward to working with Michelle in this capacity. Welcome, Michelle!

Upcoming Trainings

For registration and information, visit www.sfdph.org/training and click on Behavioral Health Services. Future trainings will be posted once registration is open.

January 2020	Time	Training	Location	Trainer	CE's Offered
Thursday 1/23	9:00 AM – 4:30 PM	Using the American Society of Addiction Medicine to Criteria to Re-Assess Clients	25 Van Ness, Room 610	Al Hasson, MSW	6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Wednesday 1/29	9:00 AM – 4:30 PM	Motivational Interviewing: Continuing the Journey	25 Van Ness, Room 610	Steven Malcolm Berg-Smith, MS	6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Friday 1/31	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 1 Foundations of Unlearning Racism	1290 Fillmore Street	Jason Seals	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
February 2020	Time	Training	Location	Trainer	CE's Offered

Behavioral Health Services - *Communications*

Friday 2/6	9:00 AM – 4:30 PM	Cultural Humility People, Principles, and Practices in Behavioral Health	1290 Fillmore Street	Leanna W. Lewis, LCSW	6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Thursday 2/27	1:00 PM – 4:15 PM	Unlearning Racism to Transform Behavioral Health Practice Part 2 The Politics of Black Identity	1290 Fillmore Street	Jason Seals and Deen Tyler	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
March 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 3/11	9:00 AM – 4:30 PM	Trauma-Sensitive Mindfulness	7 Hills Conference Center, San Francisco State University	David Treleaven, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Thursday 3/19	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 3 Women and Misogyny	1290 Fillmore Street	Dr. Ifa Flannery	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
Friday 3/27	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 4 Wellness and African American Culture	1290 Fillmore Street	Jason Seals	Pending 3 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
April 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 4/1	9:00 AM – 4:30 PM	Law and Ethics Update 2020	TBD	Daniel Taube, JD, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Monday 4/6	9:00 AM – 4:30 PM	Acceptance and Commitment Therapy (ACT) for Coping with Trauma	TBD	Robyn Walser, PhD	Pending 6 CE's (PhD. PsyD, LMFT, LCSW, LPCC)
Tuesday 4/28	1:00 PM – 4:15 PM	Unlearning Racism to Transform Behavioral Health Practice Part 5 Classism and Low-Income Communities	1290 Fillmore Street	Jason Seals	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)
May 2020	Time	Training	Location	Trainer	CE's Offered
Wednesday 5/20	9:30 AM – 12:45 PM	Unlearning Racism to Transform Behavioral Health Practice Part 6 Colorism and Anti- Blackness	1290 Fillmore Street	Jazz Hudson	3 CME/CE (MD/DO, Nurses, Pharm, PhD. PsyD, LMFT, LCSW, LPCC)

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