

SAN FRANCISCO MENTAL HEALTH SERVICES ACT (SFMHSA)  
INTEGRATED PLAN *At-A-Glance*

| S.F. MHSA INTEGRATED Service Categories       | RFP likely Summer/Fall 2014 | MHSA Program Name (by funding component)                  | MHSA Program Summary   | Projected FY 14/15 Budget | Integrated Plan Highlights   |
|---|-----------------------------|---|--|---------------------------|--|
| <b>Community, Services and Supports (CSS)</b> |                             |   | <i>80% of total MHSA revenue (after INN calculated)<br/>51% must be allocated to serve FSP clients</i>   |                           | Total CSS Budget:<br>\$21,427,522  |
| Recovery Oriented Treatment Services          | X                           | <b>CSS Full Service Partnership 1. CYF (0-5)</b>          | A central component of MHSA, Full Service Partnership (FSP) programs reflect an intensive and comprehensive model of case management based on a client- and family-centered philosophy of doing “whatever it takes” to assist individuals diagnosed with SMI or SED to lead independent, meaningful, and productive lives. | \$ 400,000                | * Allocated \$400K (plus additional EPSDT revenue TBD) to develop new FSP program for children 0-5 and their families.   |
| Recovery Oriented Treatment Services          |                             | <b>CSS Full Service Partnership 2. CYF (6-18)</b>         | Ten FSP programs serve a diverse group of clients in terms of age, race/ethnicity, and stage of recovery. Services include integrated, mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help support.  | \$ 1,231,387              |  |
| Recovery Oriented Treatment Services          |                             | <b>CSS Full Service Partnership 3. TAY (18-24)</b>        |  | \$ 1,076,468              | * FSP expansion described below includes new Case Manager for TAY.   |
| Recovery Oriented Treatment Services          |                             | <b>CSS Full Service Partnership 4. Adults (18-59)</b>     |  | \$ 5,030,795              | * Allocated \$600K (plus additional MediCal revenue TBD) to expand clinical capacity, housing access and peer supports.<br>* Expansion includes Cantonese speaking Case Manager and two Case Managers to serve forensics population.<br>* Transferred SF First FSP staff to new TRANSITIONS FSP focused on client transitions from hospital discharge to engagement in outpatient clinic care. |
| Recovery Oriented Treatment Services          |                             | <b>CSS Full Service Partnership 5. Older Adults (60+)</b> |  | \$ 688,328                |  |

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| Housing                                       |                                | <b>CSS Full Service Partnership Housing Program</b>                           | Available to Full Service Partnership clients, the FSP Housing Program provides access to emergency stabilization housing, transitional housing for TAY, permanent supportive housing and other supports designed to help FSP participants gain access to and maintain housing. 71 units currently occupied - 9 new units still in the pipeline.   | \$ 614,548                   | <ul style="list-style-type: none"> <li>* Conducting a feasibility study of different models to expand access to housing.</li> <li>* Evaluating the impact of housing with a focus on permanent placements.</li> <li>* Purchasing 3 new units (Rosa Parks Sr. Apts) with interest earned from initial housing allocation.</li> </ul> |
| Recovery Oriented Treatment Services          |                                | <b>CSS Other Non-FSP 1. Behavioral Health Access Center</b>                   | The Behavioral Health Access Center (BHAC) is a portal of entry into San Francisco's overall system of care. BHAC co-locates the following five behavioral health programs: 1) Mental Health Access for authorizations into the Private Provider Network, 2) the Treatment Access Program for assessment and placement into addiction and dual diagnosis treatment, 3) the Offender Treatment Program to place mandated clients into addiction and dual diagnosis treatment, 4) Centralized Opiate Placement Evaluation (COPE) and Office-Based Buprenorphine Induction Clinic (OBIC) for evaluation and placement into Opiate Replacement Therapy, and 5) the CBHS Pharmacy. The Pharmacy, among its many services, provides specialty behavioral health medication packaging and serves as a pharmacy safety net for all CBHS clients. | \$ 1,004,689                 | <ul style="list-style-type: none"> <li>* Expanded bilingual (Cantonese) pharmacy capacity</li> </ul>  |
| Recovery Oriented Treatment Services          | X                              | <b>CSS Other Non-FSP 2. Prevention and Recovery in Early Psychosis (PREP)</b> | PREP is an early intervention treatment program for schizophrenia and early psychosis for individuals between the ages of 16 and 30 to support symptoms remission, active recovery, and full engagement with coworkers, peers, and family members. PREP treatment services include: algorithm-based medication management, cognitive rehabilitation, cognitive behavioral therapy for early psychosis, multi-family groups (MFG), strengths-based care management, and neuropsychiatric and other advanced diagnostic services.  | \$ 931,770                   | <ul style="list-style-type: none"> <li>* Plan to strengthen linkage between PREP program and SF General Hospital, Psych Emergency Services (PES) and outpatient clinics.</li> </ul>   |
| Recovery Oriented Treatment Services          | X                              | <b>CSS Other Non-FSP 3. Trauma Recovery</b>                                   | The Trauma and Recovery Project addresses the need for community-based, client-driven behavioral health intervention for individuals, families and communities who are impacted by violence. Services include outreach, assessment, crisis and short-term counseling, case management and mental health consultation to community organizations. The focus of treatment is recovery from traumatic response and the symptoms that stem from chronic and/or complex trauma.   | \$ 647,225                   | <ul style="list-style-type: none"> <li>* Planning to expand access to trauma treatment services in Southeast San Francisco (D-10) by working with a community coalition to develop a new program model. Partnering with Trauma Training Initiative staff to oversee this effort.</li> </ul>   |

