

# SAN FRANCISCO BEHAVIORAL HEALTH COMMISSION



**Mayor  
London N. Breed**

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Carletta Jackson-Lane, JD, Co- Chair  
Richelle Slota, MA, Co-Chair  
Balham Javier Vigil, Vice Chair  
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Arthur Curry  
Judith Klain, MPH  
Gregory Ledbetter  
Toni Parks  
Harriette Stallworth Stevens, EdD  
Ulash Thakore-Dunlap, MFT  
Idell Wilson

**AGENDA  
IMPLEMENTATION COMMITTEE MEETING  
BEHAVIORAL HEALTH COMMISSION  
TUESDAY APRIL 13, 2021  
3:00PM TO 4:00PM  
REMOTE BHC MEETING ZOOM**

Join Zoom Meeting

<https://zoom.us/j/96598294294> Meeting ID: 965 9829 4294  
One tap mobile +16699006833,,96598294294# US (San Jose)  
Dial by your location  
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Meeting ID: 965 9829 4294  
Find your local number: <https://zoom.us/u/adbcjX2CpI>

## **CALL TO ORDER**

Roll Call

Changes to the Agenda

Chair: Carletta Jackson-Lane, members Toni Parks, Rochelle Slota,  
Judith Klain, Idell Wilson

**1.0 BUSINESS** - For discussion and possible action.

- 1.1 Chair's report
- 1.2 Discussion
- 1.3 Public Comment

## **2.0 REVIEW OF IMPLEMENTATION COMMITTEE PROPOSED RESOLUTIONS**

For discussion and action - follow up on assignment of 5 other resolutions

### **2.1 PUBLIC COMMENT**

**2.2 PROPOSED RESOLUTION:** Be it resolved that the City & County of San Francisco provide additional Police Training & appropriate first responder services to people experiencing mental health crisis – status report

**2.3 PROPOSED RESOLUTION:** has already been approved and Resolution was read and given to Bart Police Officer Hofstein – follow up on delivery of commendation Officer Hofstein

### **3.0 COMMITTEE MEMBERS REPORTS**

For discussion and action

- 3.1 Members report on their research and actions
- 3.2 Public comment

### **4.0 NEXT ACTION ITEMS FOR COMMITTEE MEMBERS**

For discussion and action

- 4.1 Discussion developing follow up research, presenters to the committee and action item
- 4.3 Public Comment

### **ADJOURNMENT**

## DISABILITY ACCESS

The ADA is a civil rights law that protects people with different types of disabilities from discrimination in all aspects of social life. More specifically, Title II of the ADA requires that all programs offered through the state and local government such as the City and County of San Francisco must be accessible and usable to people with disabilities. The ADA and City policy require that people with disabilities have equal access to all City services, activities, and benefits. People with disabilities must have an equal opportunity to participate in the programs and services offered through the City and County of San Francisco. If you believe your rights under the ADA are violated, contact the ADA Coordinator.

Ordinance 90-10 added Section 2A.22.3 to the Administrative Code, which adopted a Citywide Americans with Disabilities Act Reasonable Modification Policy that requires City departments to: (1) provide notice to the public of the right to request reasonable modification; (2) respond promptly to such requests; (3) provide appropriate auxiliary aids and services to people with disabilities to ensure effective communication; and (4) train staff to respond to requests from the public for reasonable modification, and that requires the Mayor's Office on Disability to provide technical assistance to City department responding to requests from the public for reasonable modifications.

**Disability Accommodations:** To request assistive listening devices, real time captioning, sign language interpreters, readers, large print agendas or other accommodations, please contact the Commission Secretary at (415) 558-6309, or [commissions.secretary@sfgov.org](mailto:commissions.secretary@sfgov.org) at least 72 hours in advance of the hearing to help ensure availability.

**Language Assistance:** To request an interpreter for a specific item during the hearing, please contact the Commission Secretary at (415) 558-6309, or [commissions.secretary@sfgov.org](mailto:commissions.secretary@sfgov.org) at least 48 hours in advance of the hearing.

SPANISH: Agenda para la Comisión de Planificación. Si desea asistir a la audiencia, y quisiera obtener información en Español o solicitar un aparato para asistencia auditiva, llame al 415-558-6309. Por favor llame por lo menos 48 horas de anticipación a la audiencia.

CHINESE: 規劃委員會議程。聽證會上如需要語言協助或要求輔助設備，請致電415-558-6309。請在聽證會舉行之前的至少48個小時提出要求。

TAGALOG: Adyenda ng Komisyon ng Pagpapalano. Para sa tulong sa lengguwahe o para humiling ng Pantulong na Kagamitan para sa Pagdinig (headset), mangyari lamang na tumawag sa 415-558-6309. Mangyaring tumawag nang maaga (kung maaari ay 48 oras) bago sa araw ng Pagdinig.

RUSSIAN: Повестка дня Комиссии по планированию. За помощью переводчика или за вспомогательным слуховым устройством на время слушаний обращайтесь по номеру 415-558-6309. Запросы должны делаться минимум за 48 часов до начала слушания.

### **POLICY ON CELL PHONE, PAGERS, AND ELECTRONIC DEVICES**

The ringing of and use of cell phones, pagers, and similar sound-producing electronic devices are prohibited at this meeting. Please be advised that the Chair may order the removal from the meeting room of any person(s) responsible for the ringing or use of a cell phone, pager, or other similar sound-producing electronic devices.

