Departmental Overdose Prevention Policies

Public Safety & Neighborhood Services
July 24, 2025









Today's Agenda

- Overview of Ordinance 084-21
- II. Inter-Departmental Working Group & Shared Framework
- III. Evolution of the Policies
- IV. Implementation of Departmental Policies
- V. Accomplishments
- VI. Recommendations

Overview | Ordinance 084-21

Requires DPH, HSH, HSA, and DEM – Healthy Streets Operation Center to <u>develop and annually submit</u> <u>departmental overdose prevention policies</u> that describe how the department and its grantees that provide direct services to clients who use drugs will promote strategies to reduce drug overdoses.

Legislative Requirements for Departmental Policies

- 1 A plan for how programs will provide drug treatment and harm reduction programs and services.
- A description of where the department will post and make accessible: (1) syringe access and disposal services; (2)

 Up to date referral information about naloxone access and the schedule of overdose prevention and naloxone distribution services.
- An onsite overdose response policy that describes the steps the department will take in the event that an individual overdoses on property managed by the department or in the presence of department personnel.
- Assurance that department staff who work with people who use drugs receive training in overdose prevention strategies.
- The process by which the department will ensure that grantees that manage property on behalf of the department and/or provide direct services to people who use drugs implement overdose prevention policies.

Inter-Departmental Working Group

In 2021 DPH, HSH, HSA and DEM committed to a **collective** and **collaborative** approach to overdose prevention. Departments worked together to draft a set of **guiding principles** and **shared policy components** that are reflected in each department's policy.









Departments continue to meet each year to discuss policy development, implementation, and annual resolution submission.

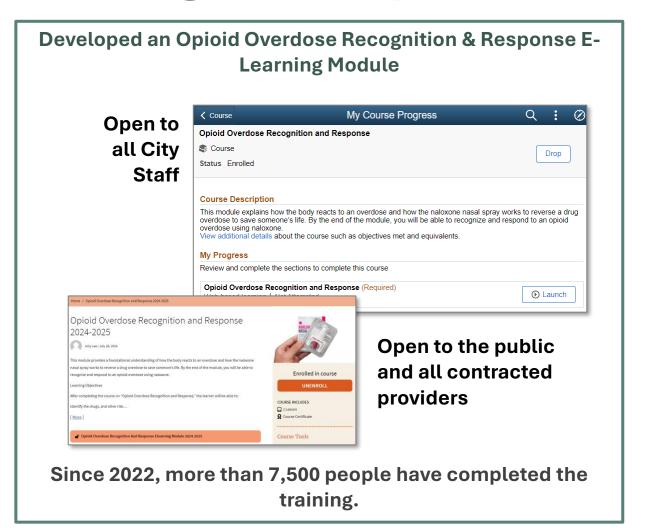
Policy BOS Files: No. 211304, No. 221275, No. 231276, and 240018

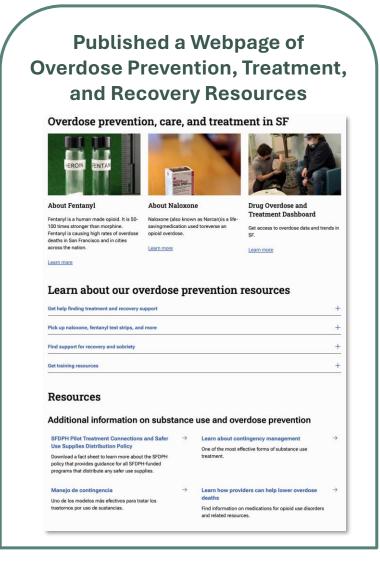
Shared Principles:

The Department of Public Health, Department of Homelessness and Supportive Housing, Human Services Agency and Department of Emergency Management Commit to the Following Guiding Principles When Developing Department Overdose Prevention Policies per Ordinance <u>084-21</u>:

- Service providers are responsible to the wider community for delivering interventions
 which aim to reduce the economic, social and physical consequences of drug- and alcoholrelated harm and harms associated with other behaviors or practices that put individuals at
 risk.
- Each program within a system of comprehensive services can be strengthened by working collaboratively with other programs in the system and across the city
- Clients are responsive to culturally competent, non-judgmental services, delivered in a manner that demonstrates respect for individual dignity, personal strength, and selfdetermination.
- Because those engaged in unsafe health practices are often difficult to reach through traditional service venues, the service continuum must seek creative opportunities and develop new strategies to engage, motivate, and intervene with potential clients.
- Ongoing training, support, and access to naloxone for civil service and contracted staff will
 help create a space free of judgement for our clients increase opportunities to prevent
 overdose death.
- 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 should not be equated with or conceptualized as "failure of treatment".
- People change in incremental ways and must be offered a range of treatment outcomes in a continuum of care from reducing unsafe practices to abstaining from dangerous behavior.
- Acknowledge that in order for programs to be successful, there must be an opportunity for input and feedback from community/consumers.

