BOS – Budget and Appropriations – June 15, 2023

DEPARTMENT OF PUBLIC HEALTH FY 2023-24 & FY 2024-25 BUDGET

Our Mission and Vision

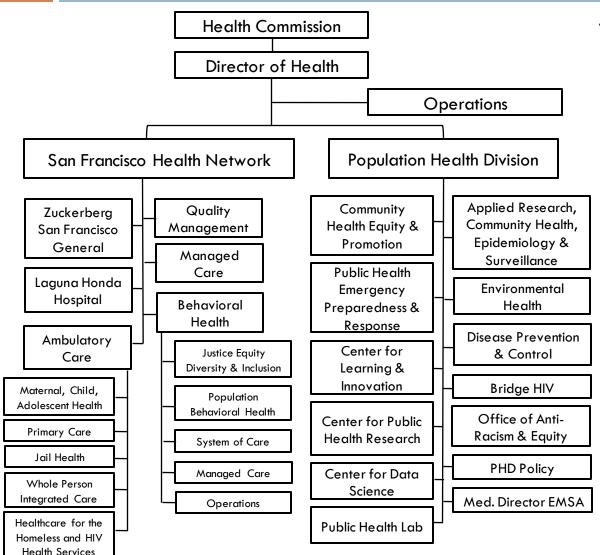
To protect and promote the health and well-being of all San Franciscans.

Making San Francisco the healthiest place on earth.

WHAT WE DO

- 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, and culturally proficient health services
- Ensure equitable access to health care
- Reduce health disparities

DPH: An Integrated Health Department



Two primary roles and two major divisions to fulfill its mission:



Population Health: Protecting the health of the population

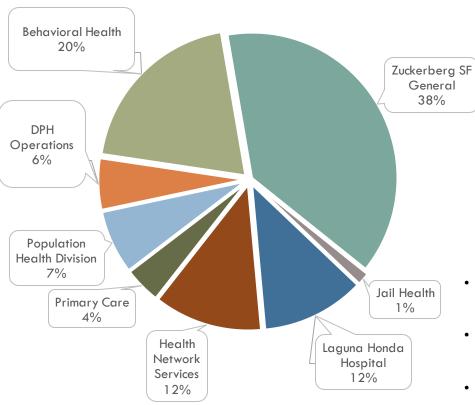


SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

San Francisco Health Network: Promoting the health of our more than 100,000+ patients

Overview of DPH Budget

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DPH Division	FY23-24 Budget	FTE
Zuckerberg SF General	1,204,370,000	2,971
Behavioral Health	763,090,000	902
Jail Health	43,100,000	157
Laguna Honda Hospital	352,400,000	1,395
Health Network Services	373,370,000	694
Primary Care	140,870,000	571
Population Health Division	173,100,000	569
DPH Operations	185,830,000	585
Total	\$3,236,110,000	7,844

 Budget increases by 8% compared to current year and remains stable in the second year

- Despite growth, our general fund support is reduced from 33% to 27%
- ~70% of DPH's budget leverages revenue
- No service reductions to core services proposed to achieve general fund savings

Alleviating Poverty and Language Access

Access to Quality Care

- Keeping people and families healthy is a key strategy for reducing poverty
- Providing access to affordable healthcare to ensure health issues do not result in adverse financial impact
 - Most of our patients are eligible for Medi-Cal and Medicare
 - In addition, other programs including charity care, sliding scale and Healthy San Francisco

Language Access

- Bilingual clinical staff
- Interpreter services in hospital & clinics
- Outreach in multiple languages
- Languages include:
 - Cantonese
 - Filipino
 - Mandarin
 - Russian
 - Spanish
 - Taishanese
 - Vietnamese

Examples of DPH Programs to Address Health Disparities

Maternal, Child and Adolescent Health

- Doula trainings and access, lactation support
- Food security
- Abundant Birth direct income supplement for people at risk of poor perinatal outcomes

- New Medi-Cal funding streams
- Reimburses for care management and support for accessing food, housing, and social services
- Primary Care Population Health Equity Strategies
 - Clinic data stratified for race
 - Equity goals
 - Prioritize populations impacted by health disparities for access to care, including COVID-19 testing & vax

