

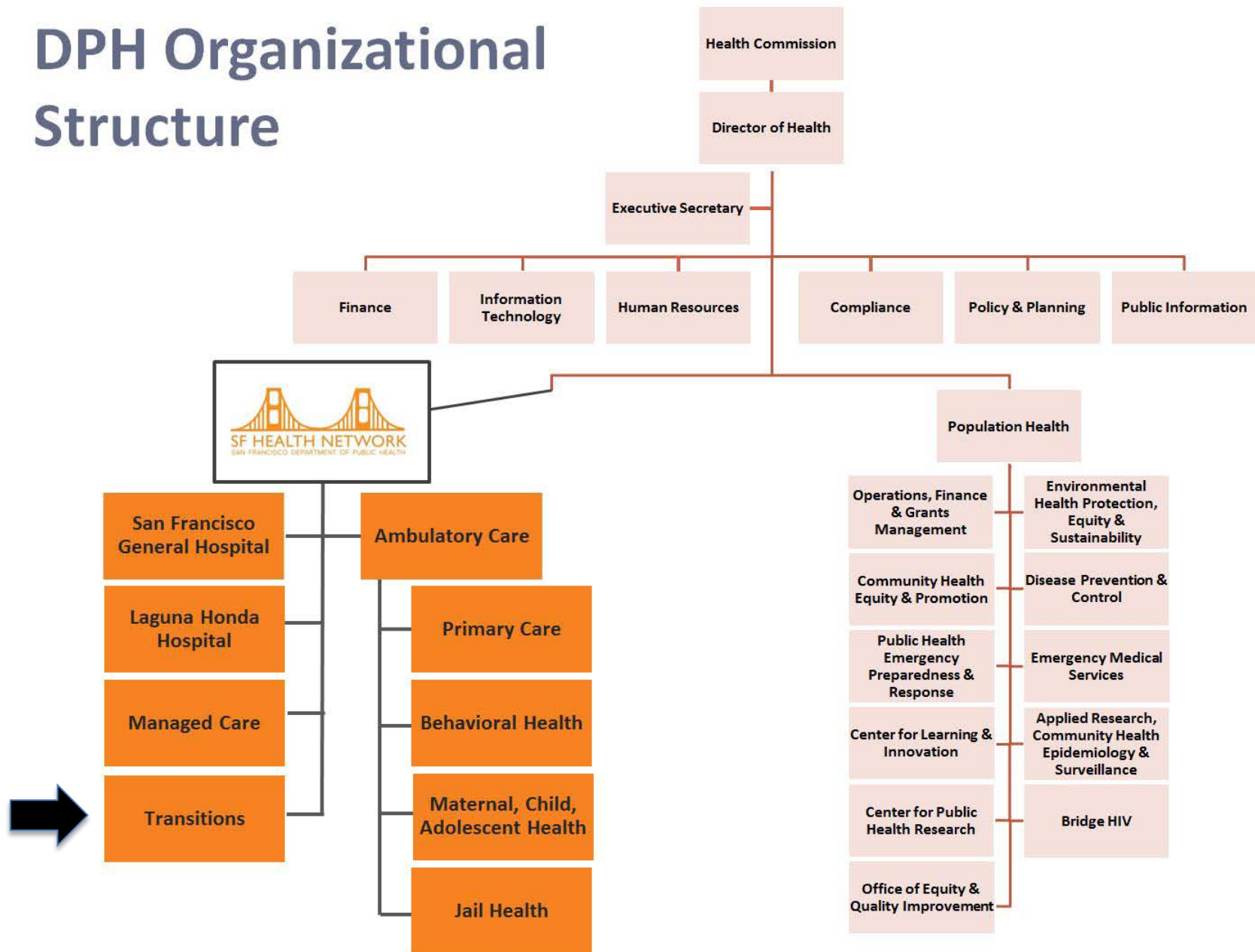
San Francisco Health Network
TRANSITIONS DIVISION

