

LEGISLATIVE DIGEST

[Administrative Code - Care Coordination Pilot Project]

Ordinance amending the Administrative Code to establish a three-year pilot project that will provide coordinated care planning for individuals who are frequent users of City social services and other City resources.

Existing Law

Currently, there is no legal requirement that the Department of Public Health develop care coordination plans for individuals who are frequent users of social services and other City resources.

Amendments to Current Law

Under the proposed ordinance, the Department of Public Health would be required to launch a three-year pilot program aimed at coordinating care for individuals who are frequent users of social services and other City resources. A frequent user would be defined as a person who is experiencing homelessness, and who has met any of the following additional criteria on at least five separate occasions during the preceding year:

- Made a patient visit to a hospital emergency department;
- Was booked into a San Francisco jail; or
- Was detained for evaluation and treatment under Section 5150 of the California Welfare and Institutions Code.

As part of the pilot program, the Department would be required to use its best efforts to develop a Care Coordination Plan for each person who meets the definition of a frequent user of social services. A Care Coordination Plan would address the individual's needs for outreach, engagement, housing, health, and social services. In developing Care Coordination Plans, the Department of Public Health may consult with the Department of Homelessness and Supportive Housing, the Human Services Agency, and the San Francisco Police Department, as necessary.

The ordinance would require the Department of Public Health to submit an annual report to the Board of Supervisors and the Mayor describing the number of people who received Care Coordination Plans under the Pilot Project, and estimating the effectiveness of the Pilot Project at connecting these individuals to supportive housing, and reducing their need for intensive interventions at City hospitals and jails.

Background Information

Over recent years, San Francisco has become home to hundreds of individuals who experience profound challenges due to a history of trauma, poverty, addiction, poor health, and/or untreated mental illness. The majority of these individuals are experiencing homelessness or are at high risk for homelessness. These individuals engage with multiple City departments during the course of the year, as they cycle through San Francisco's hospitals, jails, and social service programs, while often returning to the streets upon release from a hospital, jail, or other institutional setting.

San Francisco can and must do a better job of meeting the needs of frequent users of social services by working across departments to coordinate their care. Care coordination will allow departments to be proactive and economical in their approach, and will enable them to anticipate and arrange for services as new needs arise.

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