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San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Behavioral Health Services

Budget and Finance Committee Meeting

May 1, 2019



Behavioral Health Services



- Behavioral Health Services (BHS) is the largest provider of behavioral health (mental health and substance use) prevention, early intervention, and treatment services in the City and County of San Francisco
- Our systems of care have:
 - Total Budget: ~\$366M
 - 809 Civil Service FTE
 - Over 80 CBO contractors



Behavioral Health Care Key Concepts



LONG-TERM CHRONIC CONDITION

RELATIONAL ENGAGEMENT IS KEY TO
SUPPORTING CHANGE

CHANGE IS NOT LINEAR

WELLNESS AND RECOVERY IS POSSIBLE



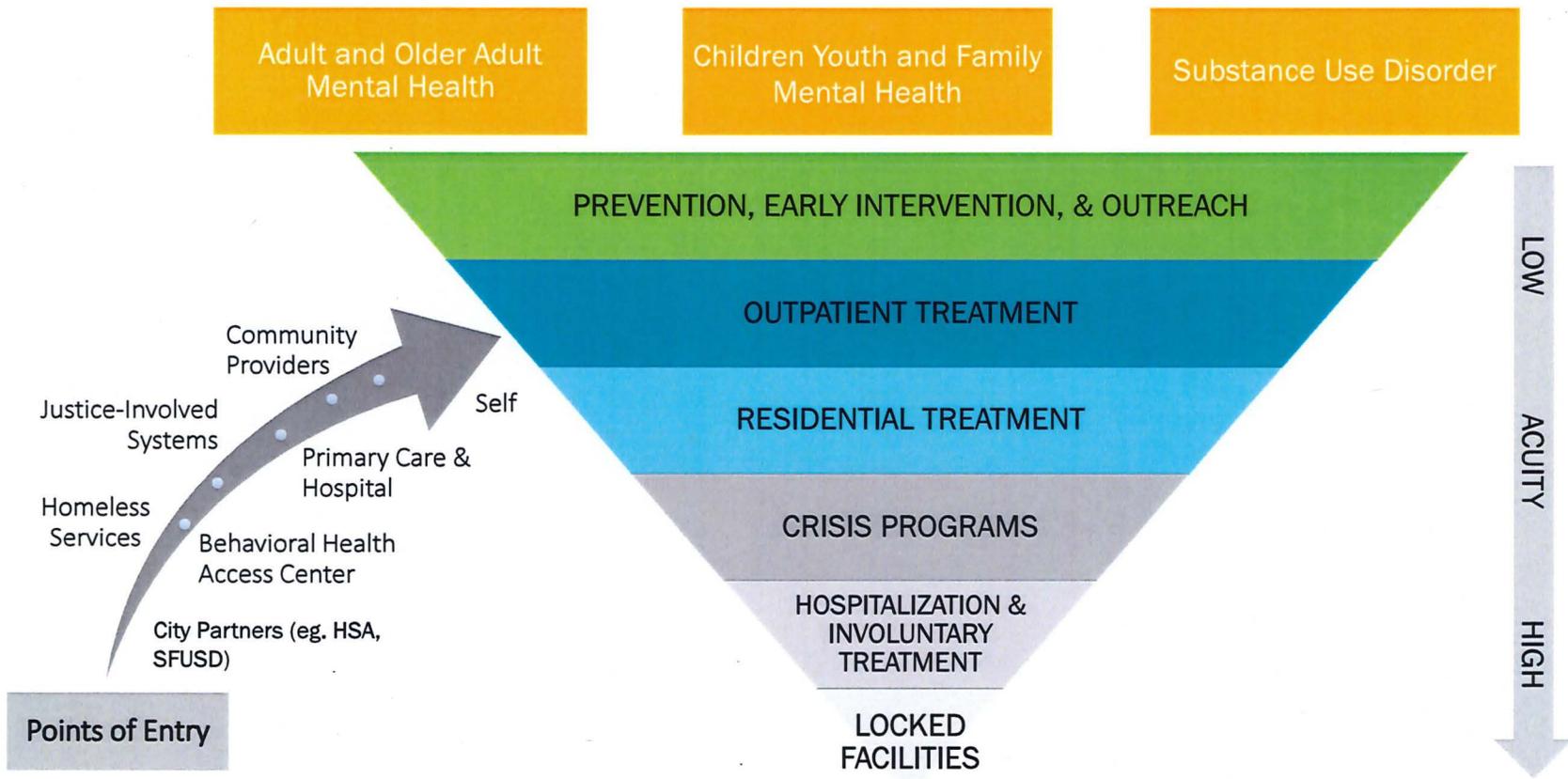
Policy Changes

- ✓ Affordable Care Act Implementation
- ✓ Behavioral Health Parity
- ✓ Drug Medi-Cal Organized Delivery Systems