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| Recovery<br>Oriented<br>Treatment<br>Services |                                | <b>CSS Other Non-FSP 4.<br/>Integration of Behavioral Health<br/>and Primary Care</b>                 | Behavioral health clinicians work as a member of a primary care team providing services to patients in primary care clinics. Services include the delivery of brief, evidence-based and practical interventions, consultation to primary care team members, and self- and chronic-care management services. This program also supports primary care clinicians providing services in mental health clinics.   | \$ 1,474,087                 | * Contributing to the development of Behavioral Health Homes (BHH), Behavioral Health Clinics where clients will receive an increased level of comprehensive team-based care. |
| Recovery<br>Oriented<br>Treatment<br>Services | X                              | <b>CSS Other Non-FSP 5.<br/>Integration of Behavioral Health<br/>Into the Juvenile Justice System</b> | All youth detained for more than 72 hours at San Francisco's Juvenile Justice Center are assessed for behavioral health needs. Any identified needs are presented to the Juvenile Probation Department to be addressed in case planning with local courts. The program connects and supports the engagement of youth and families in appropriate and effective mental health services. MHSA also funds psychiatric services in the Youth Guidance Center Clinic – a clinic providing free primary health care, case management and psycho-social services to incarcerated youth ages 8-18.  | \$ 580,192                   | * Expanded to serve youth on probation attending Civic Center High School.  |
| Recovery<br>Oriented<br>Treatment<br>Services |                                | <b>CSS Other Non-FSP 6. Dual<br/>Diagnosis Residential Treatment</b>                                  | Dual diagnosis residential treatment and support is provided to individuals who do not have MediCal coverage and who would otherwise not be eligible for services. An integrated model of care allows clients to receive the full spectrum of services, including: substance abuse treatment, mental health services, primary medical care, case management, parolee services, workforce development, and gender-specific residential treatment homes for adults with co-occurring disorders.   | \$ 85,309                    | * Will explore how ACA impacts need to fund services for non-MediCal population.  |
| Peer-to-Peer<br>Support Services              | X                              | <b>CSS Other Non-FSP 7. Peer-to-<br/>Peer Supports: Clinic and<br/>Community-Based</b>                | Peer-to-Peer Support Services provides individuals with lived experience in the mental health system the opportunity to assist their peers in developing the skills necessary to pursue meaningful roles in their lives. Many peer-support staff are graduates of the Peer Specialist Mental Health Certificate, a 12-week program designed to prepare consumers and/or family members with the skills & knowledge for entry-level employment in the behavioral/mental health system. In addition to the peer certificate programs, MHSA also funds a peer-run drop-in center and NAMI peer-led support and education groups in various CBHS clinics. | \$ 2,468,875                 |   |

