

Appendix A: Departmental Overdose Prevention Policies – Shared Vision

SHARED FRAMEWORK – OVERDOSE PREVENTION POLICY

The Department of Public Health (DPH), Department of Homelessness and Supportive Housing (HSH), Human Services Agency (HSA), and Department of Emergency Management (DEM) are committed to tackling the overdose crisis and reducing the serious consequences of substance use disorders through a coordinated and collaborative approach. This includes reducing overdose deaths and supporting access to treatment and recovery services. All City Departments who interact with people at risk of overdose have a responsibility to respond to the overdose epidemic using effective practices.

Shared Principles:

In accordance with Ordinance [084-21](#) DPH, HSH, HSA, and DEM commit to the following guiding principles when developing departmental overdose prevention policies:

- Service providers are accountable for delivering interventions that reduce the harmful economic, social and physical impacts of substance use and related behaviors.
- Each program is part of continuum of City services and should work collaboratively with other programs in the system and across the city.
- Services should be culturally competent, non-judgmental, and delivered in a manner that demonstrates respect for individual dignity, personal strengths, and self-determination.
- The service continuum must include strategies to engage, motivate, and support the complex needs of people who may be at risk of overdose.
- Civil service and contracted staff should receive ongoing training on the continuum of services, overdose prevention, and naloxone access to prevent overdose deaths and connect clients to treatment and recovery services.
- Comprehensive care and treatment should include strategies that reduce harm for those clients who are unable or unwilling to modify their unsafe behavior.
- Relapse or periods of return to unsafe health practices may be part of an individual's journey to recovery and should not be equated with or conceptualized as "an individual's failure of treatment".
- People must be offered a range of treatment outcomes in a continuum of care; from reducing unsafe practices to abstaining from dangerous behavior.
- A safety-centered recovery model prioritizes strategies that protect life, promote recovery, and strengthen safety for individuals and the communities in which they live and work.
- Programs should create opportunity for input and incorporate feedback from community or program participants to improve effectiveness.

Department Overdose Prevention Policy Components:

Ordinance [084-21](#) - Administrative Code - Departmental Overdose Prevention Policies.

To the extent applicable to the department's activities, DPH, HSH, HSA and DEM departmental Overdose Prevention Policies will:

- (a) Address how the program/department will provide or refer clients to a continuum of services;
- (b) Describe where the department will make materials and resources regarding overdose prevention and the continuum of services available to clients;

- (c) Include onsite overdose response policy that describes the steps the department will take in the event that an overdose occurs on department-managed property or in the presence of department personnel;
- (d) Ensure that department staff who work with people at risk of overdose receive training in overdose prevention and strategies to improve connection to treatment, care, and recovery;
- (e) Describe process by which the department will ensure that grantees managing department property and/or are providing direct services implement overdose prevention policies that meet the requirements of subsections (a)-(d) of this Section 15.17, as applied to the grantee.

**Appendix B: Department of Public Health Overdose Prevention
Policy – 2025 Update**



City and County of San Francisco
Daniel Lurie
Mayor

San Francisco Department of Public Health

Daniel Tsai
Director of Health

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

POLICY & PROCEDURE DETAIL

Policy & Procedure Title: DPH Overdose Prevention Policy	
Category: Client/Patient Services	
Effective Date: 12/10/2021	Last Reissue/Revision Date: 11/1/2024
DPH Unit of Origin: Office of Overdose Prevention, Population Behavioral Health	
Policy Contact: Office of Overdose Prevention, Population Behavioral Health	
Distribution: DPH-wide <input checked="" type="checkbox"/>	If not DPH-wide, other distribution: Click here to enter text.
Public Interest: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Repository: DPH P&P Library <input checked="" type="checkbox"/>	If not DPH P&P Library, other repository/library:

BACKGROUND

The mission of the Department of Public Health (DPH) is to protect and promote the health of all San Franciscans. To reduce overdose deaths and improve the health of people at risk of overdose, it is critical that clients have access to information regarding comprehensive care and services. This involves DPH staff and contracted providers having core knowledge and skills in areas such as overdose response, distribution of and access to naloxone, and referrals and connections to appropriate treatment and recovery services.

PURPOSE OF POLICY

This policy supports DPH's compliance with local legislation, Ordinance [084-21](#) (Reference A). The legislation requires DPH to annually submit to the Board of Supervisors a departmental policy describing how the department and its grantees that provide direct services to clients at risk of overdose will promote strategies to reduce drug overdoses and connect people to treatment services ("Overdose Prevention Policy"). This policy also incorporates the City's Recovery First Substance Treatment Services Policy, Ordinance [076-25](#) (Reference B).

The DPH overdose prevention policy includes requirements for resource posting, staff overdose response training, and sets procedures to follow in the event of an overdose on site.

The mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

We shall ~ Assess and research the health of the community ~ Develop and enforce health policy ~ Prevent disease and injury ~
~ Educate the public and train health care providers ~ Provide quality, comprehensive, culturally-proficient health services ~ Ensure equal access to all ~

DPH OVERDOSE PREVENTION POLICY & PROCEDURES

DPH divisions, branches, sections, and grantees that engage with and/or provide direct services to clients at risk of overdose will adopt the following policy and adapt outlined procedures.

A. DPH Continuum of Services: Drug Treatment and Harm Reduction Programs and Services

The Department of Public Health (DPH) provides and/or funds a continuum of services that aim to reduce overdose deaths and support people to enter effective treatment and sustained recovery. **It is DPH's expectation that anyone seeking substance use treatment information will be able to easily obtain it when accessing any DPH health service and/or DPH-funded health service.**

Information about how to access the continuum of services is available to DPH staff and grantees at the SF.gov Substance Use and Overdose Prevention Services webpage: <https://sf.gov/substance-use-and-overdose-prevention-services>. **All funded contractors and service providers who provide direct client services must assist clients in accessing substance use disorder (SUD) treatment by developing and implementing a written protocol regarding how staff will provide SUD treatment information, referrals, and/or connections for clients.** At a minimum, these written protocols must include:

- treatment information,
- referrals to treatment, and
- Staff training expectations.

To fulfill this expectation, all funded contractors and service providers who provide direct client services must attend the quarterly virtual SUD training series "Addressing Substance Use in San Francisco: Quarterly Information for Providers" held by DPH Behavioral Health Services on SUD treatment (Reference C: memo – Improving Referrals for Substance Use Services and Street Conditions Near Health Service Sites).

B. Resource Posting

DPH maintains two public webpages that provide resources for DPH branches, sections and grantees to share with staff and clients:

- **Overdose prevention, care, and treatment in SF** - <https://sf.gov/substance-use-services-and-overdose-prevention>
- **Care and treatment services for addiction to drugs and alcohol** - <https://www.sf.gov/information--care-and-treatment-services-addiction-drugs-and-alcohol>

DPH branches, sections, and grantees who engage with and/or provide direct services to clients at risk of overdose will post and make available (if appropriate):

- (1) the location and schedule of syringe access and disposal services, and
- (2) CBHS Naloxone availability (Attachment A: Free Narcan and Training Flyer); if appropriate.

DPH branches, sections, and grantees will determine the appropriate locations for posting and sharing materials with staff and clients. Depending on the setting, the materials may be posted or shared in several locations. Some examples include:

- Exam and counseling rooms,
- Lobbies and/or waiting areas,
- Employee shared spaces (e.g., break rooms, conference rooms),
- Restrooms,
- Employee workspaces,
- Laboratories/research spaces,
- Emails and program newsletters to clients and staff, and
- Schedules may be shared directly by outreach or field staff

C. Overdose Prevention Training

The online overdose recognition and response training is a requirement for DPH staff and grantees who engage with and/or provide direct services to clients at risk of overdose.

DPH divisions, branches, sections, and grantees with staff who directly engage with people at risk of overdose, who use drugs, and/or have substance use disorders will ensure that all relevant staff are aware of the online overdose recognition and response training and take the training once per year. Additionally, DPH divisions, branches, sections, and grantees will ensure that new staff who directly engage with clients at risk of overdose take the online overdose recognition and response training as part of their orientation.

- **DPH Employees** - the online overdose recognition and response training is found in each employee's Employee Portal.
- **DPH Contractors and/or Grantees** - the online overdose recognition and response training is available through the DPH Center for Learning and Innovation, Overdose Prevention Training Series (<https://learnsfdph.org/programs/sfdph-overdose-prevention/>).

Staff and grantees who have taken the online overdose recognition and response training at least once before can fulfill the annual training requirement by taking an [online refresher course on opioid overdose recognition and response](#). The refresher course is available through SF Learning (employee portal) and LearnSFDPH.org.

Additional overdose prevention trainings are provided by DPH's Office of Overdose Prevention (OOP). While not required per DPH's policy, DPH branches, sections, and grantees are encouraged to supplement the required online training with in-person trainings provided by the Office of Overdose Prevention.

DPH has developed training videos to support DPH staff and grantees. The videos are available at the DPH Substance use Services and Overdose Prevention Resources webpage: <https://sf.gov/substance-use-services-and-overdose-prevention>

- A [step-by-step demonstration on how to use nasal naloxone](#) for known or suspected opioid overdose.
- [How to use a fentanyl test strip](#) to test drugs for the presence of fentanyl.
 - En Español: [Aprender cómo usar las tiras de Detección de Fentanilo](#)
- A [step-by-step demonstration on how to use intramuscular naloxone](#) for opioid overdose.
- The range of [substance use disorder treatment options in our system](#).
- A training on how to [reduce stigma against people who use drugs](#).

