

**HEALTH COMMISSION
RESOLUTION NO. 14-6**

**RESOLUTION SUPPORTING THE FRAMING OF CARE TASK FORCE RECOMMENDATIONS AND SFDPH'S
PROPOSED APPROACH TO PRIORITIZED RECOMMENDATIONS**

WHEREAS, The mission of the San Francisco Department of Public Health (SFDPH) is to promote and protect the health of all San Franciscans; and

WHEREAS, In his 2014 State of the City Address, Mayor Edwin M. Lee observed that “While we have the strongest social safety net in the nation, we still have far...too many people unable to make the choices they need to save their own lives because of severe mental health and substance abuse problems”; and

WHEREAS, Mayor Lee tasked SFDPH with convening a community process to determine how to engage and maintain in appropriate behavioral health treatment adults who have a serious mental illness – and often a co-occurring substance use disorder – that current programs have failed to successfully treat or adequately engage; and

WHEREAS, SFDPH convened the CARE (Contact ▪ Assess ▪ Recover ▪ Ensure Success) Task Force, a 21-member advisory body that engaged in four public meetings between March and May 2014 to develop a range of policy and programmatic recommendations designed to address gaps in San Francisco’s current behavioral health system of care and better serve those residents with the most challenging behavioral health needs; and

WHEREAS, The CARE Task Force, in alignment with SFDPH practice and the federal Affordable Care Act (ACA), approached discussion and the development of recommendations with a focus on the wellness and recovery model of care, which upholds the ideal that individuals can overcome serious mental illness and live more independent and productive lives; and

WHEREAS, The CARE Task Force, embracing the wellness and recovery framework, strove to put forth recommendations that would better enable the CARE population to engage and participate in tailored, appropriate treatment in the least restrictive setting possible; and

WHEREAS, The CARE Task Force concluded its work by advancing for SFDPH and Mayor Lee’s consideration a series of policy and programmatic recommendations framed as follows:

- Family Member Involvement and Support: Expand opportunities for family members to connect loved ones to care; be involved, as appropriate, in treatment; and receive education and support.
- Peer Specialists: Increase the use of peer specialists to engage members of the CARE population and retain them in appropriate treatment.
- Policy Change: Advocate for policy change to ensure engagement, recovery, and success for the CARE population.
- Create New and Expand Existing Programs: Create new and expand existing programs to ensure that individuals are adequately engaged and placed in the least restrictive, most appropriate levels of care that promote recovery, skill-building, and independent living.
- Health Information Sharing and Coordination: Facilitate the sharing of information to better engage and treat the CARE population using a multidisciplinary, collaborative, and coordinated approach; and

WHEREAS, SFDPH prioritized the following CARE Task Force recommendations for departmental action based on their feasibility and benefit to the CARE population:

- Family Member Involvement and Support

- Enhance existing behavioral health programming by increasing opportunities for family involvement, psychosocial support, and education during the engagement and treatment process per San Mateo’s Family Assistance and Support Team and San Diego’s In-Home Outreach Team.
- Peer Specialists
 - Implement a psychiatric respite program designed to engage the pre-treatment population through the use of peer specialists and mental health professionals.
 - Increase the use and reach of peer specialists in engagement and treatment.
- Create New and Expand Existing Programs
 - Increase the number of intensive case management/full service partnership slots to support more clients in outpatient settings.
 - Expand the Community Independence Placement Project.
 - Fund the expansion and development of new City contracts to increase the number of available safe, stable housing options for members of the CARE population.
- Health Information Sharing and Collaboration
 - Advocate to amend existing law to facilitate more comprehensive and timely health information sharing among providers serving the CARE population to ensure care continuity and coordination.
 - Explore the implementation of a health information exchange (HIE) in San Francisco.
 - Pursue a multidisciplinary, multi-departmental collaborative pilot project that includes clients and family members and utilized informed patient consent to enable providers to share information to better engage clients and coordinate care planning; now

THEREFORE BE IT RESOLVED, That the San Francisco Health Commission commends the CARE Task Force for its wellness and recovery-oriented discussion and thoughtful work on behalf of the CARE population and the broader City and County of San Francisco; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports the advancement of appropriate behavioral health treatment options that serve individuals in the least restrictive setting possible; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports the framing of CARE Task Force recommendations; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports SFDPH prioritization of – and proposed approach to – CARE Task Force recommendations; and be it

FURTHER RESOLVED, That the San Francisco Health Commission requests that SFDPH consider additional CARE Task Force recommendations, as appropriate, when planning for future behavioral health services in alignment with the ACA.

I hereby certify that the San Francisco Health Commission at its meeting of May 20, 2014 adopted the foregoing resolution.

Mark Morewitz
Executive Secretary to the Health Commission