Overview & Highlights

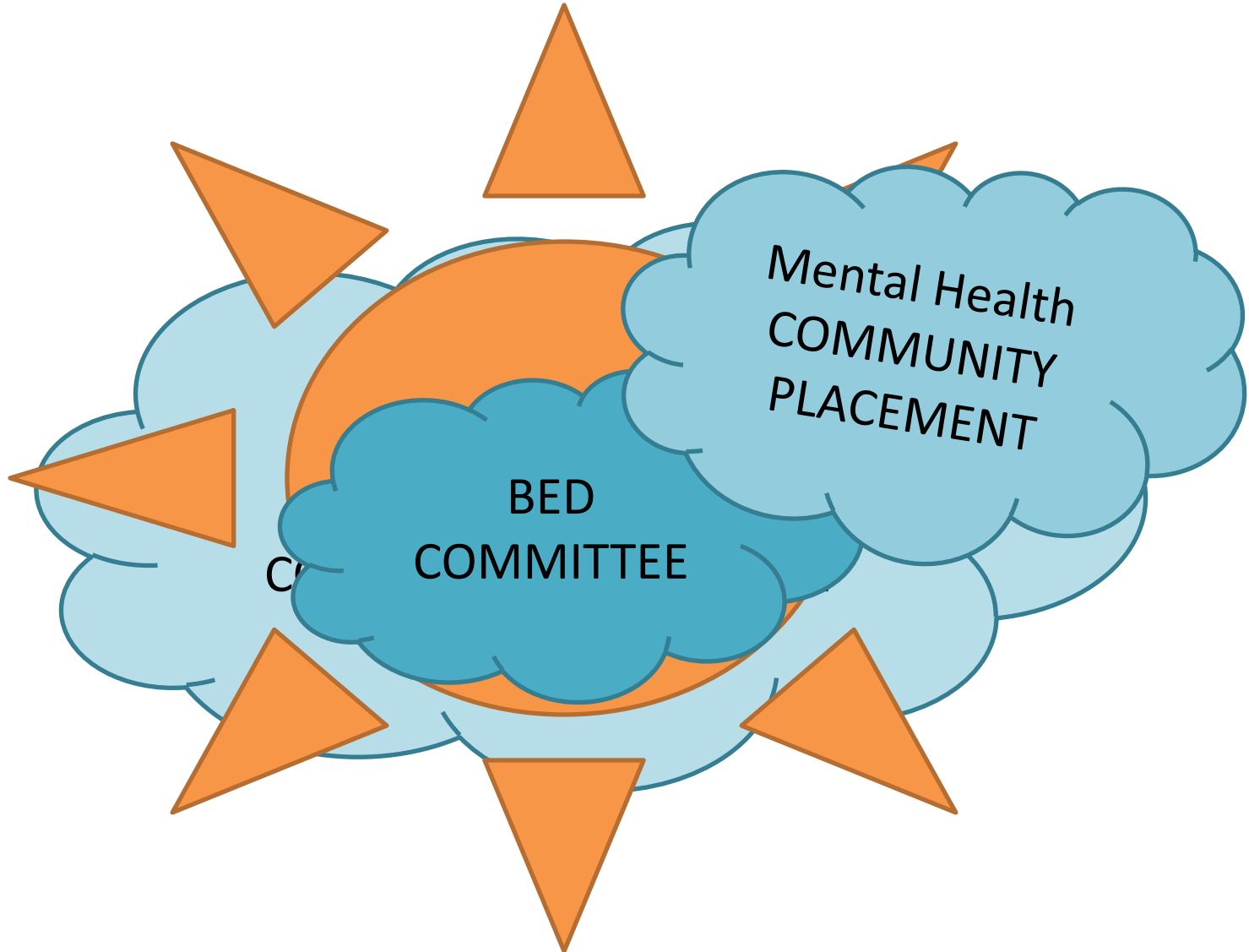


Presented by: Kelly Hiramoto, LCSW, Acting Director of Transitions
September 1, 2015