D. Onsite Overdose Response

DPH divisions, branches, sections, and grantees with staff who engage with clients at risk of overdose will maintain an onsite overdose response policy that describes the steps that will be taken in the event that an individual overdoses on property managed by the department or in the presence of department staff, or on property managed by grantees.

The following list describes steps that staff can take to respond to an overdose at a site managed by DPH or where DPH staff are present. These steps may be adapted for specific settings (e.g., hospital settings, outpatient clinic settings, workplaces, research settings, etc.).

- 1) Staff should continuously monitor clients moving throughout the site. Staff should continuously monitor bathroom usage to ensure safety.
- 2) If a client is unresponsive and/or unconscious, try to wake them by calling their name, if known, or yelling for them to respond. If they do not respond, try waking them with a painful stimulus (e.g., rubbing their sternum or tapping their foot with yours). Check breathing; **if they are not breathing and are unresponsive immediately alert another staff member and engage EMS by calling 911.**
 - a. Communicate to dispatch: “person is unresponsive and not breathing, possible overdose, please have naloxone/Narcan.”
- 3) Staff will get the NALOXONE stored in the *[stored in the secure, room temperature location noted in the program’s overdose prevention plan]*. Staff will administer one dose of nasal naloxone to the client.
 - a. Any staff member who has received training in overdose recognition, response and naloxone administration can attend to the client (Reference B).
- 4) If the client has a pulse, perform rescue breathing. For individuals without a pulse, perform CPR (rescue breathing + chest compressions). If available, an Ambu Bag (artificial breathing) or breathing shield can be used.
- 5) If there is no response to the naloxone from the client after 2-3 minutes, administer a second dose of naloxone in the opposite nostril and continue with rescue breathing while awaiting EMS.
- 6) EMS will either transport the client following a non-fatal overdose to the hospital or the client will refuse transport. If client stays at venue, continue to observe for re-sedation as long as possible.

Each onsite overdose response policy will include steps for a debrief session following an overdose episode. The session should be facilitated by site leadership and provide an opportunity for staff to discuss the steps that were taken, address any concerns, and identify areas of improvement for future response.

E. Identification of Overdose Prevention Champion

DPH divisions, branches, and sections with staff or grantees who engage with clients at risk of overdose will identify an Overdose Prevention Champion. The responsibilities of each Overdose Prevention Champion include:

- Providing support to individual branch, section, and/or grantees to comply with DPH's Overdose Prevention Policy (this includes sharing overdose prevention resources to staff and clients),
- Reminding branch staff and contracted providers about the overdose prevention training requirement and organizing supplemental overdose prevention trainings with the Office of Overdose Prevention,
- Attending DPH Overdose Prevention Champion meetings and participating in information sharing, and
- Ensuring that, for grantees who manage property or provide direct services to clients at risk of overdose, required policy components are evaluated during annual contract monitoring, and grantees not meeting the requirements will have that noted in annual monitoring reports.

ATTACHMENTS

- A. Free Nasal Narcan and Training Flyer

REFERENCES

- A. [Administrative Code - Departmental Overdose Prevention Policies](#)
- B. [Administrative Code - Recovery First Substance Use Disorder Treatment Policy](#)
- C. Memo to DPH Funded Service Providers: [Improving Referrals for Substance Use Services and Street Conditions Near Health Service Sites](#)
- D. [Legal References - California Civil Code Section 1714.22](#)

ATTACHMENT A: Free Nasal Narcan and Training Flyer

**Concerned about overdose?
Want a free nasal Narcan kit?**



**Free Nasal Narcan and Training at
CBHS Pharmacy**
*No Insurance Required

1380 Howard Street (at 10th Street)

**Open Monday-Friday, 9:00 am - 6:30 pm
and Saturday-Sunday 9:00 am - 12:00 pm
and 1:00 pm - 4:00 pm**

Thank you for caring for your community!



**Concerned about overdose?
Want a free nasal Narcan kit?**



**Free Nasal Narcan and Training at
CBHS Pharmacy**
*No Insurance Required

1380 Howard Street (at 10th Street)

**Open Monday-Friday, 9:00 am - 6:30 pm
and Saturday-Sunday 9:00 am - 12:00 pm
and 1:00 pm - 4:00 pm**

Thank you for caring for your community!



ATTACHMENT B: Treatment Palm Card

**Get Drug
Treatment Now**



Call **888-246-3333**
to speak with a
medical provider
or visit:

Behavioral Health Access Center
1380 Howard St.

