



Mayor Edwin M. Lee

Behavioral Health Services Monthly Director's Report March 2017

1. SUBSTANCE USE SERVICES

Substance Use Services received the long-awaited State-County contract for the Drug Medi-Cal/Organized Delivery System (DMC/ODS). It's now on its way to the Board of Supervisors for their review and approval. The DMC/ODS is part of a State demonstration waiver to create an evidence-based, seamless delivery system for Medi-Cal beneficiaries. Thanks to all of our contracting partners who have worked with us over the last three years to become Drug Medi-Cal certified or re-certified in preparation for this 'upgrade' of our comprehensive substance use services.

2. SAN FRANCISCO TRANSITIONAL AGE YOUTH SYSTEM OF CARE

In recognition of the need to improve coordination of behavioral health services for Transitional Age Youth (TAY 16-25), the TAY Behavioral Health Services (BHS) leadership team is leading a service mapping, stakeholder engagement, and strategic planning process, the goal of which is to develop and support a behavioral health system of care designed to meet the unique needs of young adults and their families across San Francisco. This process builds on the foundational work of the 2007 Mayor's Transitional Age Youth Task Force.

Under the direction of BHS Deputy Director Marlo Simmons, MPH, the SF TAY BHS System of Care leadership team includes Medical Director Robin Randall, MD; Clinical Manager Heather Weisbrod, LCSW; and Triage & Linkage Supervisor Maureen Edwards, LCSW. The team is also receiving planning support from Alicia St. Andrews, MPH.

The BHS TAY System of Care will build on existing TAY-focused behavioral health services and will work in close collaboration with new and long standing TAY advocates, community based organizations, and other city departments. Key participating service systems include mental health, substance use, primary health care, foster care, juvenile/criminal justice, housing, education, and employment programs.

Over 60 key stakeholders from more than 20 organizations and initiatives have participated in informational interviews and initial planning sessions with the BHS TAY System of Care leadership team to date. In follow up, all participating stakeholders will be invited to complete an online survey for further mapping of capacities and needs across available TAY services, providers, referrals, and supports.

Survey results will help to inform next steps in the development and implementation of the SF TAY System of Care, which includes a spectrum of critical direct services as well as the coordination and capacity building necessary for successful service delivery. For more information please contact: Alicia St Andrews (alicia.st-andrews@sfdph.org) or Heather Weisbrod (heather.weisbrod@sfdph.org).

3. QUALITY MANAGEMENT (QM)

Adult Needs and Strengths Assessment Data Reflection in the Adult and Older Adult System of Care

BHS has been working with clinics throughout the City in order to facilitate discussions on routinely collected **Adults Needs and Strengths Assessment (ANSA)** data and how it can inform – and be informed by – clinical care. The ANSA assessment is a tool that providers fill out to profile the needs and strengths of clients. Tom Bleecker, PhD (QM’s Assistant Director of Research and Evaluation/ Psychologist), Gloria Frederico, LMFT (Adult/Older Adult System of Care Program Manager), Shamsi Soltani, MPH (QM Epidemiologist), and Stephanie Nguyen, MPH (QM Health Care Analyst) have been visiting BHS clinics to discuss the Traffic Light Report. This report allows providers to compare two ANSAs for a client on one page, and easily track areas that have changed over time. Meetings have already taken place with clinical staff at Southeast Mission Geriatric, Central City Older Adult, Mission ACT, and ZSFG’s Emergency Department Case Management. Thanks to the 23 clinics who volunteered to do an ANSA Data Reflection so far!

