City and County of San Francisco Micki Callahan Human Resources Director



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December 5, 2019

Via US Mail & Email (matthew@majlabor.org)

Matthew Taylor Messing, Adam and Jasmine 980 9th Street, Suite 380 Sacramento, CA 95814

Re: Union's Proposed Amendments to Mental Health SF Ordinance 191148

Dear Matthew,

On November 13, 2019 Mayor Breed and Supervisors Ronen, Haney, Mar, Walton, Yee, Brown, Safai and Fewer introduced a revised ordinance amending the Administrative Code to establish Mental Health SF. This Ordinance replaced the previous Mental Health SF and UrgentCare SF ballot initiatives, which were withdrawn by their respective sponsors. The City held an Informational meeting on the revised ordinance on December 2, 2019. The following unions attended: Municipal Executives Association ("MEA"), Automotive Machinists Local 1414, Police Officers' Association and Teamsters 856. On behalf of the unions present, MEA submitted proposed amendments to the legislation on December 3, 2019. Please find the City's responses to these proposals below.

- 1. (b) Establishment and Operation of Mental Health SF.
 - (1) The City hereby establishes Mental Health SF, a comprehensive reform of the City's mental health system. Mental Health SF is designed to provide universal access to treatment for mental illness and substance use disorders, and to provide affordable access to psychiatric medications. Mental Health SF shall be staffed by City employees and, subject to the civil service provisions of the Charter, by employees of academic institutions with whom the Department may enter into agreements for the provision of medical services.

The City reserves the right to make staffing decisions and control its workforce. This proposal is a policy proposal within the City's management rights, and is not within the scope of representation or subject to meet and confer.

2. (B) Staffing. The Mental Health Service Center shall be operated by the Department, shall be staffed by City employees and, subject to the civil service provisions of the Charter, by employees of academic institutions with whom the Department may enter into agreements for the provision of medical services. The Mental Health Service Center shall be adequately staffed to ensure that wait times for services are not excessive during peak hours or otherwise. The Mental Health Service Center shall ensure that the following staff

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shall be available at all times: staff who can diagnose mental health and substance use disorders and staff who can prescribe medications. Staff whose responsibility it is to fulfill prescriptions shall be available to meet patient demand. If security services are required at sites operated by the Department, the Sheriff shall provide such services.

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3. (iii) Pharmacy Services. There shall be a pharmacy on the premises of the Mental Health Service Center. The pharmacy shall stock medications used to treat mental health and substance use conditions, and shall ensure that such medications are not cost-prohibitive to patients. The pharmacy shall be open seven days a week, including evenings, <u>and shall</u> <u>be staffed by a pharmacy manager during all open hours.</u>

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4. (iv) Mental Health Urgent Care. Mental Health SF shall include a Mental Health Urgent Care Unit that shall offer clinical intervention for individuals who are experiencing escalating psychiatric crisis and who require rapid engagement, assessment, and intervention to prevent further deterioration into an acute crisis or hospitalization. Such facility may, but shall not be required to be, located at the Mental Health Service Center. The Mental Health Urgent Care Unit shall be staffed by City employees.

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5. (v) Transportation. Mental Health SF shall provide prompt, accompanied transportation from the Mental Health Service Center to off-site treatment programs. Mental Health SF shall also provide transportation to individuals released from San Francisco County Jail and General Hospital's PES unit to the Mental Health Service Center. Sworn personnel of the Sheriff's Office shall provide security for all transportation involving individuals who are in custody, who were released from custody prior to the transportation, or who otherwise constitute a security risk.

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6. (D) Data Collection. The Office of Coordinated Care shall oversee the collection, analysis, and maintenance of the data necessary to operate and evaluate an effective system of care for adults suffering from mental illness and/or substance use disorders in San Francisco, and shall collect and analyze data points as recommended by the Implementation Working Group. At minimum, the Office of Coordinated Care shall collect and analyze data sufficient to allow the Department, the Mayor, and the Board of Supervisors to make informed decisions about how to prioritize <u>budgetary</u> resources so

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that individuals may move seamlessly through different levels of care without excessive wait times or impediments. City officials and agencies shall cooperate with these data collection efforts.

The City rejects this proposal, as its intent is unclear and it appears unnecessary.

7. (3) PART THREE: Coordinated Outreach Teams and the Establishment of the Crisis Response Street Team. (A) The Crisis Response Street Team shall be a city-wide crisis team, staffed by City employees, led by the Department that operates 24 hours per day, 7 days per week, to intervene with people on the street who are experiencing a substance use or mental health crisis, with the goal of engaging them and having them enter into a system of treatment and coordinated care. A marketing strategy shall be implemented to ensure that the public becomes familiar with the specific telephone number to call to engage the assistance of the Crisis Response Street Team. The public shall also be able to find this team by dialing 311 or, in the case of emergency, 911, and can report someone in need of services through these channels. This team shall coordinate with the Office of Coordinated Care to assign case managers where needed to establish trust and rapport with individuals who refuse to access services and who are not eligible for conservatorship.

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8. PART FIVE: Establishment of an Office of Private Health Insurance Accountability. The City shall establish an Office of Private Health Insurance Accountability ("OPHIA"). <u>The OPHIA</u> shall be staffed by City employees.

The City reserves the right to make staffing decisions and control its workforce. This proposal is a policy proposal within the City's management rights, and is not within the scope of representation or subject to meet and confer.

9. (I) The City shall provide transportation, to and from City-owned parking garages for all Mental Health SF city employees who work the swing and or night shifts at all Mental Health SF Offices that are staffed 24/7. The purpose of such transportation is to provide secure transportation to and from the employees' personal vehicles at the beginning or end of their shifts.

This proposal appears to address employees' commute to work, which is outside the terms and conditions of employment. In addition, parking and on-duty transportation for employees are issues covered in the respective Labor Agreements; the unions can raise any proposals relating to parking or transportation during negotiations. In addition, the unions have not identified any justification for this proposal.

10. (I) Seat I shall be held by a person with expertise working on behalf of healthcare workers, who is a member of any of the unions representing Mental Health SF employees, who is recommended by the San Francisco Labor Council, and who is appointed by the Board of Supervisors.

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Determination of the composition of the Implementation Working Group is a reserved right for the City. This proposal is a policy proposal within the City's management rights, and is not within the scope of representation or subject to meet and confer.

11. (b) The Implementation Working Group shall work with the Controller and the Department of Human Resources ("DHR") to conduct a staffing analysis of both City and nonprofit mental health services providers to determine whether there are staffing shortages that impact the providers' ability to provide effective and timely mental health services. If the staffing analysis concludes that there are staffing shortages that impact timely and effective service delivery, the staffing analysis shall also include (i) recommendations made by the DHR regarding appropriate classifications (including both revisions to existing classifications or the creation of new classifications) and salary ranges that should be established, and other working conditions that should be changed, to attract and retain qualified staff or the positions where there are staffing shortages and (ii) budgetary recommendations made by the DHR regarding how to finance the recommendations made in item (i) above. The DHR shall conduct all labor negotiations pertaining to any new policies or changes in existing policies, resulting from these recommendations.

Determination of the Working Group's methodologies is a reserved right for the City. This proposal is a policy proposal within the City's management rights, and is not within the scope of representation or subject to meet and confer.

Sincerely,

Carol Isen

Employee Relations Director

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Cc: Gregg Adam, Messing, Adam and Jasmine

Raquel Silva, MEA Christina Fong, MEA Mark Jayne, IAM 1414 Mark Leach, IBT Local 856 Abigail Rivamonte Mesa, BOS Carolyn Goossen, BOS Sophia Kittler, MYR