M-F 8am-7pm
Sat-Sun 9am-4pm



San Francisco
Department of Public Health

Services include:



Same day medication
for addiction to fentanyl,
heroin, and opioid pills.



Connection to contingency
management, residential
treatment, withdrawal
management (detox), or
mental health support.



San Francisco
Department of Public Health

**Appendix C: Department of Homelessness & Supportive
Housing Overdose Prevention Policy – 2025 Update**



Department of Homelessness and Supportive Housing Overdose Prevention Policy

I. PURPOSE OF POLICY

The mission of the Department of Homelessness and Supportive Housing (HSH) is to make homelessness rare, brief, and one-time through the provision of high-quality services. HSH's work centers on the core components of the homelessness response system: homelessness prevention, Coordinated Entry, outreach, shelter and crisis interventions, housing problem solving, and housing.

Since the Department's creation in 2016, HSH has supported the integration of harm reduction across the core components of the homelessness response system as an effective strategy for overdose prevention. HSH will continue to apply available data and public health guidance to determine the most effective strategies for overdose prevention and will update this policy accordingly.

The Board of Supervisors enacted Ordinance No. 084-21 in June 2021. The Ordinance requires HSH to annually submit to the Board of Supervisors a departmental policy describing how the Department and its grantees that manage property on behalf of the Department and/or provide direct services to program participants at risk of overdose will promote strategies to reduce drug overdose and refer people to the City's continuum of services ("Overdose Prevention Policy"). The HSH Overdose Prevention Policy includes the minimum requirements as stated in Sec. 15.17 of the Administrative Code (Department Overdose Prevention Policies).

II. GUIDING PRINCIPLES FOR OVERDOSE PREVENTION

The primary way that HSH promotes access to the continuum of City services and overdose prevention throughout the homelessness response system is to include, rather than exclude, substance users from services. For many years, housing was treated as an award for compliance with social standards, including sobriety. This approach left substance users out on the streets and did not provide access to the resources often needed to reduce drug use and overdose, like housing or other services.

All HSH-funded programs across the homelessness response system are committed to serving and being accessible to people at risk of overdose. The Department provides dedicated support services through outreach, shelter, and housing programs to mitigate harmful behaviors stemming from substance use. Referring program participants to other appropriate resources within the continuum of City services also helps stabilize people within HSH's programs. Additionally, to help the most vulnerable people exit homelessness and achieve long-term stabilization, HSH Coordinated Entry now



assesses Substance Use Disorder as a vulnerability to determine housing prioritization status.

In 2021, HSH, the Department of Public Health (DPH), the Human Services Agency (HSA), and the Department of Emergency Management (DEM) committed to a collective and collaborative approach to address the overdose crisis. Together, the Departments developed a set of shared guiding principles to support the development and implementation of departmental Overdose Prevention Policies, as required by Administrative Code Section 15.17. These guiding principles and HSH's policy were updated in 2025 to incorporate the City's Recovery First Substance Treatment Services Policy, [Ordinance 076-25](#). The updated guiding principles include the following:

- Service providers are accountable for delivering interventions that reduce the harmful economic, social and physical impacts of substance use and related behaviors.
- Each program is part of continuum of City services and should work collaboratively with other programs in the system and across the city.
- Services should be culturally competent, non-judgmental, and delivered in a manner that demonstrates respect for individual dignity, personal strengths, and self-determination.
- The service continuum must include strategies to engage, motivate, and support the complex needs of people who may be at risk of overdose.
- Civil service and contracted staff should receive ongoing training on the continuum of services, overdose prevention, and naloxone access to prevent overdose deaths and connect to treatment and recovery services.
- Comprehensive care and treatment should include strategies that reduce harm for those who are unable or unwilling to modify their unsafe behavior.
- Relapse or periods of return to unsafe health practices may be part of an individual's journey to recovery and should not be equated with or conceptualized as "an individual's failure of treatment".
- People must be offered a range of treatment outcomes in a continuum of care; from reducing unsafe practices to abstaining from dangerous behavior.
- A safety-centered recovery model prioritizes strategies that protect life, promote recovery, and strengthen safety for individuals and the communities in which they live and work.
- Programs should create opportunity for input and incorporate feedback from community or program participants to improve effectiveness.