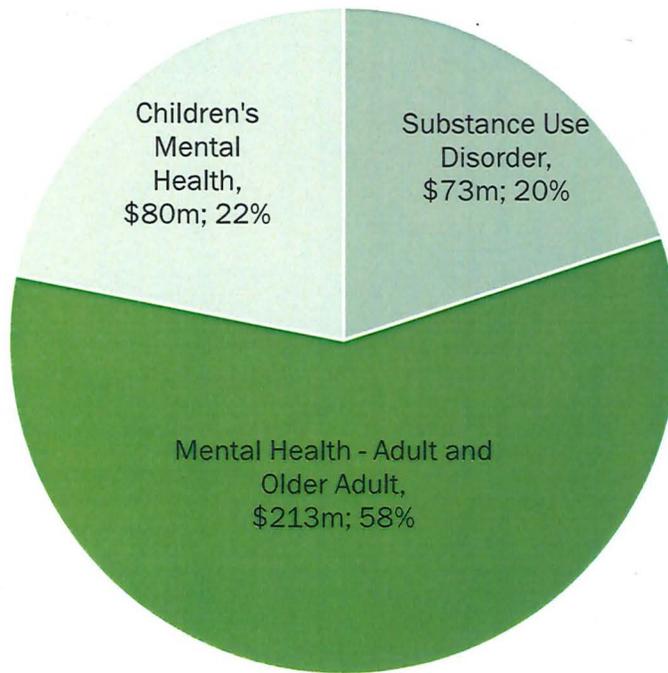
Behavioral Health Services



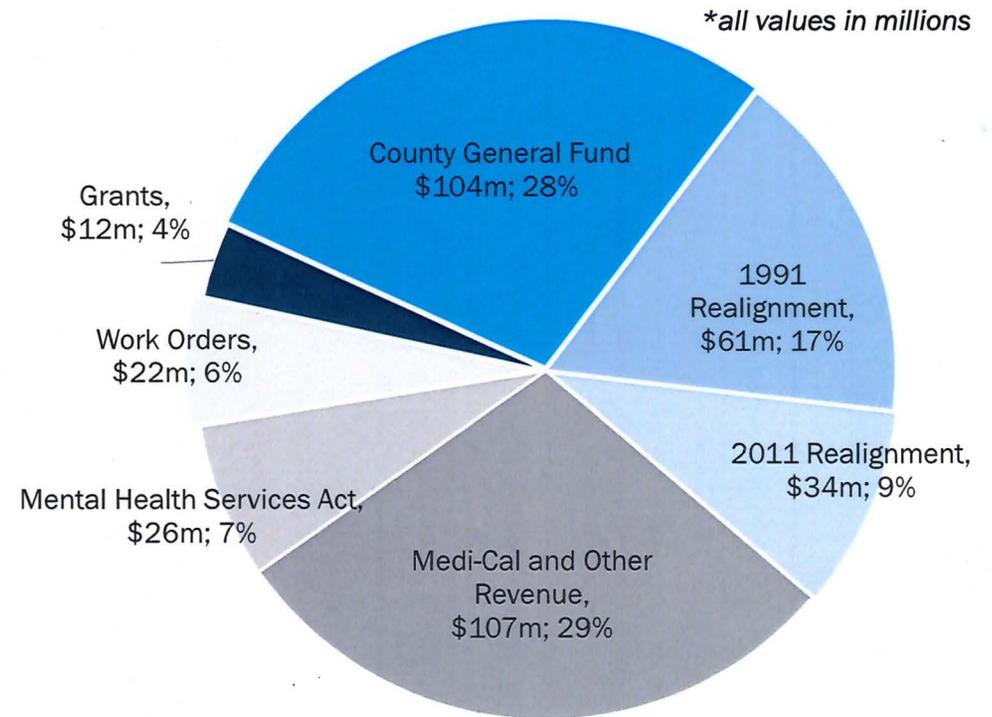


Behavioral Health Services Budgeted Expenditures FY1718

Total Budget: ~\$366 million



Expenditures by System of Care

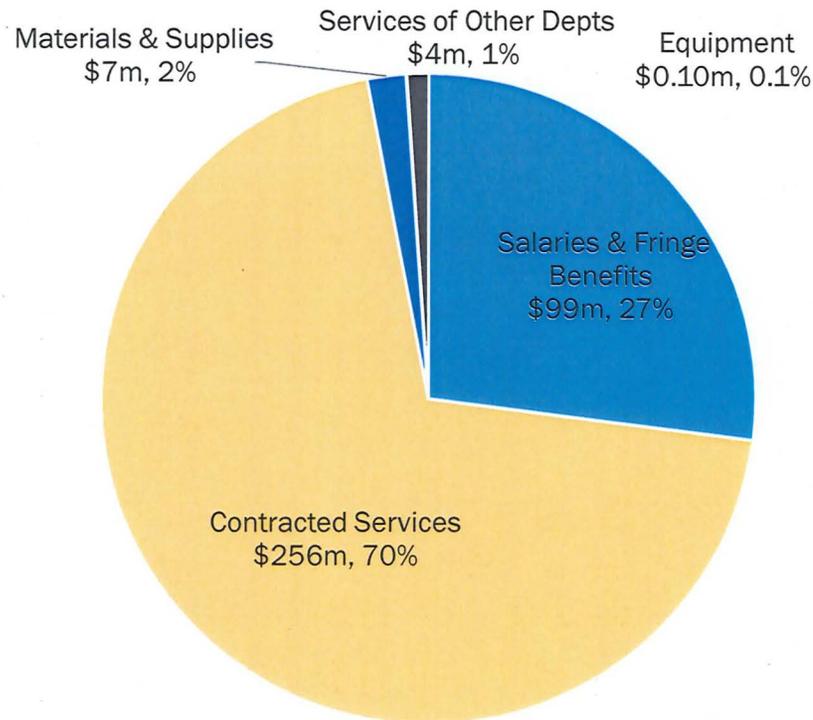


Funding Sources



Behavioral Health Services Budgeted Expenditures FY1718

Total Budget: ~\$366 million



**all values in millions*

Expenditures by Type



BHS Clients Served FY 2017-2018

