Welcome and Agenda Review

Angelica Almeida, Ph.D. opened up the meeting, provided an overview of the planned agenda, reviewed the goal and charge of the working group, and mentioned the upcoming report due in January 2020. She also noted that the working group meetings in 2020 would be in a different location, at 25 Van Ness Avenue, Room 610.

Presentation on the Office of Conservatorship Services

Jill Nielsen and Jason Finau, from the Department of Disability and Aging Services, provided an overview of the department including its structure and available existing services. The in-home supportive services constitute the largest of the programs, while the Office of the Public Conservator is one the smaller programs. Mr. Finau gave a baseline overview of key terminology including LPS, mental health conservatorships, and public guardian, and explained how the office of the Public Conservator has to date been focused on LPS conservatorships and the concept of grave disability, the inability to provide for own basic needs due to mental illness or alcoholism.

Jason Finau provided an overview of the LPS conservatorship process. Jill Nielsen and Jason Finau then shared the following in response to questions from the working group:

- The determination of the whether or not inability to get shelter is due to a mental illness is made by the treating psychiatrist in the referral process;

- Temporary conservatorship lasts for 30 days, as part of the public conservator investigation, but it can be extended up to 6 months if necessary;

- If an individual does not show up for their court date, the conservatorship process will be delayed until they are present (unless they have waived that right);

- Baseline level of grave disability is determined after institutionalized sobriety.

Jill Nielsen then gave a summary of key data points on conservatorship-related services: there are a total of 617 individuals under conservatorship, with 46% in locked psychiatric facilities and 38% in community settings. Ms. Nielsen shared the following in response to workgroup thoughts and questions:
• Almost the entire LPS caseload is individuals who are SSI-eligible or on SSI;
• Any program that is not locked is considered a community program (e.g., single room occupancy units, hotels with services);
• The Department of Disability and Aging Services (DAS) is generally able to process conservatorships while individuals are in jail, with the goal of moving them out of jail as quickly as possible;
• Individuals conserved in community settings sometimes fall into homelessness and are unable to be located to support them in a community based setting, in which case DAS works closely with the SFPD Community Intervention Team to locate them.

Overview of Assisted Outpatient Treatment

Dr. Almeida and Dr. Chris Wright gave an overview of Assisted Outpatient Treatment (AOT), a court ordered treatment program for individuals with severe mental illness. AOT was designed to assist individuals with severe and persistent mental illness who are not engaged in treatment, are deteriorating, and have a history of poor treatment compliance, with a goal of reducing hospitalization, incarceration, and victimization. Drs. Almeida and Wright outlined the primary eligibility criteria for an individual to be considered for the program, and then discussed the role of AOT in the Housing Conservatorship process. The AOT care team is written into the Health Code to engage individuals at 3 separate times: after referral, after eligibility is confirmed, and immediately before court hearing.

Overview of Housing Conservatorship Program Flow

Dr. Almeida gave an overview of the Housing Conservatorship program flow, which was followed by discussion and questions among the workgroup. Main points are summarized below:

• The working group raised questions on the idea of how to accurately track 5150s, and how resources would be made available to put clients in housing and serve them effectively;
• Engagement in voluntary treatment is individualized and may include case management, employment interests, and assessment for coordinated entry;
• There was a discussion among the workgroup about the importance of considering Dr. Anton Nigusse Bland’s mental health reform plans as the group moves forward, to reduce the amount of overlap and duplication;
• The 6-month assessment period for support from the Department of Homelessness and Supportive Housing (HSH) can be waived for individuals under Housing Conservatorship, and these individuals will be considered a priority;
• There was a point raised in the discussion about the desire for a fuller presentation on mental health reform and on the coordinated entry process in San Francisco;
• Multiple workgroup members raised the idea that setting up a program including permanent supportive housing has a high risk of failure due to limited resources.

Evaluation Update

Rami Arafah, Ph.D., from Harder+Company Community Research, gave a summary of the Health Code evaluation requirements, and explained that the preliminary report due to the Mayor’s office and the Board
of Supervisors in January 2020 would present data required, to the extent possible. For the preliminary report, the focus will be on baseline population-level 5150 data from FY 2018-19.

Dr. Arafah reflected on how the evaluation report could include high level narrative trends on what those interactions typically look like. The primary data sources for the evaluation’s baseline count of 5150s include SFDPH, SFPD, Zuckerberg SF General Hospital, and possibly other regional hospitals. There was a question raised about how data from hospitals such as the VA and Kaiser, where many individuals under 5150 are taken, would be obtained, which was followed by a comment about plans to set up a related conversation with the Hospital Council of Northern and Central California. Finally, there was a comment in the workgroup about exploring the possibility of holding an additional public meeting before the report submission in early January, to review available findings. Dr. Almeida explained that data will be shared at the December meeting and report drafting will be done electronically with workgroup members.

**Public comments**

Following the agenda items above, one member of the public asked the workgroup to consider that Mental Health SF has come to a legislative agreement, and to give the existing systems a chance to work before adding another system.

**Closing and Next Steps**

The next meeting of the Housing Conservatorship Workgroup will be on Monday, December 16th, 2019 from 12:30pm-2pm.