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| Vocational Services                     | X                           | <b>CSS Other Non-FSP 8. Vocational Services</b>   | Vocational services assist consumers and family members in securing and maintaining meaningful employment. Vocational services include job coaching, situational assessment, trainings, and job placement services in the areas of 1) Information Technology 2) Basic Construction 3) Hospitality/Culinary and 4) Behavioral Health Services.  | \$ 228,252                | * First Impressions is a new (recently approved) INN project.  |
| Housing                                 |                             | <b>CSS Other Non-FSP 9. Emergency Stabilization Housing (50% FSP)</b>                                       | Emergency stabilization units (ESUs) provide short-term housing stability for clients who are homeless or have been discharged from the hospital or jail. The 25 ESUs are located within three single room occupancy (SRO) hotels in San Francisco. The units are available to clients referred by Full Service Partnership programs, Intensive Case Management programs and Central City Hospitality House.   | \$ 393,637                |  |
| Housing                                 |                             | <b>CSS Other Non-FSP 10. Housing Placement and Supportive Services (Direct Access to Housing) (25% FSP)</b> | MHSA funding has allowed for Direct Access to Housing to expand capacity to serve MHSA clients with the addition of an Intake Coordinator, focused on placing clients in the setting most appropriate to their needs, and a Nurse Practitioner.  | \$ 260,508                |  |
| Housing                                 |                             | <b>CSS Other Non-FSP 11. ROUTZ TAY Transitional Housing (50% FSP)</b>                                       | MHSA ROUTZ TAY Housing Partnership provides 40 housing slots at the Aarti Hotel (located at 391 Leavenworth Street) and 10 additional slots at scattered housing sites.  | \$ 1,089,465              |  |
| Recovery Oriented Treatment Services    |                             | <b>CSS Other Non-FSP 12. Expanding Outpatient MH Clinic Capacity</b>  | In recognition of disparities in access for certain populations, this program expands the staffing capacity at outpatient mental health clinics to better meet the treatment needs of target populations such as older adults and monolingual communities.   | \$ 338,323                | * Planning to hire a Wellness and Recovery Program Manager to collaborate with providers and stakeholders to develop, implement and evaluate projects promoting wellness and recovery practices across the CBHS Systems of Care. |
|   |                             | <b>CSS Admin</b>  | The Admin budget includes indirect administrative costs that are 'incurred for a common or joint purpose and cannot be readily identified as benefiting only one MHSA program or project'. These costs typically include salaries and benefits of employees 1) working to administer MHSA funding (e.g. accounting, contracts); 2) working to further the principles of MHSA (e.g. cultural competence); 3) managing program planning and technical assistance activities. Admin expenses also include Community Program Planning expenses as well as MHSA operating expenses not related to direct client services (e.g. rent, utilities) | \$ 2,222,592              |  |

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|  |                                | <b>CSS Evaluation</b>  | Direct and indirect costs associated with collecting, analyzing, and using information to answer questions about MHSA projects, policies and programs, particularly regarding their effectiveness and efficiency and whether the program goals are appropriate and useful.   | \$ 661,071                       |   |
| <b>Prevention and Early Intervention (PEI)</b><br><i>20% of MHSA revenue (after INN calculated)</i><br><i>* Plan proposes allocating 2% of PEI funding to CalMHSA for statewide PEI programs</i> |                                |  |  | Total PEI Budget:<br>\$7,278,578 |   |
| Mental Health<br>Promotion and<br>Early<br>Intervention  | X                              | <b>PEI 1. Stigma Reduction</b>                                 | Sharing Our Lives, Voices and Experiences (SOLVE) is a stigma elimination program. SOLVE trains people in the community who have been living with mental health challenges to share their personal experiences.  | \$ 201,469                       | * Includes funding for 4th Annual MHSA Recovery Award Ceremony and consumer engagement activities and training for MHSA Advisory Committee. |
| Mental Health<br>Promotion and<br>Early<br>Intervention  | X                              | <b>PEI 2. School-Based Mental Health Promotion (K-12)</b>      | School-Based Mental Health Promotion – a collaboration of community-based organizations and San Francisco K-12 campuses – applies school-based best practices that address non-academic barriers to learning. With public schools serving as hubs, this initiative offers a range of supports and opportunities for children, youth, and their families to support student success by combining the full spectrum of prevention, early intervention, and linkages to behavioral health services. | \$ 1,119,589                     |   |
| Mental Health<br>Promotion and<br>Early<br>Intervention  | X                              | <b>PEI 3. School-Based Mental Health Promotion (Higher Ed)</b> | Student support services are designed to increase university access and enrollment, enhance retention and maximize graduation rates among those at risk for mental illness, particularly members of underserved and underrepresented communities, and their family members who are preparing for careers in the public behavioral health field.  | \$ 417,226                       |   |