Behavioral Health

- Population specific wellness promotion and treatment services
- Culturally Congruent and Innovative Practices for Black/African American Communities
- Wellness Centers at Hope SF
- Workforce development and pipeline programs for workforce diversity
- Telehealth to expand language services
- Population Health
 - Ending the HIV Epidemic
 - Targeted Tobacco Cessation Services
 - Sugary Drink Distribution Tax funded community programs for communities disproportionately affected

Perinatal Health: Improving Birth Outcomes

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Deploying over \$11 M of Federal, State, and local funding to reduce perinatal health disparities, which disproportionally impact Black/African American and Pacific Islander birthing people, including:

- Abundant Birth Project: Public-private partnership to provide a \$1,000/month unconditional cash supplement to over 150 pregnant and postpartum people, aiming to reduce pre-term births and enhance perinatal health outcomes.
- Doula training and access to doula care, supporting BIPOC pregnant people
- Fruit and vegetable grocery vouchers to more than 150 families
- **Support groups and other specialized health care support** for birthing families
- **Housing navigation and support** for birthing people experiencing homelessness
- New \$6M/per year in mental health investments to support Black/African American pregnant, perinatal, and postpartum people
 - Recently awarded to four CBOs (RAMS, Rafiki, Homeless Children's Network, and UCSF Embrace Program) to provide mental health care screenings, linkages, and more
 - Services expected to start fall 2023

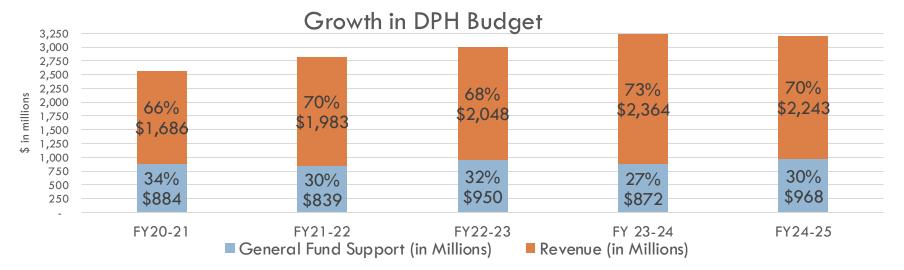
8 DPH's Proposed Budget

FY 2023-24 and FY 2024-25

Funding Sources and Reducing General Fund Support

- □ ~70% of DPH's budget is offset with revenue
- While there is 8% (\$238 M) growth in its budget, total and percentage general fund support declines by 9% (\$78 M) in FY 23-24
- DPH's budget covered growth <u>and</u> achieved GF savings
- GFS as a percentage is also lower than prior years at 27% in FY23-24 and 30% in FY24-25 compared to 32% in FY 22-23.

		Other Sources	
Medi-Cal	Medicare	(Grants, Fees, Workorders)	General Fund
36%	6%	30%	27%



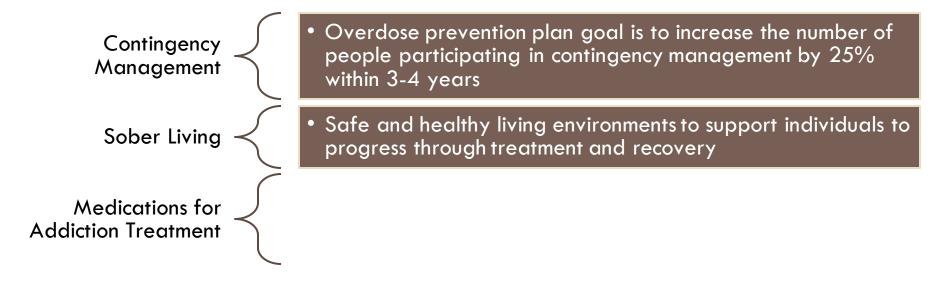
Meeting General Reduction Targets

DPH Strategies include:

- Leverage additional revenue where possible
- Realign expenditure line items to reflect expected spending
- Continued scale down of COVID-19 response
- Other than COVID-19 Response, no service level impacts due to general fund savings initiatives
- Prioritize limited new investments in critical areas:
 - 1. Addressing the opioid epidemic
 - 2. Sustaining Laguna Honda Hospital

Behavioral Health and Street Conditions – High Impact Interventions to Reduce Overdose

Wellness Hubs \$14.0 M (annualized operating)



Behavioral Health and Street Conditions – Additional Programs

Care Court and Bridge Housing grant

Integrating COVID-19 Response into DPH Operations

(in Millions)		FY 2022-23	FY 2023-24	FY 2023-24	FY 2024-25
		FT 2022-23	(Approved)	(Proposed)	(Proposed)
SFHN Operations		16.1	10.1	12.0	13.1
Population Health Division		39.9	14.9	7.3	7.9
	Total	56.0	25.0	19.3	21.0

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Sustaining Improvements at Laguna Honda Hospital

As part of Laguna Honda's recertification efforts, the department is making hundreds of process improvements and addressing critical gaps identified through this process

\$3.5 M to Support LHH Infrastructure and Oversight

Capital Investments

- San Francisco Intensive Youth Behavioral Health Services at ZSFG
 - **\$33.7M** State grant to build new psychiatric facilities for youth
 - **1** 12 Inpatient psychiatric beds to serve \sim 450 young people per year
 - Additional Intensive Outpatient Treatment, including integrated substance use disorder treatment services, will serve as a step-down and a stand-alone program
- Outpatient Care Center
- \$18.3 million grant from the ZSFG Foundation for phase one of the build-out and additional improvements to site providing 360,000 patient visits per year.
- Two different Community Care Expansion grants from the State.
 - \$7.4 million for lease or acquisitions costs for licensed board and care operators, to be administered jointly with MOHCD
 - \$9.5 million to support the renovation and expansion of the residential treatment step-down site on Treasure Island
- State grant of \$6.7 M for build out of the Crisis Stabilization Unit in the Tenderloin

Trailing Legislation

Policy

- Patient Rates
- Managed Care Rate Review
- Foundation MOUs with ZSFG and Public Health Foundations

Grant Acceptance

- Annual Recurring Grants
- Mobile Crisis Services Grant



Budget & Operational Challenges to Meeting DPH Objectives

<u>Capacity:</u>

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- 1. Workforce Sustainability
- 2. Real Estate and Space Needs
- Multiple Major Strategic Initiatives While Maintaining Core Services

Financial Sustainability

4. Significant One-Time Revenues, but Uncertainty Around Long Term Sources

1. Workforce Sustainability

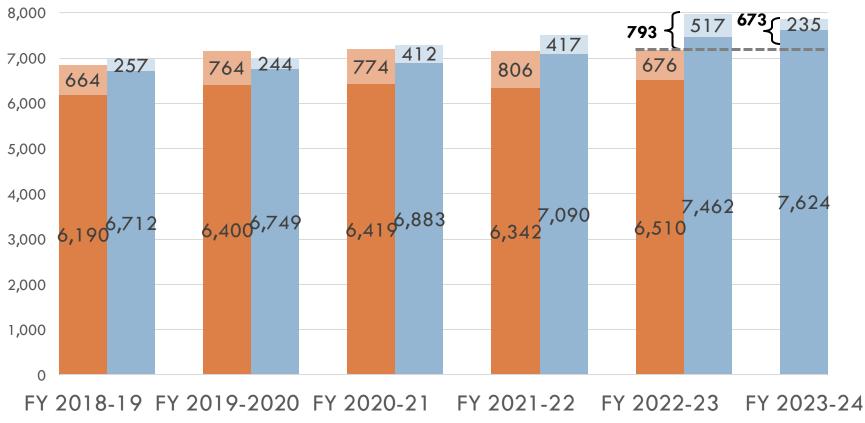
Competitive Labor Market

• National Shortages, particularly in Key Healthcare Functions

Complex Hiring Processes

• Prolonged Time to Hire

DPH Historic Look at Staffing Actuals Vs Budget Authority



Est. Filled Permanent FTEs = Est. Filled Temp FTEs = Funded Permanent FTEs = Funded Temp FTEs