### **KNOW YOUR RIGHTS UNDER THE SUNSHINE ORDINANCE**

Government's duty is to serve the public, reaching its decisions in full view of the public. Commissions, boards, councils and other agencies of the City and County exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance (Chapter 67 of the San Francisco Administrative Code) or to report a violation of the ordinance, contact:

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](mailto:sotf@sfgov.org)

Citizens interested in obtaining a free copy of the Sunshine Ordinance can request one from the Sunshine Ordinance Task Force or by printing Chapter 67 of the San Francisco Administrative Code from the internet at: [www.sfgov.org/sunshine](http://www.sfgov.org/sunshine)

To view Mental Health Board agendas and minutes, you may visit the MHB web page at: [www.sfgov.org/mental\\_health](http://www.sfgov.org/mental_health). You may also go to the Government Information Center at the Main Library at Larkin and Grove in the Civic Center. You may also get copies of these documents through the MHB office at 255-3474.

### **LOBBYIST REGISTRATION AND REPORTING REQUIREMENTS**

Individuals and entities that influence or attempt to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 30 Van Ness Avenue, Suite 3900, San Francisco, CA 94102; telephone (415) 581-2300; fax (415) 581-2317; website [www.sfgov.org/ethics](http://www.sfgov.org/ethics).

## WELFARE & INSTITUTIONS CODE

### ARTICLE II - POWERS AND DUTIES

The MHB shall:

1. Operate in accordance with state and local legislation pertaining to the MHB set forth in Welfare & Institutions Code Section 5604.2 and in S.F. Administrative Code, Section 15.4-1.

a) Review and evaluate the mental health needs, services, priorities, facilities, and special problems of the City and County of San Francisco.

b) Review any City and County agreements entered into pursuant to California Welfare and Institutions Code Section 5650.

c) Advise the Governing bodies, the Director of Public Health, the Director of Community Behavioral Health Services, and the Mayor, as to any aspect of the local mental health program.

d) Review and approve the procedures used to ensure citizen, consumer, family member, and professional involvement at all stages of the planning process.

e) Review the procedures used to ensure the involvement of interested members of the mental health community and the public in the development of the budget for Community Behavioral Health Services and report on its findings to the Board of Supervisors.

f) Submit an annual report to the Board of Supervisors on the needs and performance of the City and County's mental health system.

g) Review and make recommendations on applicants for the appointment of Director of Mental Health. The MHB shall be included in the selection process prior to the selection of a person to fill this position.

h) Review and comment on the City and County's performance outcome data and communicate its findings to the State Mental Health Commission. All such communications shall be reported to the Board of Supervisors, the Mayor, the Health Commission, the Director of Public Health, and the Director of Community Behavioral Health Services.

- i) Assess the impact of the Managed Care Mandate and the realignment of services from the State to the City and County on services delivered to consumers and/or the local community.

===== The six resolutions in 2019 =====

**RESOLUTION: INCREASE PERMANENT SUPPORTIVE HOUSING May 15, 2019**

**RESOLUTION: (MHB 01-2019)** The Mental Health Board urges the City and County of San Francisco to significantly increase permanent housing with supportive services for people with mental illness and substance use disorders.

WHEREAS, there are approximately 15,000 to 20,000 people, according to the Department of Homelessness and Supportive Housing, who are homeless, and receive services over the course of a

year in the City and County of San Francisco, and;

WHEREAS, this number, 15,000 – 20,000 people, does not include people who are currently incarcerated who may not have housing available when they are released from County Jail, and;

WHEREAS, approximately 40% of people with mental illness in jail are homeless or marginally housed,

and;

WHEREAS, multiple vulnerable populations in the City and County of San Francisco, who are incarcerated in the County Jail, and may be facing homelessness upon release, such as African Americans, who are 38% of those with mental illness in jail, while only 5% of the total population

of San Francisco, and;

WHEREAS, there are currently 7,770 units of permanent housing for people with mental illness and

substance use disorders, only some of which have supportive services available, and;

WHEREAS, of these 7,770 units there is very little turnover so that very few of the units become available for the 15 – 20,000 people currently homeless, and in need of supportive housing,

and;

WHEREAS, there has been a commendable increase in San Francisco in programs providing temporary

housing and intermediary services, such as the Navigation Centers, Hummingbird Place, and the Women’s Resource Center, and;

WHEREAS, the temporary housing is a necessity, but only a temporary solution to the housing and

supportive services needs of people with mental illness and substance use disorders.

THEREFORE, BE IT RESOLVED that the Mental Health Board urges the City and County of San Francisco

to significantly increase permanent housing with supportive services for people with mental illness and substance use disorders.

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**RESOLUTION: SUPPORTIVE HOUSING OVERSIGHT June 19, 2019**

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.

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**TRANSITIONAL AGE YOUTH (TAY) RESOLUTION June 19, 2019**

RESOLUTION: (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.

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**AFRICAN AMERICAN HEALTH AND WELLNESS June 19, 2019**

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 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.

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**SUBSTANCE USE DISORDER RESOLUTION June 19, 2019**

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 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.



**BUDGET RESOLUTION June 19, 2019**

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.

===== The six resolutions in 2019 =====

San Francisco, CA 94103