An Overview of Behavioral Health Services

**MISSION**

Maximize clients’ recovery & wellness and potential for healthy and meaningful lives in their communities

**VISION**

A behavioral health systems of care that is

- welcoming,
- culturally and linguistically competent,
- gender responsive,
- integrated and comprehensive

Timely access to treatment in which “Any Door is the Right Door” and individuals and families with behavioral health issues have medical homes.

**OVERARCHING GOAL**

Clients thriving in their natural environments
## Number of Clients Served FY 2015-2016

<table>
<thead>
<tr>
<th>BHS Mental Health Clients Served</th>
<th>Number of Clients Served</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provider</strong></td>
<td></td>
</tr>
<tr>
<td>Contract Providers</td>
<td>16,659</td>
</tr>
<tr>
<td>Civil Service Providers (including ZSFG)</td>
<td>9,492</td>
</tr>
<tr>
<td><strong>TOTAL UNDUPLICATED CLIENTS</strong></td>
<td>23,388</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUD Clients Served</th>
<th>Unduplicated Client Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contracted Providers</td>
<td>7,395</td>
</tr>
<tr>
<td>Civil Services Providers</td>
<td>NA</td>
</tr>
</tbody>
</table>
Gender
FY 2015-16

Mental Health: 56% Female, 44% Male
Substance Use: 68% Male, 32% Female
Ethnicity of Mental Health and SUD Clients

CYF Ethnicity FY 15-16

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>FY 2015-16</th>
<th>N = 4,599</th>
</tr>
</thead>
<tbody>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Multi-ethnic</td>
<td>3%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>30%</td>
<td></td>
</tr>
<tr>
<td>Latino/a</td>
<td>94%</td>
<td></td>
</tr>
<tr>
<td>African-American/Black</td>
<td>31%</td>
<td></td>
</tr>
</tbody>
</table>

Adult Ethnicity FY 15-16

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>FY 2015-16</th>
<th>N = 23,841</th>
</tr>
</thead>
<tbody>
<tr>
<td>Native American</td>
<td>1%</td>
<td></td>
</tr>
<tr>
<td>Multi-ethnic</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Latino/a</td>
<td>14%</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>19%</td>
<td></td>
</tr>
<tr>
<td>African-American/Black</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>38%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>22%</td>
<td></td>
</tr>
</tbody>
</table>

SF HEALTH NETWORK
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
Behavioral Health Services

Prevention, Early Intervention, Self-Help, Education and Assessment

Voluntary Services: outpatient (case management, social rehabilitation, Full Service Partnerships, Intensive Case Management, vocational rehabilitation, day treatment, substance use disorder services, medication support [SUD and MH]), supportive housing, acute diversion units, residential services, crisis residential treatment, residential treatment, wellness centers, collaborative court and psychiatric respite.

Crisis Programs: Comprehensive Crisis, Community Outpatient Crisis, Crisis Stabilization Units (adult and youth).

Psychiatric Emergency Services, Acute Psychiatric Hospitalization

Institutes of Mental Disease

State Hospitals

Lowest Threshold
Lowest Cost
Least Restrictive

Highest Threshold
Highest Cost
Most Restrictive
Mental Health Client Density and Program Location 2016

Number served: 22944
Geocoded: 18041
Homeless: 3217
No address: 1686
Substance Use Client Density and Program Location 2016

Number served: 6952
Geocoded: 4514
Homeless: 2173
No address: 265
PATIENTS
MENTAL HEALTH
-Adults
-Children
+
SUBSTANCE USE DISORDER (SUD)

ACCESS POINTS

24 hr Phone Line
Walk into BH Clinic/BHAC
Referrals from Primary Care
Referrals from Schools
Referrals from Foster Care
Referrals from Criminal Justice
Comprehensive Mobile Crisis
Hospitalizations

Behavioral Health Services
Mental Health Treatment Pathway - ADULT

**ACCESS POINTS**
- 24-hr phone line
- Walk in: BH/BHAC
- Primary Care
- Criminal Justice

BH Clinic Appointment SAME DAY ACCESS

**ASSESSMENT**

**TREATMENT PLAN**
- Medication Support
- MH treatment
- Referral to non-specialty mental health unit
- No treatment indicated