DPH Organizational Structure

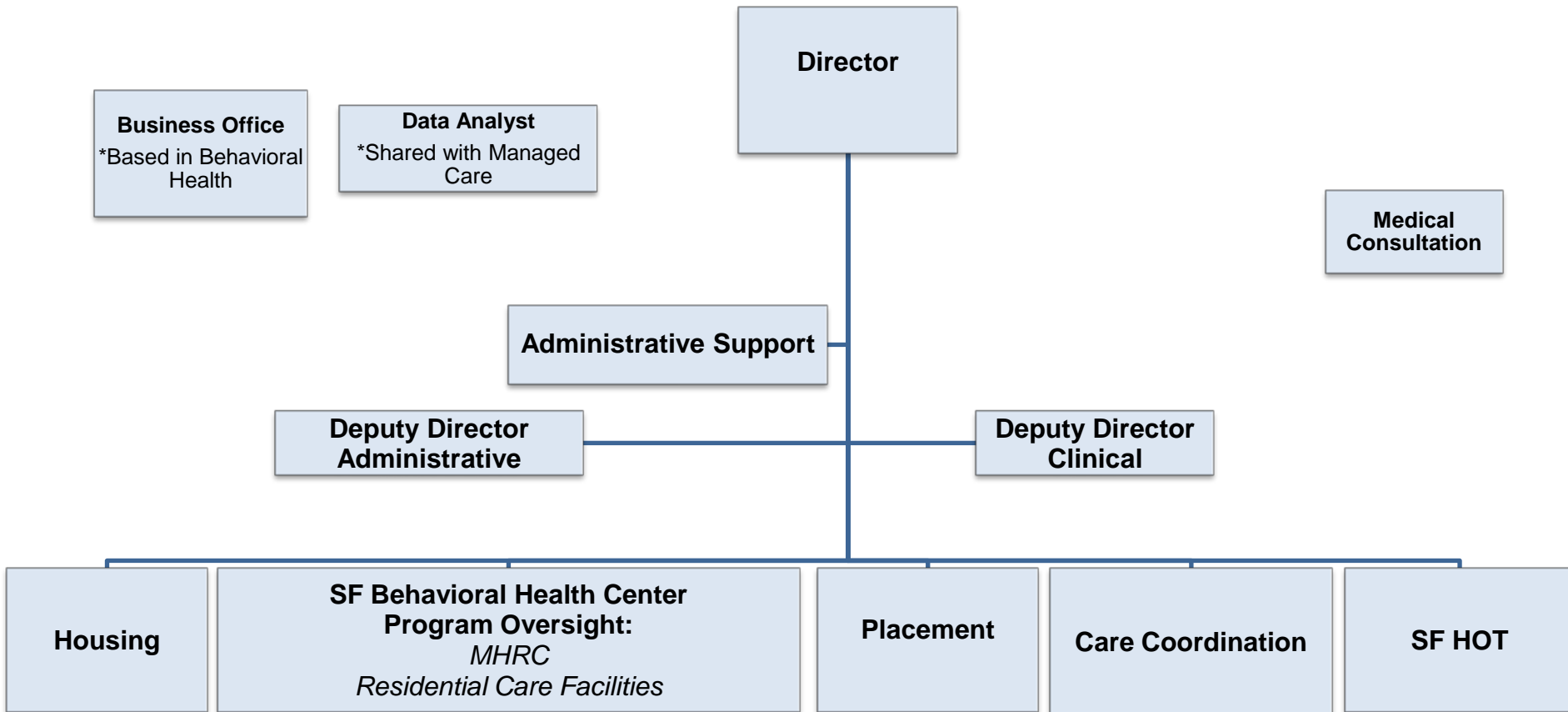


Community Placement grows into TRANSITIONS



Transitions Division

Supporting Client Flow from Homelessness to Housing



Transitions Division

Supporting Client Flow from Homelessness to Housing

What we do...

The goal of the Transitions division is to ensure clients are stabilized in the *most appropriate*, least restrictive setting in the most cost effective manner

Who we serve...

- Primarily SF Residents
- Low/no income
- Treatment ready and willing
- Conserved clients
- Complex characteristics
 - Mental health
 - Substance use issues
 - Medically compromised
 - Cognitive impairments
- High inappropriate users of care systems
- Those in need of subsidized placement to leave the hospital or support for the wraparound care plan

Transitions Division

Supporting Client Flow from Homelessness to Housing

- *Streets*
- *Shelter*
- *Emergency Departments: Psychiatric & Medical*
- *Acute Psychiatric and Medical Units at SFGH and Community Hospitals*