DPH has funded authority for additional 793 additional hires in current year and 673 compared to budget, due to lower budgeted FTE

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DPH Positions by Division

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	FY 22-23 Filled Positions			FY 22-23 Funded Positions			FY 23-24 Proposed
DPH Division	Permanent FTEs	Temp FTEs	Total	Permanent FTEs	Temp FTEs	Total FTE	Total FTE
Zuckerberg SF General	2,605	314	2,919	2,871	144	3,015	2,971
Behavioral Health	680	34	714	816	18	834	902
Jail Health	124	10	134	150	5	155	157
Laguna Honda Hospital	1,250	71	1,321	1,400	37	1,437	1,395
Health Network Services	549	34	583	651	23	674	694
Primary Care	470	39	509	531	21	552	571
Population Health Division	338	131	469	457	265	722	569
DPH Operations	493	44	537	586	5	591	585
Total	6,510	676	7,186	7,462	517	7,980	7,844

Top Vacancies at DPH Status of Recruitments

Total Applicants and Eligibles FY 2022/2023 as of 6/6/23

Applicants	Eligibles (remaining)
12,024	2332

Applicant and Eligible Counts by Top 10 Vacancy Job Classes FY 2022/2023 as of 6/6/23

Job Class	Status of Eligible List	Applicants	Eligibles (remaining)	Vacancies
2320 - Registered Nurse	Yes, continuous	3589	778	156
2586 - Health Worker 2	Yes + new list underway	223	80	91
2587 - Health Worker 3	Yes + new list underway	-	86	56
2930 - Behavioral Health Clinician	Yes, continuous	206	120	44
2591 - Health Program Coordinator 2	Yes + new list underway	319	115	40
2593 - Health Program Coordinator 3	Yes + new list underway	383	161	35
2119 - Health Care Analyst	No, new list underway	376	-	25
2903 - Hospital Eligibility Worker	No, new list underway	384	-	20
1823 - Senior Administrative Analyst	Yes + new list underway	78	23	20
2312 - Licensed Vocational Nurse	Yes, continuous	179	87	19

Total Hires in FY21-22 and FY 22-23

FY	PCS	PEX	TEX	TPV	Total
2021-2022	844	21	314	2	1,181
2022-2023	1,232	62	390	5	1,689

Total hires includes promotions, reassignments, and conversions from exempt to civil service appointments (as well as external hires). Those internal hiring actions fill positions, retain staff, and are required by MOUs / competitive civil services rules, but do not result in a measurable increase to the overall Department or City headcount.

DPH Current Working on 1,500 Positions



Onboarding (pending start work date)

210

Continuous Improvement All Stages of Hiring Process

Reduce time to hire - Remove barriers for fair & inclusive process for all -Build on Citywide efforts - Partner with Unions

Classification: New team, consolidate classifications, comparing specs to industry standards

Recruitment: More staff, new technology, recruitment events, partnerships with SEIU and CBOs to develop pipelines

Assessment: Remote or on demand testing, broaden minimum qualifications, continuous recruitment and assessment, reduce number of specialties and ranks (RN)

Selection: Continuous selection, volume (batch) hiring, clinical hiring team, question banks, lived experience as desired qualification (BHS), streamlined communication, interview panel bank