ANSA Support Documents

Quality Management has updated our website to include “ANSA Support Documents.” Three new documents we would like to highlight are 1) BHS ANSA/CANS Certification Instructions, 2) Avatar Bulletin: Accessing ANSA Outcomes Treatment Planning Report, 3) Avatar Bulletin: Accessing ANSA Traffic Light Report. Quality Management will continue to update the website to post documents regarding the ANSA. We are also currently working on updating the ANSA FAQ list with the help of BHS’ clinics. ANSA Support documents as well as other QM reports can be found at:

<https://www.sfdph.org/dph/comupg/oservices/mentalHlth/CBHS/>

Behavioral Health Services Quality Management’s Clinical Documentation Improvement Program

Clinical documentation continues to be a topic of interest and activity for BHS during this transition from the Winter to Spring season. Over 300 managers and supervisors received documentation training during October/November 2016, and now we are offering workshops (“Doc Talk Workshops”) for any staff member who needs additional practice, support and coaching. In addition, we are happy to announce that we have established a website that contains our basic tools, training curricula and important source documents (available at:

<https://www.sfdph.org/dph/comupg/oservices/mentalHlth/CBHS/CBHSQualityMgmt.asp>).

BHS QM’s Clinical Documentation Improvement Program (CDIP) provides training, consultation and coaching to behavioral health staff and organizations. CDIP works closely with other DPH/BHS units to improve clinical and administrative documentation, including: System of Care, Billing-Fiscal, Information Technology, Compliance, Business Office of Contract Compliance and Quality Management. The staff contact for CDIP is Joseph Turner, PhD (joe.turner@sfdph.org).

4. ADULT/OLDER ADULT SYSTEM OF CARE VOCATIONAL SERVICES

BHS Adult/Older Adult System of Care and Vocational Services central administration staff re-examined with providers the annual BHS performance objective that requires adult mental health outpatient programs to enroll a percentage of previously unenrolled consumers into a “vocational related meaningful activity”. Some programs have had challenges in meeting this objective, therefore it was timely to discuss the value this vocational related program objective held for the system of care, and understand the reasons for any difficulties in achieving the goal.

At the March 2017 monthly meeting, BHS Adult/Older Adult System of Care providers upheld support for one of the critical dimensions that support a life in recovery & the path to wellness of individuals with serious mental illness – developing a purposeful life. In the working definition of recovery by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), purpose in life is characterized by “meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society”.

Recognizing that there are many different pathways to recovery and each individual determines one’s own way, the BHS providers raised the importance of crediting consumers for activities they engage in that are not necessarily just ‘vocational related’ but are meaningful, represent personal growth & efficacy, connection to others and contribution to the community. These may then include the adoption of non-vocational related meaningful activities by the consumer.

Aside from this broadening of the definition of success in consumers’ endeavors toward meaningful lives, suggestions were also put forward by the providers to improve the program performance objective in other ways, including in:

- Acknowledging the continued success of BHS programs in helping consumers maintain their involvement in meaningful activities, beyond the initial enrollment of consumers into a vocational related activity.
- Acknowledging the programs’ focus earlier in treatment on helping consumers find meaningful *niches* in the community, beyond the enrollment into vocational activity of consumers who have been in the program for over a year.

Brainstorming was also done on how to incorporate the tabulating of consumers’ successes into the regular documentation workflow, so that the recording of consumers’ successes in this area is always included. The Adult/Older Adult System of Care will work closely with the Vocational Services programs and Contract Development and Technical Assistance (CDTA) unit to incorporate into this objective the positive changes identified.

5. TRANSGENDER HEALTH SERVICES GOES TO INAUGURAL USPATH

This past February, SFDPH Transgender Health Services (THS) staff and its program evaluator presented at the Inaugural United States Professional Association on Transgender Health (USPATH) during the weekend of February 2nd-5th, 2017. This was the first conference at which there were comprehensive behavioral health presentations from mostly peer presenters representing San Francisco Department of Public Health regarding the work from Transgender Health Services.