- *Acute Diversion Units, Residential Treatment (Mental Health, Substance Use and Dual Diagnoses), Transitional Residential*
- *Jail*
- *Residential Care Facilities (Board & Care)*
- *Laguna Honda Hospital*
- *Locked settings: IMD-MHRC/Neurobehavioral SNF*
- *State Hospitals*
- *Community Settings*

Transitions Division

Supporting Client Flow from Homelessness to Housing

Director

Housing

SF Behavioral Health Center

Placement

Care Coordination

SF HOT

Interim Director: Brenda Meskan, LMFT

SF Homeless Outreach Team (SF HOT)


Background

- Founded in 2004
 - Reorganized, expanded 2014
- Work in small teams to outreach and provide care management to high risk / most vulnerable homeless individuals
 - Severe illnesses and at high risk of dying
 - High inappropriate system use
 - Ineffective system use
- Staffed by para-professionals, clinicians and peers

Services

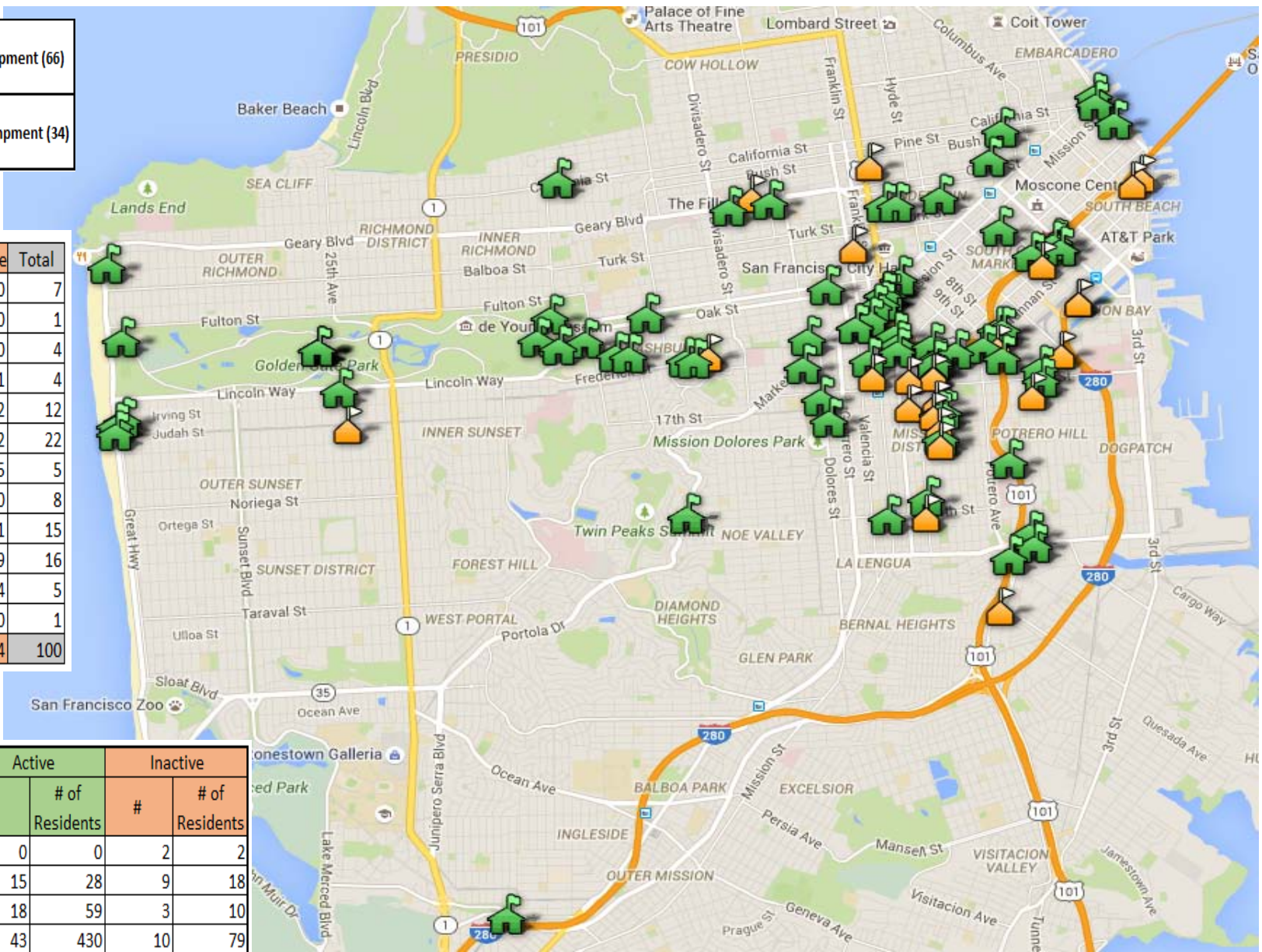
- Street Outreach
- Medical Outreach
- Care Management
- SF Public Library
- Therapeutic Transport
-
- HHOME Team
- Shelter Health