Mental Health Treatment Clients *

Age Group	Total Clients	Homeless Clients	% Homeless
Children & Youth	4,091	194	5%
Adults & Older Adults	17,233	5,316	31%
Total	21,324	5,510	26%

Substance Use Treatment Clients*

All Age Groups	Total Clients	Homeless Clients	% Homeless
97% of clients are 18+	6,535	3,790	58%

Clients served in both SUD and MH services (overlap): 2,168

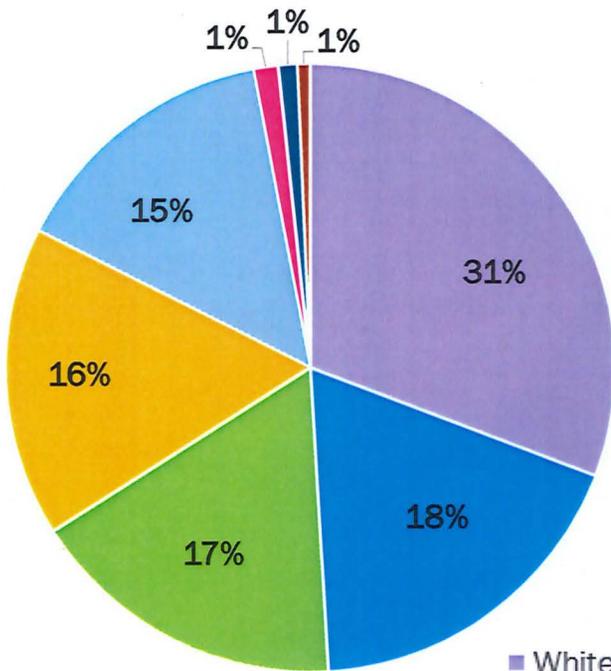
* Source: Avatar clinical encounter data