**Services**
- Psychosocial support
- Vocational services
- Court appearance assistance
- Case management
- ... AND MANY MORE OPTIONS

**Level of Care Considerations**
1. IS THIS PERSON SAFE?
2. Is this person housed?
3. Does this person require residential treatment?
4. Is this person in need of a psychiatric assessment?
5. Which need is primary – substance abuse or mental health treatment?
Family calls Mobile Crisis re: adult son

Mobile Crisis assesses, writes 5150, transports to PES

PES finds individual is willing to enter Dore Crisis Stabilization voluntarily, transferred to Dore

Client enters Dore Acute Diversion Unit (ADU) (max 2 week stay)

Client discharged to Intensive Case Management program

After ICM services, client steps down to Outpatient care. Because he had difficulty meeting his primary care needs, he was referred to a Behavioral Health Home

In addition, he received referrals for vocational training needs and peer wellness groups.

When treatment goals are met and meds are stabilized, client steps down to primary care non-specialty MH services

Referrals to ICM programs authorized by BHS ICM Committee

Pathway from Mental Health Crisis to Recovery
Mental Health Treatment Pathway - CYF

**ACCESS POINTS**
- 24-hr phone line
- Walk in: BH/BHAC
- Primary Care
- Schools
- Foster Care
- Criminal Justice
- Mobile Crisis
- Hospital

**Level of Care Considerations**
1. **Is this person safe?**
2. **Who is involved in the child's life?** - Link to support network
3. Does the child have a stable living environment?
4. Which need is primary - substance abuse or mental health treatment?

**TREATMENT PLAN**
- Medication Support
- MH treatment
- No treatment indicated
- Referral to non-specialty mental health unit

**Support Network**
- Parents (including foster parent)
- Teachers
- Relatives

**Services**
- Psychosocial support
- Family Systems work
- Court appearance assistance
- Case management
- Pediatrics
... AND MANY MORE OPTIONS
High school girl withdrawn, not completing homework

Teacher refers her to the school’s Wellness Center

She receives weekly MH counselling at the Wellness Center; after several weeks, she is referred for Specialty MH services

WC counselor assists her in connecting with Outpatient MH program

She receives weekly counseling and medication for depression; linkage to other support services

After 6 months, she is assessed to determine if more service are needed. If depression has improved, step down to Primary Care for med management

Pathway from School to Mental Health Care
Substance Use Disorder (SUD) Treatment Pathway - ADULT

ACCESS POINTS
- 24-hr phone line
- Walk in: SUD program
- Primary Care
- Criminal Justice
- Comprehensive Mobile Crisis

BH Clinic Appointment SAME DAY ASSESSMENT

ASSESSMENT

TREATMENT PLAN
- Medication Support
- SUD treatment
- Residential
- Outpatient
- No treatment indicated
- Referral to mental health unit
- Referral to MD

ASl (Addiction Severity Index)
Assessment Tool
1. Is this person safe?
2. Does this person require detox? If so, should it be social or medically supported?
3. Is this person housed?
4. Would this person benefit more from residential or outpatient treatment?
5. Does this person need medication assistance treatment?
Note: referral to MD

Services
- Psychosocial support
- Address other mental health issues
- Court appearance assistance
- Housing assistance
... And MANY MORE OPTIONS
Substance Use Disorder Treatment Access: Residential Care Example

John has been homeless for 2 years, referred to BH by Homeless Outreach Team (HOT)

TAP completes screening and ASAM level of care assessment; residential treatment for alcohol use disorder is needed

Alcohol medication prescribed and filled at CBHS on-site pharmacy

John is referred to Alcohol Detox for 5 day stay

While John is detoxing, the residential treatment program is preparing for his enrollment

Step down to Outpatient Care (with supportive services)

Housing after Residential discharge

SRO housing

Recovery-Track Housing on Treasure Island (HR360)