City-wide Encampment Outreach, May 2015

	Active Encampment (66)
	Inactive Encampment (34)

District	Active	Inactive	Total
1	7	0	7
2	1	0	1
3	4	0	4
4	3	1	4
5	10	2	12
6	20	2	22
7	0	5	5
8	8	0	8
9	14	1	15
10	7	9	16
11	1	4	5
UNK	1	0	1
Total	76	24	100

Size	Active		Inactive	
	#	# of Residents	#	# of Residents
Individual	0	0	2	2
Couple	15	28	9	18
Campsite (3-4)	18	59	3	10
Encampment (5+)	43	430	10	79
Total	76	517	24	109



SF Homeless Outreach Team: What's New?

Decreased availability of stabilization rooms

- *Market forces have taken rooms offline*

Navigation Center partnership

- *Mayor's HOPE Office partnered with Human Services Agency to create a time-limited Navigation Center in the Mission district*
- *SFHOT provides encampment/homeless individual information and assists with bringing homeless into the Center*

Business Improvement Districts partnership

- *Financial participation by the BIDs allows greater outreach impact*

Standardized data collection

- *Created a form with set data fields to capture the same basic data from all staff outreach efforts*

Transitions Division

Supporting Client Flow from Homelessness to Housing

Director

Housing

SF Behavioral Health Center

Placement

**Care
Coordination**

SF HOT

Director: Luis Calderon

Care Coordination

Director: Luis Calderon

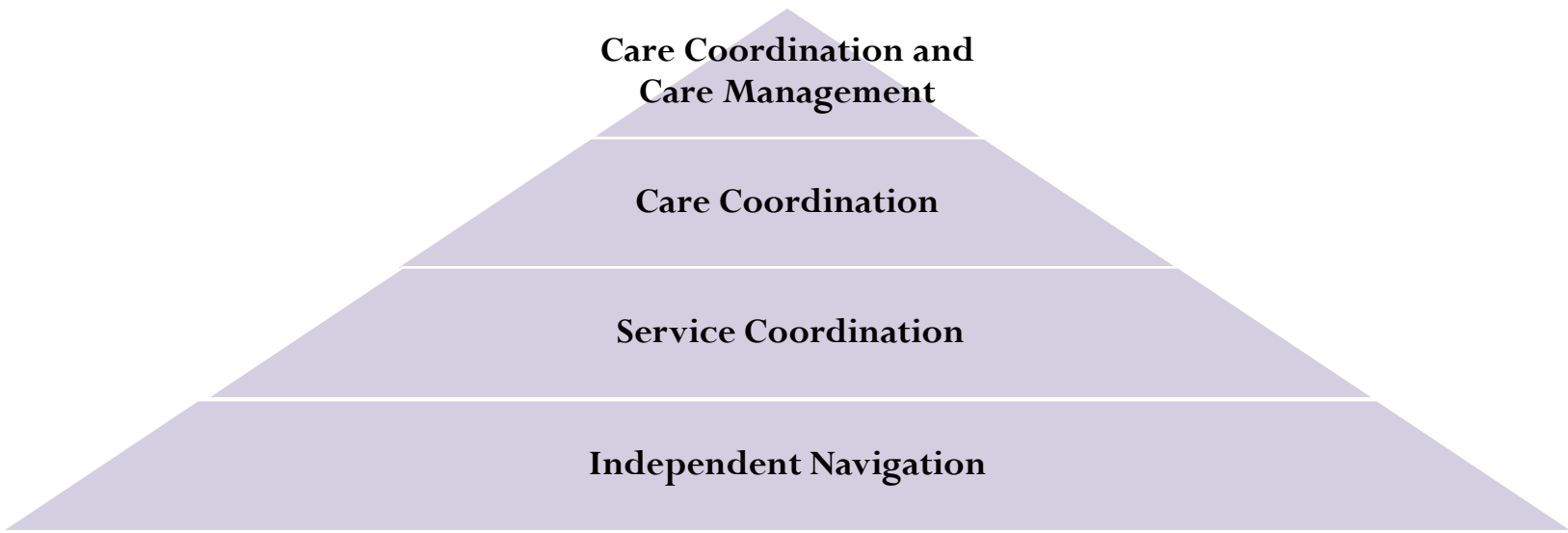
What we do...