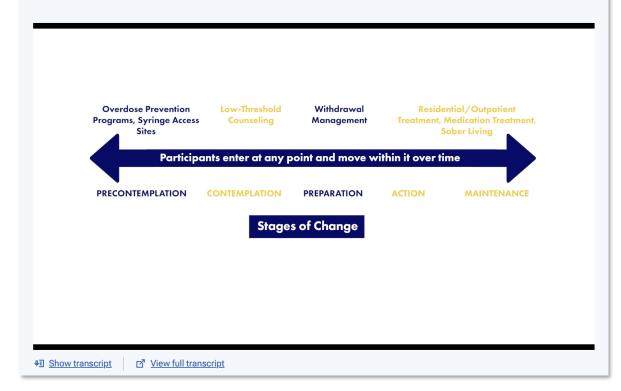
Training Development & Resources





Supplemental Trainings & Palm Card

Learn about our range of treatment options for substance use disorder



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



https://www.sf.gov/substance-use-and-overdose-prevention-services

SFDPH Overdose Prevention Policy

2024

Tackling SF's Behavioral Health and Homelessness Crisis

Our goals



Build a more responsive and proactive behavioral health system of care that will help move people quickly from the streets into effective treatment and sustained recovery

Reduce fatal overdoses and reduce disparities in overdose rates across the city



SFDPH Roadmap for the Behavioral Health Crisis

- 1. Expand treatment beds and services We need to expand treatment beds and services, at the right levels of clinical intensity, including more clinical care in shelters.
- 2. Accelerate and simplify entry to care We need to more quickly connect people to treatment and stabilization services, whenever someone needs or is ready for treatment.
- 3. Support people to progress through care We need to do a better job being "sticky"—supporting people to engage and stay the course through evidence-based treatment and recovery—without falling through the cracks.
- **4.** Pair safer use supplies with proactive linkages to care We are requiring that distribution of supplies be paired with counseling and connections to treatment, and piloting a new smoking supply policy for public spaces.
- **5. Build a comprehensive pathway to recovery** We need all the tools in the toolkit, ranging from low-barrier stabilization to recovery-oriented treatment and step-down services, to help everyone on the street move forward.
- **6. Prevent overdoses** We need to continue overdose prevention efforts, especially in permanent supportive housing, through culturally congruent programs, and by moving upstream in care.



Increasing Treatment and Recovery Services

SFDPH is working aggressively to increase treatment and recovery services that reduce risk of overdose, including:

- Increasing Residential Treatment
- Increasing Medications for Opioid Use Disorder (MOUD) access and uptake
- Increasing Contingency Management
- Increasing Post-Treatment Recovery Housing



Expansion of Recovery Oriented Services

In 2025, as part of Mayor Lurie's "Breaking the Cycle", the city invested in a significant expansion of recovery-oriented services for people experiencing homelessness.

- James Baldwin Place: 54 beds of sober transitional housing for adults experiencing homelessness
- **Sharon Hotel:** 60 beds of sober interim housing for adults experiencing homelessness
- Kean Hotel: 76 short-term (30-60 day) drug-free health respite beds for unhoused adults as their first step out of homelessness
- Marina Inn: 68 beds of post-treatment abstinence recovery housing to foster connection, accountability and independence
- Harbor Light: Expansion of 21 treatment beds to support with withdrawal management and a six-month residential program



SFDPH Policy Implementation

The SFDPH Overdose Prevention Policy applies to all DPH sections and grantees that may engage with and/or provide direct services to clients who use drugs. Policy requirements are part of contract monitoring and compliance.



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.



Publicly post up-to-date resources and make them accessible to clients

(resources: https://sf.gov/substance-use-services-and-overdose-prevention)



The online overdose recognition and response training is a requirement for DPH staff and grantees who engage with and/or provide direct services to people who use drugs.



An onsite overdose response policy that describes the steps that will be taken in the event that an individual overdoses on property must be maintained by staff or grantees who engage with and/or provide direct services to people who use drugs.



