San Francisco Department of Public Health Division of Behavioral Health Services

A presentation to the San Francisco HIV Commission April 25, 2022 Judith Martin, MD, (she/her) Medical Director of Substance Use Services



SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Outline

- Overview of SUD range of services
- Mental Health San Francisco
- Some stats regarding overdose
- Overdose response initiatives

Overview of SUD services

- Continuum of treatment services, Drug Medi-Cal.
- <u>https://findtreatment-sf.org</u>
 - Withdrawal management, 58 beds ("detox")
 - Residential SUD treatment, with central authorization monthly,249 beds
 - Outpatient/intensive outpatient tied to residential step-down transitional housing, 193 beds
 - Opioid Treatment Programs (four agencies, seven clinics) 2,500 or so in treatment, capacity for 4,000
 - Case management, recovery support services
 - New contingency management pilot starts in July

Overview of SUD services, cont.

- Hospital consultation service (addiction care team) for inpatients
- Opioid treatment medication starts in hospital and Emergency Department, jail, and office-based buprenorphine induction clinic (OBIC)
- Linkages for continuation of opioid treatment medications
- Primary care physicians and street medicine who use buprenorphine
- Low threshold access to buprenorphine at harm reduction sites
- Addiction Medicine Fellowship for primary care physicians.

Behavioral Health Services Clients FY21–FY22 (Q1-Q2)

- In FY21, Behavioral Health Services treated ~20,000 people for mental health treatment and/or substance use disorder treatment
- Additionally, in FY21, Behavioral Health Services provided prevention and early intervention services to >20,000 people, including:
 - Crisis debriefings
 - School-based programs
 - Peer programs
 - Vocational services
 - **Drop-in centers**

Clients Receiving Mental Health Treatment			
Age Group	FY20-21	FY21-22 Q1-Q2	
Children & Youth (age < 18)	3,473	2,533	
Adults & Older Adults (age 18+)	13,445	10,945	
Total	16,918	13,478	

Clients Receiving Substance Use Disorder Treatment			
Age Group	FY20-21	FY21-22 Q1-Q2	
All age groups (> 99% are age 18+ at start of FY)	4,626	3,606	

San Francisco Health Network Behavioral Health Services

Note: The numbers shown represent unique clients who received at least one service during the indicated time period. They are considered an undercount of services because of a lag in data entry and should not be construed as final or official. Clients' age is calculated as of the first day of the fiscal year (July 1). FY20-21 spans 7/1/2020 through 6/30/2021. FY21-22 Q1-Q2 spans 7/1/2021 through 12/31/2021. Source: Avatar service data

Mental Health San Francisco (MHSF)

- Recent legislation in SF calls for expansion of behavioral health access, in particular to those who are experiencing homelessness plus mental health or substance use disorders.
- Includes an Office of Care Coordination, new beds and facilities, Street Crisis Response Team, and expanded access hours.
- Overdose response is an added domain within MHSF

Some graphs, courtesy of Phillip Coffin

- Overdose deaths increased dramatically since mid 2018
- The increase is driven by fentanyl
- Stimulants are involved in combination
- Over-representation of Black/African American deaths
- Tenderloin and SOMA are the hot spots
- Overdose is the single most common cause of death in people experiencing homelessness.

Opioid/Meth/Cocaine Overdose Deaths in San Francisco



2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020

Number of Unique Persons Admitted to SUD Treatment by Primary Substance in SF, 2016-2020





■ Prescription Opioids (excluding heroin or fentanyl) ■ Heroin (excluding fentanyl) ■ Fentanyl and Fentanyl Analogues

Rate per 100,000 Population of Opioid Overdose Deaths by Race/Ethnicity in San Francisco, 2006-2019



Annualized Rate Per Census Tract Population of Opioid, Cocaine, Methamphetamine Overdose Deaths in CCSF, 2016/17



Overdose response initiatives: 3 areas

- Harm reduction, syringe and safe-use supplies, naloxone
- Low threshold treatment approaches, easier access to conventional treatment, navigation linkages, street overdose response for nonfatal overdoses.
- Data: Surveys of people who use drugs, population at risk estimate, unique individuals on opioid treatment medication, retention on opioid treatment medication.

Harm reduction:

- Naloxone clearinghouse has supplied over 6,000 doses to DPH programs
- Behavioral health pharmacy has supplied 12,000 fentanyl test strips to programs, and ordered more
- Buprenorphine access in harm reduction locations, including telebuprenorphine.
- Drug sobering center being created
- Overdose prevention site being planned

Access to care

- Street Overdose Response Team since August has responded to 1,279 calls as of March, 716 of those were overdoses, 43% follow up engagement.
- BAART Market opioid treatment program has afternoon and evening hours for acute care admission starting this month. As of week 2, 50 inquiries, 10 qualified for admission, 124 enrolled patients took medication, 7 tours given.
- Behavioral health pharmacy expanded hours till 6:30 weekdays, weekends 9-4. Pharmacist delivery of buprenorphine to SIP hotels.
- CA Bridge clinic expanded days, HOUDINI LINK continues, expanding to jail.
- Buprenorphine induction clinic expanded hours to match pharmacy, is giving buprenorphine injections and micro dosing as needed.

Surveys, 1: 1 interviews with people who use drugs

- Qualitative responses. Focus on overdose risk.
- For fentanyl smoking is major method of use, many reasons given, including safety and no more veins.
- Co-use with methamphetamine and cocaine is common
- Responses to privacy area at the Linkage Center, and suggestions collected. Most responses positive, citing safety from police displacement, prompt response to overdoses, privacy from public and children, 'treated like a human', 'did not feel judged'.

Thank You



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