III. HSH OVERDOSE PREVENTION POLICY

The HSH Overdose Prevention Policy outlines minimum requirements for the Department and its grantees that manage property on behalf of the Department and/or provide direct services to program participants at risk of overdose to promote strategies to reduce drug overdoses and refer program participants to the continuum of City services. In some instances, the requirements of specific HSH-contracted services already exceed these minimums.

a. Substance Use Treatment and Harm Reduction Programs and Services

HSH requires its contracted providers covered by this Policy to make available at their service sites informational materials from DPH and other partners about accessing the continuum of City services, including substance use treatment. HSH also requires all providers with contracts for case management, social work, navigation, and assessment services to make referrals to substance use treatment programs



The Department's service providers encourage behaviors that promote the safety of program participants and the community. HSH ensures that program participants are supported in accessing the City's continuum of services and programs by making direct referrals to services and encouraging our program participants to engage in services by:

- Reviewing program protocols regularly to identify opportunities to continue and expand services and referrals in HSH-managed or HSH-funded programs and properties.
- Actively encouraging HSH provider partners, as appropriate, to provide services, resources, and referrals in their programs and locations that support connecting people at risk of overdose to the City's continuum of services.

HSH does not exclude people from accessing services or housing based on substance use or diagnosis of a substance use disorder. The adoption of this policy does not preclude HSH from funding sober living program models within the homelessness response system.

b. Resource Posting

HSH requires that all sites funded by the Department post up-to-date information in at least one location visible or otherwise easily accessible to program participants and staff about the City's continuum of services, including available information about naloxone access.

Available printable resources are located on two public websites managed by DPH and updated regularly.

- Overdose prevention, care and treatment in SF – <https://sf.gov/substance-use-services-and-overdose-prevention>
- Care and treatment services for addiction to drugs and alcohol - <https://www.sf.gov/information--care-and-treatment-services-addiction-drugs-and-alcohol>

c. Onsite Overdose Response Protocol

HSH requires that all sites managed by the Department and all sites managed by contracted providers on behalf of the Department have a documented "Onsite Overdose Response" protocol that provides specific guidance on what to do if an individual overdoses on the property or in the presence of staff.

The Department also requires staff and contracted providers to submit a Critical Incident Report (CIR) to HSH when there is an onsite overdose and/or overdose reversal.



d. Onsite Naloxone Access Protocol

HSH requires that all sites managed by the Department and all sites managed by contracted providers on behalf of the Department have a documented “Onsite Naloxone Access” protocol detailing the specific procedures, roles, and responsibilities that will be implemented to procure, manage, and monitor inventory to maintain a readily available onsite supply. Naloxone should be accessible 24-hours a day in a fixed location on every floor in “Emergency Naloxone Stations” *(ENS) and installed per the Americans with Disabilities Act **([ADA](#)) [compliance specifications](#). Please note differences in protocol for each type of program you offer, as necessary.

Despite due diligence from HSH and HSH-funded providers, there may be extenuating circumstances (e.g., supply issues) beyond our control that limit our ability to guarantee naloxone will be available 100% of the time. HSH and HSH providers are not expected to purchase naloxone if there are supply issues. It is important to communicate your program’s naloxone distribution as a courtesy service and connect program participants to additional naloxone resources in the community. Providers accessing naloxone through the [CA Naloxone Distribution Project](#) (NDP) are protected from civil action and/or criminal prosecution under CA State Legislature [CIV 1714.22](#). ***If your agency is not currently receiving naloxone through NDP and/or does not currently have ENS stations installed at all of your sites, please contact the San Francisco Department of Public Health’s Office of Overdose Prevention (Rob.Hoffman@sfdph.org) for support.***

**The “Emergency Naloxone Station” (ENS) model is an evidence-based strategy for reducing fatal overdoses by targeting distribution of naloxone to individuals who are most likely to witness or experience an opioid overdose. ENS are wall-mounted containers stocked with naloxone, located in a common area on each floor, providing 24-hour access that is simple to monitor and manage.*

***ADA Specifications: Can’t extend over 4” into the circulation path unless it is lower than 27” above a finished floor (AFF). Over 80” AFF needs to be cane-detectable. 48” Max AFF (unless obstructed by table/counter) for side and forward reach ranges for people in wheelchairs.*

e. Training

Staff in designated Department and provider agency roles which involve interacting directly with clients and/or who regularly work in a residential setting (including shelter, crisis interventions, and housing), are required to complete an annual training on overdose recognition and response. HSH and provider staff can either take the virtual overdose recognition and response training offered by DPH, or another training that includes the same key information.