Target High Users of Multiple Systems (HUMS)

Coordinate with PC Complex Care Management for High Users of Single Systems (HUSS)

Provide bridge medical services
(Dr. Deb Borne)

- *Direct care of patients who are not yet connected to primary care*
- *Consultation and education of care coordination team and with other providers engaging with these complex patients*



Care Coordination: What's New?

- Total Urgent/Emergent costs remained unchanged and total unique individuals served annually is relatively unchanged

HOWEVER:

- The high risk top 1% of individuals had accounted for 25% of costs
 - ***Now account for 25% of costs***
- The high risk top 5% of individuals had accounted for 55 % of costs
 - ***Now account for 46% of costs***
- Cost savings are being transferred to lower cost patients

Transitions Division

Supporting Client Flow from Homelessness to Housing

Director

Housing

SF Behavioral Health Center

Placement

Care Coordination

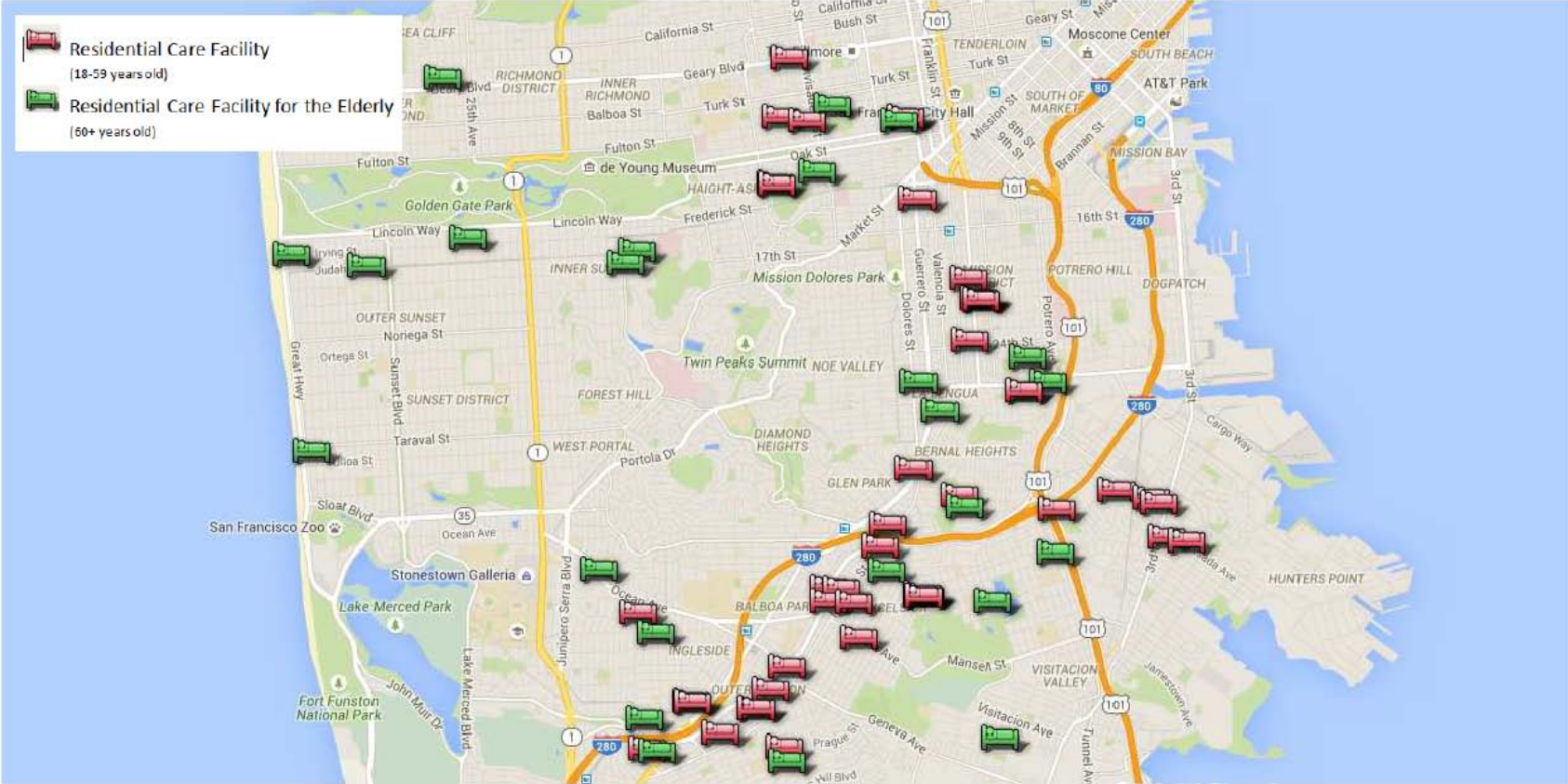
SF HOT

Director: Elayne Hada-Souza, RN

Community Placement

- Assist with discharges for complex patients at hospital
- Assessment, Authorization and Utilization Management for placement in the most appropriate, least restrictive level of care
- Monitor Residential Care Facilities
- Conduct Utilization Review for inpatient psychiatry Medi-Cal Treatment Authorization Requests
- Medi-Cal and Short Doyle Authorization for acute hospital payments throughout California

Community Placement Residential Care Facilities



Number of Facilities	RCF	RCFE
San Francisco	40	29

Ambulatory	Non-Ambulatory
60	9

Co-occurring DD
5

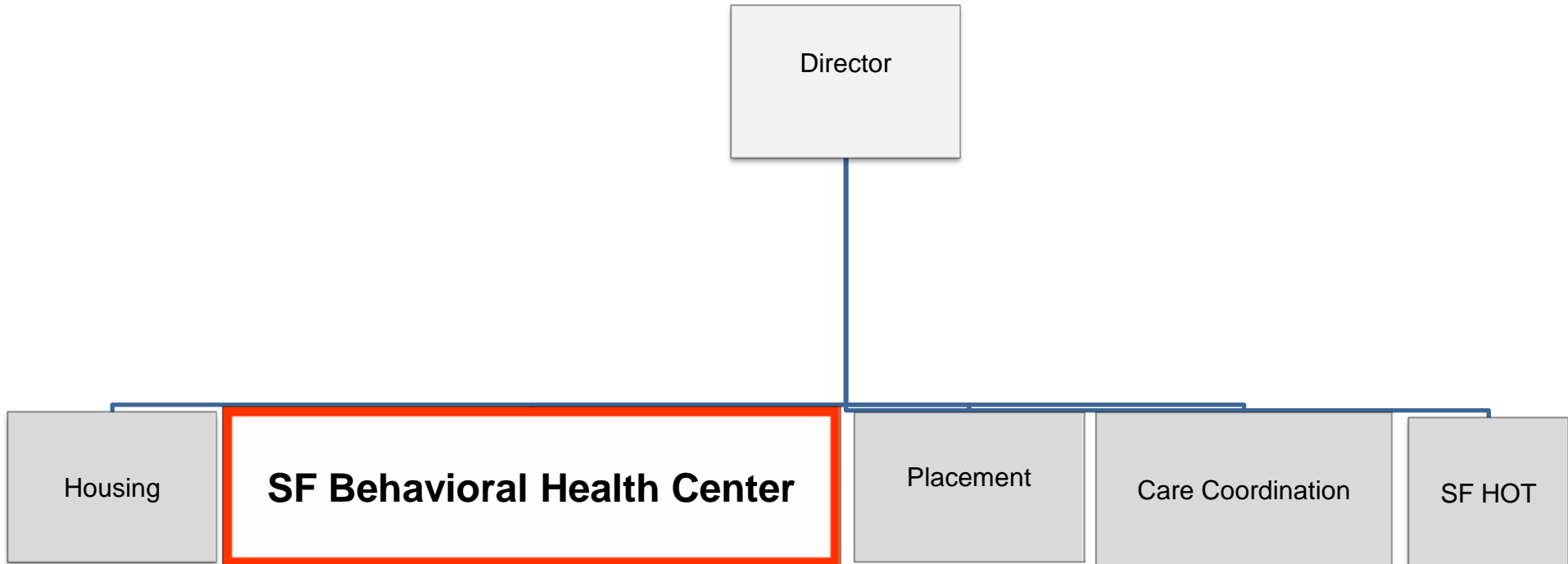
Language	
Chinese	Spanish
5	167

Community Placement: What's New?

- **SF Residential Care Facilities are closing**
 - *3 homes have closed this fiscal year*
 - *Younger generations are not interested in continuing in the business*
- **Decreased availability of stabilization rooms**
- **Medi-Cal Custodial Skilled Nursing Facility beds are harder to find**
 - *The reduction in Medi-Cal payment for custodial SNF care has resulted in most skilled nursing facilities converting their beds to acute rehabilitation beds. This leaves dementia and other behaviorally challenged clients with even more limited placement options*

Transitions Division

Supporting Client Flow from Homelessness to Housing



Director: Linda Sims, RN

SF Behavioral Health Center

FIRST FLOOR

- *Psychiatric Adult Residential Facility*
- *Psychiatric respite (Hummingbird Place)*