- BHS serves over 25,000 people in our clinical system of care
- In addition to treatment services, BHS provides many additional prevention and early intervention services to tens of thousands of SF residents through its crisis debriefings, school-based programs, peer programs, vocational services, drop in centers etc.

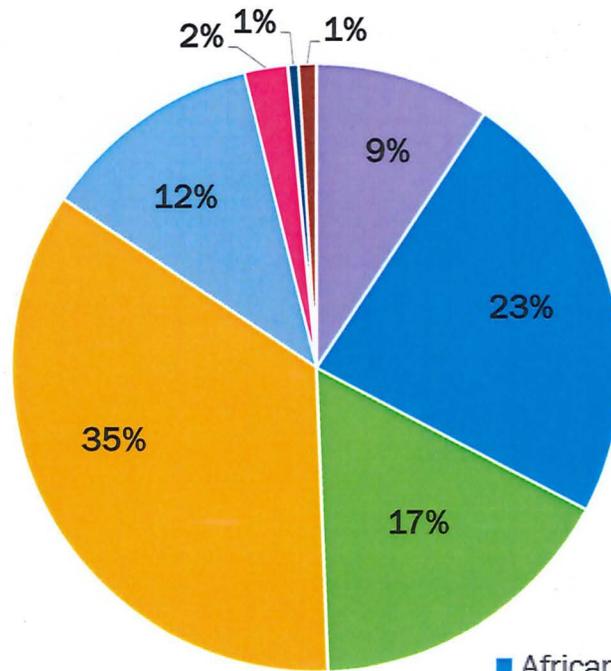


Demographics Clients Served FY 2017-2018

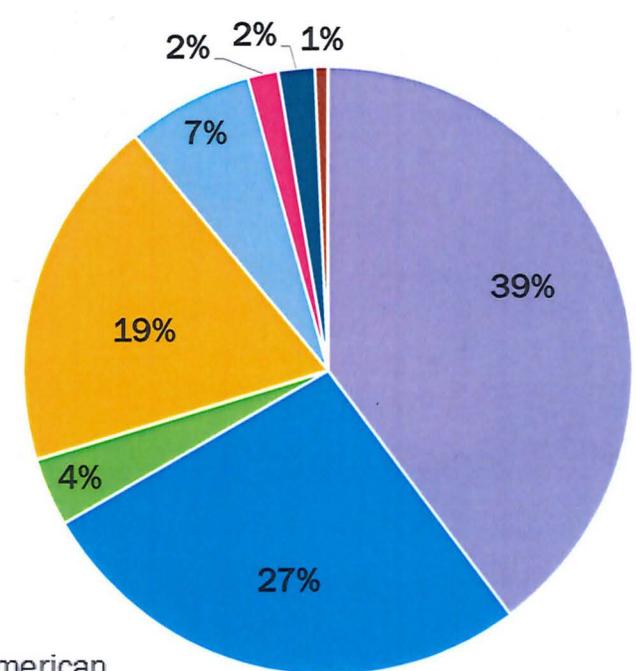
Adult & Older Adult Mental Health



Children & Families Mental Health



Substance Use



- White
- Asian
- Unknown or Other
- Native American

- African-American
- Latino/a
- Multi-ethnic
- Native Hawaiian or Other Pacific Islander



Performance Measurements



ACCESS TO CARE

- Timely access to treatment
- Successful linkages to lower levels of care



CLINICAL OUTCOMES

- Decrease behavioral health needs and increase strengths
- Decrease frequency of substance use
- Reduce readmission to inpatient and PES



CLIENT SATISFACTION

- Access to care
- Quality and appropriateness of care
- Consumer participation in treatment
- Cultural sensitivity
- Overall satisfaction



Challenges



Workforce vacancies

- vacancy rate for BH clinicians is 20% across city, 23% for county psychiatrists, and significant difficulty with language capacity - 71% identified language need (esp. Spanish and Cantonese speakers)



Engaging and treating people suffering from substance use and mental health issues who experience homelessness

- e.g. difficulty with appointment based services.