To fulfil this policy’s requirement, such training must include:

- The philosophy and guiding principles of overdose prevention and the continuum of city services
- How to respond to and reverse overdoses
- How to effectively debrief and support staff and guests with the trauma that can accompany the experience of an overdose

Staff and grantees who have taken the online overdose recognition and response training at least once



before can fulfill the annual training requirement by taking an [online refresher course on opioid overdose recognition and response](#). The refresher course is available through SF Learning (employee portal) and LearnSFDPH.org.

f. Implementation by Provider Partners

Beginning on the effective date of the HSH Overdose Prevention Policy in 2022, and on a rolling basis upon initial execution or upon amendment, designated HSH contract and grant agreements will include language requiring compliance with the following elements of the HSH Overdose Prevention Policy:

- Provision of referrals to the City's continuum of services, including substance use treatment programs and related services by all providers whose HSH contracts include case management, social work, navigation, and assessment services. This requirement will be effective within 30 days of the start of contracted services.
- Adoption of program enrollment/eligibility criteria that are reflective of the requirements included in your Grant Agreement / Contract with HSH, and the requirements of other funders in the project as appropriate.
- Posting of information provided by DPH about naloxone, syringes, and overdose prevention services in an area easily accessible to program participants. This requirement will be effective within 30 days of contract execution.
- Timely CIR reporting to HSH following an overdose incident. This requirement will be effective immediately upon contract execution.
- Delivery of mandatory annual overdose prevention training and training in the Onsite Overdose Response policy for all staff who interact directly with program participants and/or who work in a residential setting (including shelter, crisis interventions, and housing).
- Requirement to have an overdose prevention policy and overdose prevention response plan, including protocols for responding to an onsite overdose. This requirement will be effective within 90 days following contract execution.

HSH will ensure that contracted providers that manage property on behalf of the Department or provide direct services to program participants implement policies and protocols in line with this policy through the Department's contractual agreements and regular program monitoring process.



**Appendix D: Department of Emergency Management Overdose
Prevention Policy – 2025 Update**



Daniel Lurie
Mayor

Department of Emergency Management

San Francisco City Hall, Room 344
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
Phone: (415) 558-3800



Mary Ellen Carroll
Executive Director

Department of Emergency Management Overdose Prevention Policy

Revised December 2025

I. Purpose and Application of Policy

The Department of Emergency Management (DEM) leads multi-agency coordination, planning, and response efforts to street conditions and crises across San Francisco. This includes interacting with and supervising staff and contractors who interact with people at risk of overdose on our City's streets. Therefore, this Policy serves as a guidance document ensuring that staff promote connections to recovery, treatment, overdose prevention, and other services as part of daily work.

DEM is committed to a collective and collaborative approach to recovery and overdose prevention alongside partners from many departments and agencies, including the Department of Public Health (DPH), the Department of Homelessness and Supportive Housing (HSH), and the Human Services Agency (HSA). The shared commitment among these departments is that all City agencies who interact with persons at risk of overdose have an equal responsibility to respond to crisis on our streets in a coordinated way with the highest possible impact.

All coordinated operations under DEM's oversight will have procedures and systems in place to support staff who respond to overdoses and empower City and community partners to prevent and effectively respond to drug overdoses through the following approaches:

- Fostering collaborative partnerships with other City departments, including HSH, HSA, DPH, and SFFD, to advance the Policy and to share lessons learned and best practices.
- Holding responsive staff accountable to delivering overdose interventions, including but not limited to connections to drug use recovery and treatment services.
- Requiring training for all staff and contractors on overdose prevention and reversal, including how to deliver services in a culturally competent, creative, and non-judgmental way that also allows for help for those not yet ready for abstinence but must find ways to lessen the harm of their behavior.
- Working with relevant community stakeholders, including people with lived experience, those at risk of overdose, and contracted provider partners, to understand best practices that will inform effective policies and protocols.

II. Policy

The Board of Supervisors enacted Ordinance No. 084-21 in June 2021. The Ordinance requires DEM to annually submit to the Board of Supervisors a departmental policy describing how the Department and its grantees that manage property on behalf of the Department and/or provide direct services to program participants at risk of overdose will promote strategies to reduce drug overdose and refer people to the City's continuum of services ("Overdose Prevention Policy"). The DEM Overdose Prevention Policy includes the minimum requirements as stated in Sec. 15.17 of the Administrative Code (Department Overdose Prevention Policies).

To promote recovery from substance use and reduce drug overdoses to the best of the Department's ability, DEM will implement the policies outlined below.

- During all street coordination and response efforts involving those at risk of overdose, DEM staff and contractors will provide referrals to overdose prevention and drug treatment programs and access to the continuum of City services available.
- Overdose prevention training will be required for all DEM and contracted staff who interact directly with clients at risk of overdose. These same trainings will also be provided for staff and contractors from other City departments who participate in operations or activities coordinated by DEM.
- DEM will maintain overdose reversal and response protocols that must be followed by all staff participating in coordinated response efforts. Naloxone must be easily accessible at all multi-agency operations coordinated by DEM.