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| Mental Health<br>Promotion and<br>Early<br>Intervention | X                              | <b>PEI 4. Population Focused<br/>Mental Health Promotion and<br/>Early Intervention</b> | Population-focused mental health promotion services are typically delivered in community-based settings where mental health services are not traditionally provided. This program supports activities including, outreach and engagement, mental health promotion and psycho-social education, behavioral health screening and assessment, referrals and linkage, and short-term therapeutic services. Target populations include:<br>* African American<br>* Asian and Pacific Islander (API)<br>* Native American<br>* Latino/Mayan<br>* Arab Refugees<br>* Homeless Adults<br>* Homeless or System Involved TAY (18-24)<br>* LGBTQ<br>* Socially Isolated Older Adults   | \$ 3,597,372                 | * Working with providers to develop shared performance objectives for all population-focused mental health promotion programs.<br>* Older Adult Peer-to-Peer program (INN-15) being developed in partnership with Curry Senior Center. |
| Mental Health<br>Promotion and<br>Early<br>Intervention | X                              | <b>PEI 5. Mental Health<br/>Consultation and Capacity<br/>Building</b>                  | The Mental Health Consultation and Capacity Building PEI subcategory is comprised of the following two programs: (1) Early Childhood Mental Health Consultation Initiative (ECMHCI) and (2) Youth Agency Mental Health Consultation (YAMHC). The ECMHCI is grounded in the work of mental health professionals who provide support to children, parents, and caregivers of San Francisco's youngest residents between the ages of 0-5. ECMHCI services are delivered in a variety of settings, including center-based and family child care, homeless and domestic violence shelters, permanent supportive housing facilities, family resource centers and substance abuse treatment centers. YAMHC provides consultation services to agencies who serve youth who are involved in the juvenile justice system or at-risk of being involved in the juvenile justice system. | \$ 1,131,855                 |  |
| Mental Health<br>Promotion and<br>Early<br>Intervention |                                | <b>PEI 6. Comprehensive Crisis<br/>Services</b>   | Comprehensive Crisis Services (CCS) is a multidisciplinary, multi-linguistic program that provides acute mental health and crisis response services to children and adults. In addition to responding to mental health crisis, the team also responds to incidence of gun violence.   | \$ 526,404                   |  |
|   |                                | <b>PEI Admin</b>  | see CSS Admin for description of admin expenses.  | \$ 141,261                   |  |
|   |                                | <b>PEI Evaluation</b>   | See CSS Evaluation for description of evaluation expenses.  | \$ 143,401                   | * Activities include a focused evaluation of K-12 School-Based Programs.   |

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| <b>Innovation (INN)</b><br><i>5% of total MHSA revenue</i> |                                |  |  | Total INN Budget:<br>\$2,766,085 |   |
| Peer-to-Peer<br>Support Services                           |                                | <b>INN 7. Peer Response Team</b><br>(part of Peer-to-Peer Support Services)  | The Peer Response Team (PRT) was created to provide peer support and assistance navigating the community and systems of care for individuals dealing with hoarding and cluttering challenges.  | \$ 215,735                       |   |
| Mental Health<br>Promotion and<br>Early<br>Intervention    | X                              | <b>INN 8. Collaboration with the Faith Community</b> (part of Population Focused Mental Health Promotion)                    | Engages faith-based organizations and families in Bayview/Hunter's Point and Visitacion Valley in order to increase mental health awareness, decrease stigma, and provide social support for consumers, community members, and peers.  | \$ 150,000                       | * Partnering with DPH Population Health and Prevention to explore developing a new model of peer support, recruiting peers from the African American churches in the Southeast. |
|  | X                              | <b>INN 9. Mini Grants</b>  | A community-run grant making program modeled on the funding methodology commonly employed by venture capitalists in the for-profit sector and donor advised funds in a community foundation. Approved through the original INN Plan, this program has yet to be implemented.   | \$ 500,000                       | * Focused on priority populations<br>* Details TBD though CPP.  |
| Workforce<br>Development                                   | X                              | <b>INN 11. Alleviating Atypical Antipsychotic Induced Metabolic Syndrome (AAIMS)</b><br>(part of Vocational Services)        | This pilot program adapted an existing nutrition and exercise protocol into a community mental health setting and integrated shopping and cooking skills training. This program educates consumers on atypical antipsychotics about the connection between diet and health, how to shop based on what is locally available, healthy cooking, and how to exercise to improve fitness and health.  | \$ 233,903                       |   |
| Recovery<br>Oriented<br>Treatment<br>Services              |                                | <b>INN 12. Building Bridges Clinic/School of Linking Project</b><br>(part of Primary Care and Behavioral Health Integration) | Building Bridges, now in its second year, was designed to test a staffing model to promote interagency collaboration between DPH Community Health Programs for Youth (CHPY) clinics and San Francisco Unified School District to develop a streamlined system for professional linkages and referrals for care. The program aims to better meet the behavioral health needs of youth living in the southeast neighborhoods of San Francisco. Funding supports new mental health staff at Balboa Teen Health Center (BTHC), 3rd Street Youth Center and Clinic, and Hawkins Clinic. | \$ 405,361                       |   |
| Vocational<br>Services                                     |                                | <b>INN 14. First Impressions</b> (part of Vocational Services)   | First Impressions (FI) is a basic construction and remodeling vocational program that will assist mental health consumers in learning marketable skills, receive on-the-job training and mentoring, and secure competitive employment in the community.  | \$ 300,000                       |   |