Seth Pardo, PhD the QM Lead Evaluator for THS, presented client outcomes and reviewed how well THS is serving their patients, including how satisfied the patients are with the navigation and care they are receiving. Dr. Pardo also provided one of only a handful of data presentations at the conference informed

by trans people of color. Dr. Pardo's presentation summarized the baseline characteristics of the clients served by THS, including their quality of life, mental distress (including new non-clinical ways of measuring gender dysphoria), and satisfaction with their primary care and behavioral health services within the San Francisco Health Network.

San Francisco's Transgender Health Services staff presented 9 sessions, including a town hall on phalloplasty procedures, mental health concerns related to gender affirmation procedures among those served by the public health system, the benefit of hiring and utilizing peer navigators, and a workshop focusing on how the medical model for gender affirmation creates barriers for some Communities of Color. A list of the workshop sessions are listed below.

1. Exploring Core Competencies for Mental Health Providers for De-transitioning clients
2. "It was a real disaster but I would do it again." Counseling Education.
3. Mental Health Care for Low Income Trans people seeking surgery: The San Francisco Experience
4. Quality of life, mental health, and baseline demographics of patients served by Transgender Health Services Access Program in San Francisco, CA
5. Strategies for improving outcomes for autistic/neuro-divergent Transgender individuals in medical and mental health settings
6. Supporting gender confirmation surgeries utilizing professional patient navigators from the communities they serve.
7. Challenge and Resiliency at the intersection of Transgender and Homelessness
8. Facial Feminization Surgery: What is it? Who should get it? Why should I care?
9. Meeting the needs of Masculine of Center, Feminine of Center and Two-Spirit People using Gender Confirmation services.

THS received strong feedback from workshop participants regarding the importance of their workshop topics and highlighted the ongoing need for USPATH to centralize its focus with public health populations on cultural humility and peer based models.

SFDPH established Transgender Health Services to provide access to transgender surgeries and related education and preparation services to eligible uninsured transgender adult residents. Currently, SFDPH also provides a range of health services to transgender residents such as primary care, prevention, behavioral health, hormone therapy, specialty and inpatient care.

(Attachment 1)

6. ASSISTED OUTPATIENT TREATMENT

Assisted Outpatient Treatment (AOT) will be well represented at the Forensic Mental Health Association Conference in Monterey in March. SFDPH's AOT Director (Angelica Almeida, PhD) and UCSF Citywide Case Management's Team Leader for AOT (Alison Livingston, LMFT) will be co-presenting on the program in a breakout session entitled "Assisted Outpatient Treatment in California: Implementation and Lessons Learned." In this presentation they will review the law and highlight the successes and challenges of implementing an AOT program. They will also have an opportunity to discuss preliminary outcomes for San Francisco. The co-presenters are looking forward to representing San Francisco at the conference!

As always, if you would like more information about AOT, please visit our webpage at www.sfdph.org/aot. If you would like to make a referral to AOT, please contact us at 415-255-3936.

7. COMMUNITY RESPONSE

On February 3, 2017, there was a two-alarm fire at a two-story building on Stockton Street in Chinatown that impacted many residents (mostly elderly and monolingual Chinese-speaking), who were also displaced due to the damage that hit their homes. BHS coordinated & deployed personnel from its Chinatown North Beach and Sunset Mental Health Clinics who responded to the needs of these residents. From Friday, February 3rd to Saturday, February 11th, these dedicated staff members re-arranged their schedules and worked outside of their normal work schedules, including into the weekends & evenings, to assist the displaced residents, who were sheltered at the local Salvation Army on Powell Street. They worked with the Red Cross, SF Human Services Agency, and other City personnel to provide disaster mental health, psychological first aid, health care and other instrumental assistance, including translation, to the fire victims at the shelter. We are truly grateful for the quick & responsive support provided and thank the management for all their coordination efforts. *All San Francisco City & County employees are designated by both State and City law as Disaster Service Workers.*

Past issues of the CBHS Monthly Director's Report are available at:

<http://www.sfdph.org/dph/comupg/oservices/mentalHlth/CBHS/CBHSdirRpts.asp>

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