III. Procedures

A. Substance Use Treatment and Harm Reduction Programs and Services

DEM staff leading coordinated efforts to respond to crises on the streets will make available informational materials from DPH and other partners about how to access the continuum of City services, including substance use treatment. DEM will work with partners to deepen and explore further partnerships that provide access to drug treatment directly from street encampments. DEM will consistently provide and refer clients to the City's continuum of care and programs by reviewing departmental protocols regularly to identify opportunities to continue and expand services and referrals during coordinated crisis response operations. DEM will also require agency partners and stakeholders to provide referrals to treatment and other relevant services during all operations coordinated by DEM.

B. Resource Posting

DEM will require that all staff assigned to multi-agency operations coordinated by DEM will be familiar with information about where and how to access naloxone, syringes, and other overdose prevention supplies and services. This must include but is not limited to the location and schedule of syringe access and disposal services, referral information about naloxone access, and the schedule of overdose prevention and naloxone distribution services.

Available printable resources are located on two public websites managed by DPH and updated regularly:

- Overdose prevention, care and treatment in SF: <https://sf.gov/substance-use-services-and-overdose-prevention>
- Care and treatment services for addiction to drugs and alcohol: <https://www.sf.gov/information--care-and-treatment-services-addiction-drugs-and-alcohol>

C. Training

Overdose recognition, response, and prevention training will be required for all staff assigned to multi-agency operations coordinated by DEM and therefore may interact directly with people at risk of overdose. Staff can either take the virtual overdose recognition and response training offered by DPH or another training that includes the same key information.

The training must include:

- The philosophy and principles of substance use treatment, overdose prevention, and the continuum of City services.
- How to respond to and reverse overdoses.
- How to effectively debrief and support other staff and guests manage the trauma that can accompany the experience of witnessing, reversing, or attempting to reverse an overdose.

Initial trainings must be completed within 30 days of hire, and annual refresher trainings are required. City employees may access the training in SF Learning (employee portal) and contractors and/or grantees may access it through the [SFDPH Center for Learning and Innovation](#).

D. Onsite Overdose Reversal and Response Protocol

DEM staff who regularly work with people at risk of overdose will take the steps outlined below if a person is exhibiting signs of overdose during a multi-agency operations coordinated by DEM:

- Follow medical protocols as outlined in the required overdose trainings, including but not limited to appropriate use of nasal naloxone.
- Activate local first responders via 9-1-1.
- Report the incident to the operation's incident commander and DEM Director of Coordinated Street Response (or equivalent) as soon as reasonable but within the same day as the incident occurs. Initial reports should be by any medium necessary, with a follow up written report within 24 hours. Written reports should include:
 - Documented use of naloxone, including number of doses.
 - Indication of whether the overdose was reversed and within what time period.
 - Any other documentation required to support the incident report.

**Appendix E: Human Services Agency Overdose Prevention Policy
– 2025 Update**



Overdose Prevention Policy

San Francisco Human Services Agency | FY25-26

I. Purpose of Policy

Ordinance 084-21, passed by the Board of Supervisors in June 2021, requires SFHSA to annually submit to the Board of Supervisors a departmental policy describing how the department and its grantees that provide direct services to clients who are at risk of overdose will promote strategies to reduce drug overdoses and connect people to treatment services ("Overdose Prevention Policy").

As a City department which serves over 200,000 San Franciscans annually with a robust network of social service programming, the San Francisco Human Services Agency (SFHSA) has a responsibility to help address San Francisco's drug overdose epidemic. The purpose of SFHSA's Overdose Prevention Policy is to empower our staff and community partners with information and resources to prevent and effectively respond to drug overdoses when we interact with members of the public who are at risk of overdose.

II. Principles of Policy

In 2021, the San Francisco Human Services Agency, the San Francisco Department of Public Health (DPH), the Department of Homelessness and Supportive Housing (HSH) and the Department of Emergency Management (DEM) all committed to a collective and collaborative approach to address San Francisco's overdose crisis. Together, we developed a set of guiding principles to support the development and implementation of each of our departmental Overdose Prevention Policies as required by Administrative Code Section 15.17. Advancing a citywide approach to the drug overdose epidemic in San Francisco, SFHSA's policy is guided by the following Citywide principles:

- ✓ Service providers are accountable for delivering interventions that reduce the harmful economic, social and physical impacts of substance use and related behaviors.
- ✓ Each program is part of a continuum of City services and should work collaboratively with other programs in the system and across the City
- ✓ Services should be culturally competent, non-judgmental, and delivered in a manner that demonstrates respect for individual dignity, personal strength, and self-determination.
- ✓ The service continuum must include strategies to engage, motivate, and support the complex needs of people who may be at risk of overdose.
- ✓ Civil service and contracted staff should receive ongoing training on the continuum of services, overdose prevention, and naloxone access to prevent overdose deaths and connect clients to treatment and recover services.
- ✓ Comprehensive care and treatment should include strategies that reduce harm for those clients who are unable or unwilling to modify their unsafe behavior.