SECOND FLOOR

- *Psychiatric Residential Care Facility for the Elderly*

THIRD FLOOR

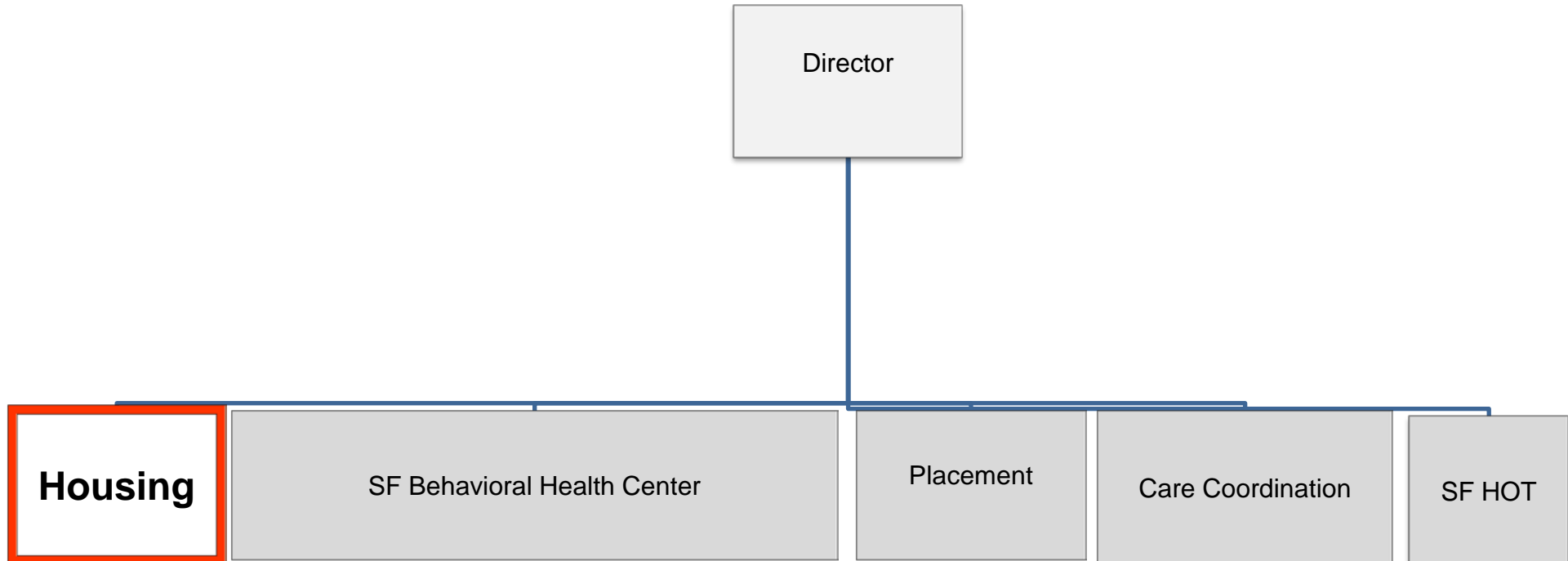
- Mental Health Rehabilitation Center

SFBHC: What's New? Hummingbird Place



Transitions Division

Supporting Client Flow from Homelessness to Housing



Interim Director: Margot Antonetty

Housing (Urban Health)