Current Priorities

1

Meet Clients Where They Are

- Improve outreach and engagement on the street
- Expand hours and capacity of services
- Improve linkage to care after discharge from PES

2

Expand Behavioral Health Bed Capacity

- Hummingbird
- Residential Stepdown
- Healing Center

3

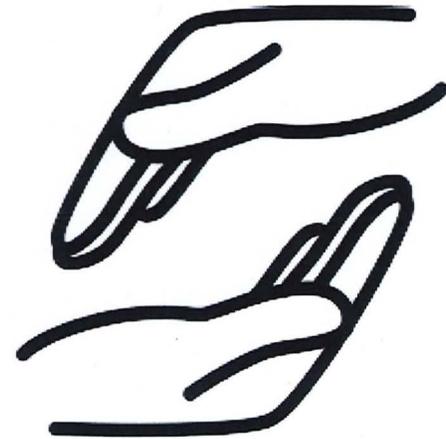
Strategic Analysis and Transformative Approaches

- Workforce Development
- Director of Mental Health Reform
- Ongoing collaboration with community and city partners



Policy Recommendations

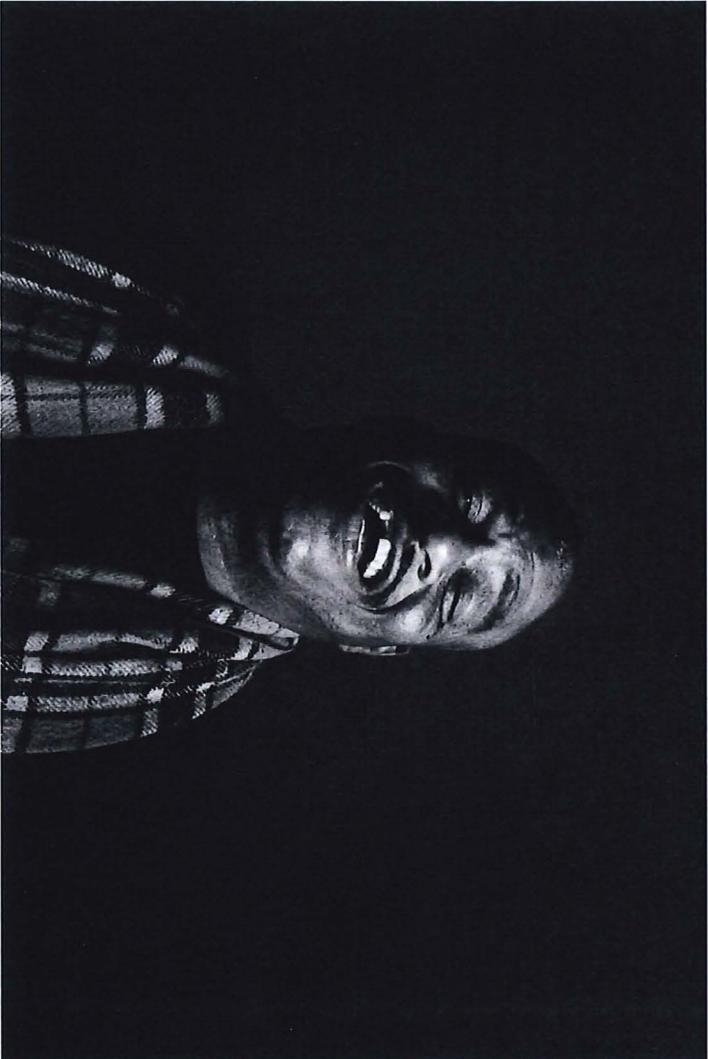
1. Increase Outreach and Health Services in Shelters and Navigation Centers
2. Expand Behavioral Health Respite Beds (Hummingbird)
3. Expand Mental Health and Co-Occurring Residential Treatment Beds





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Thank You