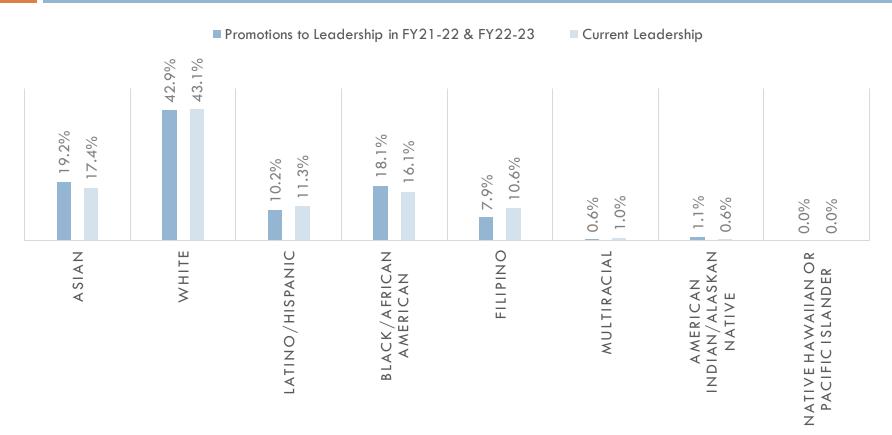
Onboarding: Collect verification documents upfront, update medical clearance policy to streamline, conduct fingerprinting inhouse, mass onboarding events

All Hire Demographics: FYs 21-22 & 22-23



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Senior Leadership Promotions: Race/Ethnicity FYs 21-22 & 22-23



- Defined as all Directors, Managers, Nurse Managers, Nurse Supervisors, and Supervising Physicians.
- These leadership Positions represent 4.75% of DPH's Total Positions

Workforce Diversification Efforts

 Expand and diversify recruitment efforts Team of 5 recruiters 	• Revised leadership Selection Process including equity questions and community panels	• Piloting Lived Experience as a scored element in PRSP for BHCs	• Diverse interview panels, trained in Implicit Bias and Fairness in Hiring, Introduction to Health Equity
Recruitment	Selection	Selection	Selection

- Project Promote Our People (POP)
- Info Sessions and coaching for DPH staff to promote internally

Retention

 Ongoing data monitoring on selection and retention by job class/demographics

Data

• Partnership with CON and unions to identify issues and innovate systems for efficient hiring and diverse candidate selection

Systems

2. Real Estate and Space Needs

30

Challenge to secure sufficient & appropriate space for programs & support staff

DPH Performance Measures

Ways We Use Data

- True North Lean Strategic Planning (Kaizen Promotion Office)
- Contract and compliance monitoring
- Performance and Milestone Based Payments
 - Global Payment Program
 - Quality Improvement Program
- Quality Improvement and Regulatory Compliance

Examples of Data and Performance Goals

Improving health outcomes for people experiencing homelessness

- Decrease Overdose Deaths
- Continuity follow-up after experiencing 5150s
- Assessment for coordinated entry to housing

IDEA: Improving data to enable and align

- Staff in analytical roles agree they have "access to data" they need to support improvement work.
- Percent of Epic ARA/ARUs that use self-service analytics "successfully" to support improvement work.
- Percent of time Workforce A3 Team utilizes dashboard in daily work Reducing Hiring Timeline

Hiring and retaining our diverse workforce

- Reduce backlog and decrease the vacancy rate
- Reduce hiring process timeline for prioritized positions from RTF to appointment date
- Decrease number of separations
- Increase EE survey rating on "place to work"

Performance Payments GPP and QIP

- Outpatient, Inpatient and Specialty visits for the uninsured
- Mammogram rates
- Early Childhood visits

Examples of Audits and Performance Projects by Controller

Audits and Assessment Reports

2022-23

- Department of Public Health: The Department Should Better Manage the UCSF Affiliation Agreement
- Field Follow-up of the 2018 Audit of the Ethical Climate, Inspection, and Billing Processes of the Department of Public Health's Environmental Health Branch
- Gift Card Audit (ongoing)
- Promoting Interoperability (ongoing)

2021-2022

 DPH Complies With the Health Care Security Ordinance but Needs to Monitor and Manage the City Option Program and San Francisco Health Plan More Appropriately, Effectively, and Efficiently

2020-2021

 DPH: San Francisco Health Plan Properly Manages SF City Option Program Funds, but Program Improvements Are Needed to Address the Growing Balance of Employer-Contributed Funds

Performance Projects and Reports

2022-23 [completed]

- Mental Health SF Service Center Options Analysis
- Mental Health SF Analytics and Evaluation
- Controller's Office Review of 2022 Managed Care Contracts