Direct Access to Housing, Permanent Supportive Housing

- *1,685 units at 36 sites*

Alternative Housing Models and Support Services

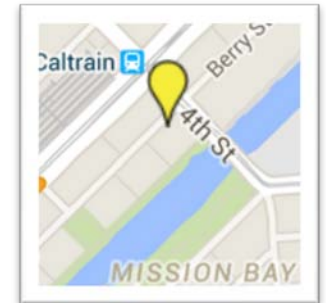
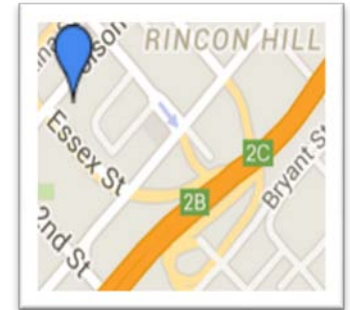
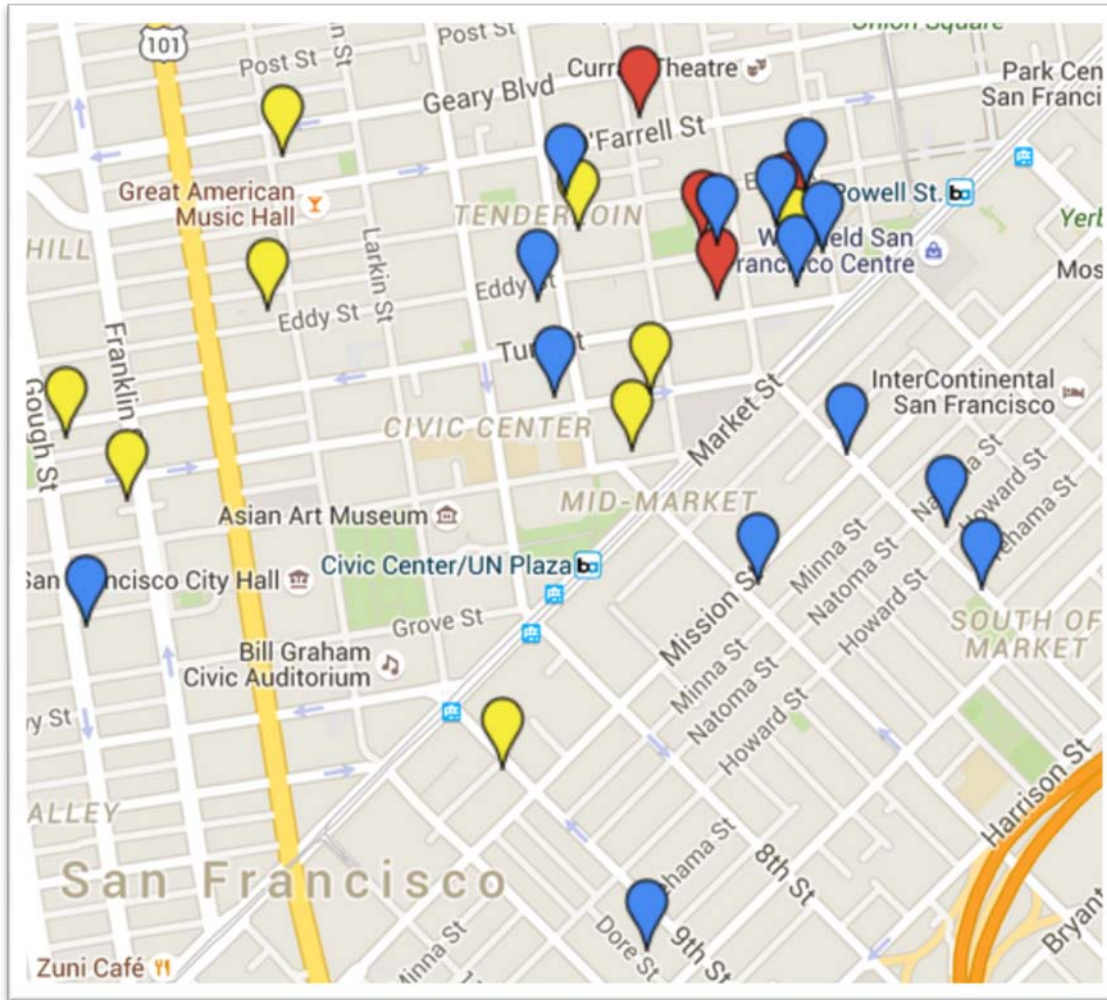
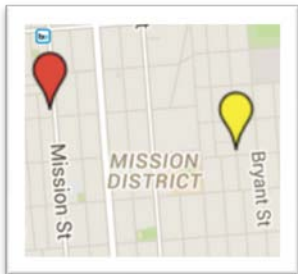
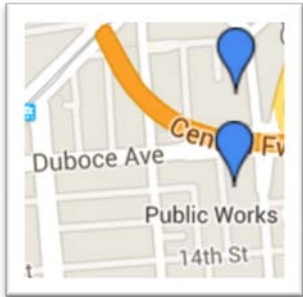
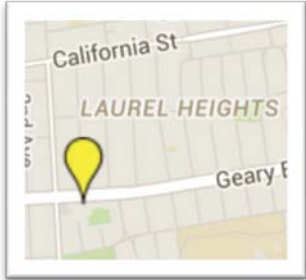
- *Rental Subsidy Program for People Living with HIV/AIDS (690 units)*
- *Transitional Housing (104 beds)*
- *Third Party Rent Payment & Residential Care Facility for the Chronically Ill Support Services*




Laguna Honda Hospital Scattered Site Rental Subsidy Program

- *150+ units*

Emergency Stabilization

- *372 units, average*



-  Affordable
-  Senior
-  Master-leased

Housing (Urban Health): What's New?

- **Minna Lee Housing for Homeless**

- *45 units*
- *Elevator to be installed*
- *SFHOT Stabilization Rooms*
- *Currently in negotiation*
- *Estimated budget: ~\$900,000 (equals ~\$9K per UDC)*

- **Partnerships with new Senior Affordable Sites**

- *20% of units for homeless seniors referred by DPH-DAH*
- *Bayview and Western Addition*

- **Transitions to Independent Housing**

- *Collaboration with SF Housing Authority to open waitlists to tenants currently in a Supportive Housing unit*

- **Explore new community housing options for DPH**

Transition Division Challenges



- **Transitions Division infrastructure still a work in progress**
- **SFHOT**
 - *Loss of Stabilization Rooms and no new stock on the horizon*
 - *Rapid program growth*
- **Care Coordination**
 - *Lack of Stabilization Rooms and no new stock on the horizon*
 - *Lack of wheelchair accessible rooms*
 - *Cross system of care information sharing and lack of single health record*
- **Community Placement**
 - *Aging population and limited non-ambulatory facilities in SF*
 - *Increased forensic and post-forensic referrals*
 - *Lack of secure dementia facilities*
 - *Increasing acuity and violence related to substance use (meth)*
- **SF BHC**
 - *Serving an increasing forensic population*
- **Housing (Urban Health)**
 - *Increased focus on affordable housing rather than low income homeless housing*



THANK YOU FOR YOUR CONTINUED SUPPORT!