HSH Overdose Prevention Policy

July 24, 2025 | Public Safety and Neighborhood Services Committee

Overview & Background

HSH's Overdose Prevention Policy continues to reflect our commitment that the Homelessness Response System will ensure that people are not excluded from services or housing based on substance use or diagnosis of a substance use disorder.

Recognizing that a continuum of options are needed to meet people where they are, HSH's Overdose Prevention Policy clearly reflects that this policy and associated practices does not preclude the department from funding sober living program models across our system of care.

HSH Programs Covered by Overdose Prevention Policy

Street Outreach (SFHOT)

Coordinated Entry Access Points & Problem Solving

Interim Housing

Permanent Supportive Housing

Implementation: Contracting Requirements

Starting in 2022, HSH incorporated Overdose Prevention requirements into contracts for programs covered by this policy. These requirements are monitored as part of our annual program monitoring and include:

Publicly post information provided by DPH regarding overdose prevention services in at least one area easily accessible to clients.

Timely submission of Critical Incident Reports (CIRs) to HSH following an overdose incident.

Provide referrals to substance use treatment programs and related services by all providers whose HSH contracts include case management, social work, navigation and assessment services.

Develop and submit an Overdose Prevention & Response Policy, including protocols for responding to an onsite overdose.

Completion of mandatory annual overdose prevention training, and training on the program's Overdose Prevention Policy for all staff who interact directly with clients and/or who work in a residential setting.

2024 Overdose Prevention Policy

The 2024 HSH Overdose Prevention Policy remained largely the same as the 2023 policy, with the addition of the "Onsite Naloxone Access Protocol".

2024 Highlights

- Onsite Naloxone Access initiative requires 24/7 access to naloxone at all residential sites by Spring 2025.
- DPH's Permanent Housing Advance Clinical Services (PHACS) expanded to serve all Permanent Supportive Housing sites.
- HSH, through a contractor, provides low-barrier and tailored workshops and trainings for non-profit providers.
 - NHRC provided targeted technical assistance to sites/providers with higher incidents of overdoses.

SFHSA Overdose Prevention Policy

2024



Overview and Background

Who we serve:

- We serve 250,000 San Franciscans
- Our programs serve a wide range of individuals and families, particularly those with low incomes, and are not specifically targeted to individuals with current or past history of substance use.

SFHSA implemented its Overdose Prevention Policy in 2021

- Policy has remained very consistent over time
- Built on shared principles with DPH, HSH, and DEM
- We remain in close communication with partners to understand changing needs and how we can best help people who use drugs

SFHSA Overdose Prevention Policy Highlights

- Staff training on overdose recognition and response:
 - All clinical staff in our CAAP Health Services and DAS Clinical & Quality Assurance teams are trained
 - Each of our service centers have trained staff on-site at all times
 - All SFHSA staff, especially those who work in the field, are encouraged to complete the training and have access to Narcan
- Connection to resources:
 - Provide adults with substance use disorder (SUD) who seek support through our CAAP program with connection to treatment (program requirement as of January 2025)
 - Publicly post information provided by DPH regarding overdose prevention services in all our service centers





DEM Overdose Prevention Policy

2024

Overview & Background

- Why DEM? DEM is the coordinating department for interdepartmental initiatives, including HSOC and Neighborhood Street Teams
- Who is served by this policy? People experiencing homelessness, substance use disorder, behavioral health issues, or other similar circumstances
- Policy history. DEM submitted its first policy in accordance with this legislation in 2021 and has had minimal changes since; substantial revision anticipated for 2025 due to reorganization of street teams

2024 Policy Summary

- During HSOC operations, HSOC team members will provide referrals to treatment, naloxone, and syringe access programs.
- Overdose prevention training will be required for all City and provider staff who interact directly with clients. These same trainings will also be provided for all HSOC City staff.
- HSOC team members will follow an onsite **overdose reversal** and **response protocol**. Naloxone must be easily accessible at all HSOC-managed operations or activities.

Accomplishments

The development and implementation of Departmental Overdose Prevention policies have provided an opportunity to strengthen collaboration between the four departments.

Recent Partnership Highlights

- Implementation of the "Onsite Naloxone Access" protocol that supports the requirement for all HSH-funded providers across the Homelessness Response System to maintain a readily available onsite supply of naloxone, the antidote to opioid overdoses. The inventory is required to be 24-hours a day in a fixed location on every floor in "Emergency Naloxone Stations"
- PHACS (Permanent Housing Advanced Clinic Services) has been expanded to serve all supportive housing sites.
- Developed capacity of Street ambassadors to ensure they have knowledge of overdose recognition and response and how to connect individuals to treatment access.
- Shared new trainings, treatment and referral resources.