2022-23 [active]

- Mental Health SF Staffing and Wage Analysis
- Network Patient Flow Phase II and Bed Model Support
- Department of Emergency Management Project: Hospital Diversion Analysis
- DPH HR Process Mapping & Systems Assessment Project
- Consultant for SNF Subacute Beds Opportunities
- Management of ZSFG Chargemaster Contract



DPH Behavioral Health Residential Treatment Expansion

The San Francisco Department of Public Health (DPH) is increasing residential treatment and care services by approximately 400 overnight treatment spaces, or beds. The expansion effort is guided by the 2020 DPH Behavioral Health Bed Optimization Report, Mental Health SF legislation, and with input from stakeholders. The goal is to offer high quality, timely, easily accessible, coordinated, and recovery-oriented care delivered in the least restrictive setting.

Goal 30	Open 2021 Hummingbird - Valencia Status Serving clients Open 28 beds currently available	Psychiatric respite facility to serve people experiencing homelessness from the Mission and Castro
Goal 20 Est. Beds	Open 2020 Managed Alcohol Program Status Permanent location and additional funding will expand the program from 10 beds to 20 beds Open 13 beds currently available	Pilot Medical supervision for people with chronic alcohol dependency
Goal 31 Est. Beds	Open 2021 Mental Health Rehabilitation Beds (ava LSAT) Status Serving clients Open Client placement varies	Out-of-county psychosocial rehabilitation for people who are conserved in a locked setting
Goal 13 Est. Beds	Open 2022 Psychiatric Skilled Nursing Facilities (ata PSNF) Status Serving clients Open Client placement varies	Out-of-county secure 24-hour medical care for people with chronic mental health conditions
Goal 75 Est. Beds	Open 2022 Dual Diagnosis Transitional Care for People With Justice Involvement (ata Minna Project) Status Serving clients Open Client placement varies	Transitional care for people in contact with the criminal justice system with a dual diagnosis of mental health and/or substance use issues
Goal 99 Est. Beds	Open 2022 Residential Care Facility ^A (aka Board and Care) Status Serving clients Open Residential Care Facility 23 beds currently available 12-month Rehabilitative Board and Care 76 beds currently available	Residential Care Facility: Supervised residential program for individuals with mental health issues who require assistance with daily living activities Pilot 12-month Rehabilitative Board and Care: Same as above with more inten- sive mental health and treat- ment support, such as for con- served individuals

KEY

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Project Phases and Status

MHSF legislation	2	Program design Regulatory assessment Facility selection	5	Out Con Perr
	1	Facility selection	6	Per

sign 4 Out for bid/contracting assessment 5 Community outreach & City approvals oction 6 Permit & construction Complete
In process
Planned

June 5, 2023

Goal 20 Est. Beds	Open 2022 SOMA RISE ^Δ (aka Drug Sobering Center) Status Serving Clients Open Client placement varies	Pilot 24-7 program for people experiencing homelessness with drug intoxication, providing short term stays and linkage to services
Goal 6 Est. Beds	Open 2022 Cooperative Living for Mental Health [∆] Status Serving Clients Open Client placement varies	Communal living for people with chronic mental health and/or substance use Additional \$11M to stabilize leased properties available through MOHCD
Goal 70 Est. Beds	Open 2023 Residential Step-down - SUD [∆] Status Serving clients Open 44 beds currently available	Long-term sober living environment for clients coming out of residential care programs
Goal 30 Est. Beds	Opening 2023 Enhanced Dual Diagnosis ^Δ Status Contracting in process 1 2 3 4	Transitional medically enhanced care for people with a dual diagnosis of mental health and substance use issues
Goal 10 Est. Beds	Opening 2023 Transitional Age Youth (TAY) Residential Treatment ^Δ Status Program design in development 1 2 3 4	Supervised treatment for young adults with serious mental health and/or substance use issues
Goal 16 Est. Beds	Opening 2024 Crisis Diversion Facility ^A Status Contracting and construction in process 1 2 3 4 5 6	Short-term, urgent care intervention as an alternative to hospital care