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| Mental Health Promotion and Early Intervention   |                             | <b>INN 15. Building a Peer-to-Peer Support Network for Socially Isolated Older Adults</b> (part of Population Focused Mental Health Promotion) | This locally approved INN funded pilot program seeks to learn how to develop and implement effective peer-to-peer support services in a network of organizations providing health, nutrition and social supports to seniors. Due to changes to the budget and scope of the project, a revised INN Proposal will be submitted to the MHSOAC (see Plan - Appendix B)   | \$ 200,000                        | * (Updated) INN proposal.  |
| Mental Health Promotion and Early Intervention   |                             | <b>INN 16. Building a Peer-to-Peer Support Network for Transgender Individuals</b> (part of Population Focused Mental Health Promotion)        | This locally approved INN funded pilot program seeks to learn how to develop and implement effective peer-to-peer support services across a network of organizations providing health and social supports to Transgender individuals. Due to changes to the budget and scope of the project, a revised INN Proposal will be submitted to the MHSOAC (see plan - Appendix A)  | \$ 259,807                        | * (Updated) INN proposal.  |
| Workforce Development  | X                           | <b>INN 17. MH Certificate for Outreach Paraprofessionals</b> (part of Workforce Development)   | This plan includes a proposal for a NEW INN project (see Appendix C). The Mental Health Outreach Workers (MHOW) Training program aims to train San Francisco street outreach workers, exposed to constant community trauma, on how to best meet the mental health needs of the clients that they encounter in the field, and also how to best deal with one's own experience with trauma. Three sub communities of outreach workers have been identified by our local CPP as frontline programs coming in contact with high rates of trauma. These are: Homeless Youth Outreach Workers Programs and Street Violence Outreach workers, and Asian Community Outreach workers. In total, a cohort of 60 outreach workers will be trained (20 per sub community). | \$ 300,000                        | * New INN proposal.  |
|  |                             | <b>INN Admin</b>   | see CSS Admin for description of admin expenses.   | \$ 201,279                        |  |
| <b>Workforce, Development Education and Training (WDET)</b><br>* Plan proposes \$1.6 million per year of CSS funds will be transferred to WDET |                             |  |  | Total WDET Budget:<br>\$1,591,151 |  |
| Workforce Development  | X                           | <b>WDET 1. Training and TA</b>   | The MHSA supports trainings for health and social service providers to improve their capacity to provide high quality, culturally competent, recovery oriented services. Key components of this work include the implementation of Seeking Safety and Illness Management Recovery (IMR) groups, capacity building for providers serving youth and system-wide (12N) LGBTQ sensitivity training. This program also supports the Trauma Training Institute.  | \$ 648,653                        | * Launched Trauma Training Initiative<br>* Funding evaluation of Wellness Management Recovery groups<br>* New INN proposal for Mental Health Outreach Worker Training Program (see INN #17)<br>* Continues Medicinal Drumming Pilot for another year |