Recommendations

Recommendations to improve the Ordinance

- Efficiencies remove the requirement to annually submit departmental policies through a resolution; annually provide policies to the Board on the same timeline as Treatment on Demand report.
- <u>Updates</u>
 - Remove references in the Ordinance to specific resources for posting.
 - Simplify the language to reference DEM as a department rather than referencing its programs (e.g. HSOC).

Recommendations to incorporate recovery first principles

Shared Principles – Update the shared principles to incorporate the City's Recovery First Substance Use Disorder Treatment Policy.

Thank You









Extra Slides









Increasing Effective Treatment: Buprenorphine

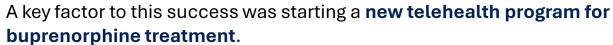
Through innovative initiatives we increased the number of clients on buprenorphine in 2024 by 35% over 2023.

Count of total clients prescribed buprenorphine by month





Count reflects San Francisco Health Network clients only.



- Proactive street outreach utilizing night navigators and immediate access to buprenorphine via telehealth
- Available 16 hours/day 7 days/week to anyone in San Francisco by calling the Behavioral Health Access Line (888-246-3333)
- To date in 2025, ~67% of new patients on buprenorphine started through innovative new programs like these.

Retention at 6 months is currently about 27%. We also aim to **increase retention on buprenorphine** through new initiatives:

- Shifting to long-acting, injectable buprenorphine where possible
- Expanding the RESTORE program which places individuals in clinically enhanced shelter to continue treatment after they start it on the street or in jail. RESTORE is a quick, 24/7 way to get someone directly from the street into treatment.

DPH is a national leader in piloting innovative programs and medications for opioid use disorder. Injectable medications reduce barriers to treatment that housing instability, homelessness and poverty create for those trying to recover.



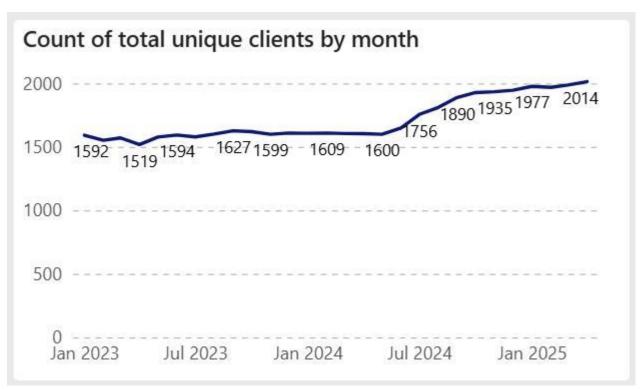
Increasing Effective Treatment: Methadone

More people are engaging in methadone treatment.

- 16% increase in total methadone clients in CY 2024, as compared to CY 2023.
- 32% increase in new methadone admissions in CY 2024, as compared to CY 2023
- **2025 data is promising**: the total number of patients receiving methadone as of May 2025 is 24% higher than May 2024.

Key methadone priorities to increase retention:

- Expanding local implementation of new state flexibilities made possible by SFDPH co-sponsored legislation (AB 2115), which will go into effect October 2025.
- Contingency management pilot programs at clinics
- Navigation supports for getting people into methadone treatment
- Clubhouse model for people on methadone





B/AA Overdose Prevention – Path Forward

- Investments in Culturally Congruent Overdose Prevention, Education, and Programming
 - Funding Black-led organizations to provide pro-active outreach / overdose prevention education
 - Implementing culturally congruent contingency management programs and in health clinics in historically Black neighborhoods
- Increasing navigation and low-barrier access to substance use services
 - Street based outreach in Bayview Hunters Point to connect people to substance use treatment
 - Launching low-barrier evidence-based "The Shop" model in the Tenderloin tailored to older B/AA men to increase social support, substance use education and enrollment into treatment
- Enhancing and expanding access to medications for opioid use disorder (MOUD)
 - Expanded access to methadone initiation in Bayview
 - Enhancing clinics that are Black-led and / or operated in historically Black neighborhoods to provide enhanced clinical services such as connection to a modified Club House model
- Expanding sober living residential placements
 - Launching three new sober living sites to provide more recovery focused opportunities