- ✓ Relapse or periods of return to unsafe health practices may be part of an individual's journey to recovery and should not be equated with or conceptualized as “an individual's failure of treatment”.
- ✓ People must be offered a range of treatment outcomes in a continuum of care; from reducing unsafe practices to abstaining from dangerous behavior.
- ✓ A safety-centered recover model prioritizes strategies that protect life, promote recovery, and strengthen safety for individuals and the communities in which they live and work.
- ✓ Programs should create opportunity for input and incorporate feedback from community or program participants to improve effectiveness.

III. Overdose Prevention Policies

A. DRUG TREATMENT AND HARM REDUCTION PROGRAMS AND SERVICES

Implemented January 1, 2025, single adults with a substance use disorder (SUD)¹ who want to access San Francisco's county-funded cash assistance, known as CAAP, are required to be enrolled in treatment and services. SFHSA's community partner, Westside Community Services, will work with the client to assess whether someone has a SUD and, if so, determine the most appropriate type of treatment to meet their unique needs. SFHSA consulted with experts at the San Francisco Department of Public Health and other subject matter stakeholders to identify the range of treatment options and treatment guidelines for this pathway. Options include a range of interventions: medical withdrawal management, medications for addiction treatment, outpatient individual or group therapy, residential treatment, contingency management, mutual aid, abstinence-based treatment, among other possibilities. As of November 2025, 332 individuals have been connected to this program, with an average 75% engagement rate in treatment per month. This “Treatment Pathway Initiative” is an important tool to address San Francisco's opioid overdose epidemic.

SFHSA also refers families in the CalWORKs program in need of substance abuse treatment to both contracted community-based and City treatment providers. Additionally, we will actively encourage SFHSA community partners, as appropriate, to provide treatment resources and referrals in their programs and locations.

B. TRAINING

SFHSA case managers, psychologists, and physicians stationed at our 1235 Mission Street Service Center, which serves a very vulnerable population of extremely indigent single adults, have all been trained how to detect a drug overdose, and six on-site physicians have learned how to administer naloxone, if needed. We also trained our security guards at 1235 Mission Street Service Center on how to recognize an overdose and to consult an onsite physician if there is an overdose. Finally, through a contract with RAMS, onsite CBO staff provide drug and alcohol counseling as part of their counseling program.

¹ The Voter approved Proposition only requires treatment if someone is determined to have a substance use disorder related to *illegal* substances.

Additionally, our team of public health nurses in our Department of Disability and Aging Services are trained to administer Narcan. They work in the field, conducting home visits, often in permanent supportive housing and SROs in the community.

For the rest of our staff, DPH developed a virtual overdose recognition and response training, which became available to all City staff through the Controller's E-Learning Platform in August of 2022.

The overdose recognition and response training includes:

- The philosophy and guiding principles of overdose prevention and harm reduction;
- How to detect an overdose;
- How to respond to and reverse overdoses; and
- How to effectively debrief and support staff and guests with the trauma that can accompany the experience of an overdose.

Implementation by SFHSA Staff:

Since the on-line overdose prevention training module became available, we have been strongly encouraging SFHSA's staff members to participate. In addition, we have a designated cadre of SFHSA staff working at each of our public-facing service centers who have taken the training so that we are prepared in the event of an overdose incident at any of our service centers.

In addition, naloxone is easily accessible at all SFHSA public-facing service centers and is available to our staff who work in the field so they can have it on them in case they encounter an individual overdosing while working off-site.

Implementation by Contracted Community-Based Partners:

DPH also made its training module available to all City contracted providers through the DPH E-Learning Platform (<https://learnsfdph.org/user-login/>). SFHSA is strongly encouraging all contracted community partners to participate in the training. SFHSA will solicit feedback on the quality of the training and the best approaches for encouraging others to attend.

C. POSTING INFORMATION ABOUT NALOXONE, SYRINGES, AND OVERDOSE PREVENTION SERVICES

DPH has created a [public website](#) of overdose prevention resources. Each month the overdose prevention resource webpage is updated so that City staff, providers, and the public may have convenient access to the updated schedules.

The resources on the website include:

- Up-to-date information about the location and schedule of syringe access and disposal services;
- Up-to-date referral information about naloxone access and the schedule of overdose prevention and naloxone distribution services.

SFHSA links to this information on www.SFHSA.org and posts the information publicly at SFHSA's service centers.

D. ONSITE OVERDOSE RESPONSE POLICY

All SFHSA service centers have a documented on-site overdose response policy and protocols that provide specific guidance on what to do if an individual overdoses on the property.

SFHSA requires staff to submit a Critical Incident Report in the event of an onsite overdose so that we may track and understand the frequency of such events.