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| Workforce<br>Development  | X                              | <b>WDET 2. Career Pathways</b>              | The Mental Health Career Pathways Program focuses on developing a workforce pipeline that will usher in the next generation of mental health and behavioral health practitioners and include members of underserved and underrepresented communities. Funded projects include a 'career exposure' program for high school students and a Community Mental Health Certificate program at City College.   | \$ 269,365                         | * New partnership with SFUSD on pilot promoting behavioral health professions within the Health Academy at John O'Connell High School.<br>* Updated goals from recent workforce disparities assessment. |
| Workforce<br>Development  |                                | <b>WDET 3. Residency and Internships</b>    | CBHS, in partnership with SFGH and UCSF, established a Public Psychiatry Fellowship Program to enable general psychiatry and child psychiatry fellows to work in CBHS community-based clinics, thereby providing experience and training on how to work in a community-based setting, with the goal of enticing them into future community-based employment. This program also includes funding for a CBHS Intern Coordinator to work collaboratively with CBHS staff, university and college graduate level (Master's level and PhD level) programs and graduate student interns to develop, implement and evaluate a centralized and coordinated public mental health internship/practicum program. | \$ 494,033                         | * New graduate level Intern Coordinator to be hired   |
|   |                                | <b>WDET Admin</b>                           | see CSS Admin for description of admin expenses.  | \$ 141,949                         |   |
|   |                                | <b>WDET Eval</b>                            | See CSS Evaluation for description of evaluation expenses.  | \$ 37,150                          | * Evaluating implementation of Wellness Management and Recovery Groups  |
| <b>Capital Facilities/IT</b><br>Plan proposes \$500k per year of CSS funds be transferred to CF |                                |   |   | Total CF/IT Budget:<br>\$1,555,312 |   |

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| Capital Facilities<br>/Information<br>Technology |                                | <b>IT 1. Consumer Portal</b>                             | CBHS will provide consumers access to their CBHS EHR records via a new consumer portal.   | \$ 121,654                   | * Not going to implement AVATAR's Consumer Connect as proposed in original IT Plan. DPH-wide consumer portal is under development.<br>* DPH will cover cost of new portal yet other budget implications of implementation for CBHS clients are still TBD. |
| Capital Facilities<br>/Information<br>Technology | X                              | <b>IT 2. Vocational IT</b> (part of Vocational Services) | Prepares consumers to provide information technology (IT) support services (i.e., desktop, help desk) at the CBHS IT Department through its Vocational Information Technology Training Program.   | \$ 545,000                   |   |
| Capital Facilities<br>/Information<br>Technology |                                | <b>IT 3. System Enhancements</b>                         | System Enhancements focus on improving the quality and efficiency of behavioral health services and include improving connectivity and IT infrastructure at behavioral health sites, supporting servers that host the Avatar application and other applications related to the delivery of services. System Enhancements also include the expansion of staff capacity to develop reports (clinical productivity, consumer outcomes, etc.) and maintain databases. | \$ 225,000                   | * Planning currently underway will result in detailed expenditure plan.   |
|  |                                | <b>IT Admin</b>  | see CSS Admin for description of admin expenses.  | \$ 163,658                   |   |
| Capital Facilities<br>/Information<br>Technology |                                | <b>Cap 1. Southeast Health Center</b>                    | Renovation will result in a new Southeast Health Campus that will provide integrated services, co-location of five CBHS mental health programs: Child Crisis, Foster Care Mental Health; Family Mosaic Project; Children's System of Care; and the Health and Environment Resource Center (HERC). MHSA is making a \$2M contribution of capital facilities funding to this project. The timeline for development and expenditures is still TBD.                   | TBD                          |   |
| Capital Facilities<br>/Information<br>Technology |                                | <b>Cap 2. South of Market Mental Health</b>              | Renovations at South of Market Mental Health Clinic to better serve MHSA populations and their families. Funds will be allocated to create a peer-run Wellness Center, a more welcoming environment, improve patient flow and increase clinical/staff space. Planning for this project has just begun.  | \$ 300,000                   | * Establish annual allocation of \$500K to make capital improvements at mental health clinics.<br>* First new capital project at SOMA MH.   |
| Capital Facilities<br>/Information<br>Technology |                                | <b>Cap 3. TBD through CPP</b>                            |   | \$ 200,000                   | * Balance of \$500K Capital Facility allocation available for project TBD through community planning process.   |

**TOTAL PROJECTED FY 14/15 MHSA Budget \* \$ 34,618,648**

\* FY 15/16 and 17/18 expected to be comparable to FY 14/15.  
Final budgets for future years will be provided in Annual Updates.