HealthRIGHT 360's San Francisco System of Care

November 20, 2025

MaryAnn Swift, Managing Director of NorCal Residential Programs
Max Williams, Divisional Director of Outpatient Services
Wesley Saver, Managing Director of Policy & Public Affairs



Get Better. Do Better. Be Better.

About HealthRIGHT 360

Founded in 1967, HealthRIGHT 360 is a nonprofit healthcare provider serving low-income adults, families, and youth.

- The organization's current form was established on July 1, 2011, through the merger of Haight Ashbury Medical Clinics and Walden House.
- The two legacy programs that helped shape integrated, person-centered models now recognized as national standards.
- Headquartered in San Francisco, HealthRIGHT 360 continues to provide accessible, evidence-based care across a full continuum of services.



HealthRIGHT 360's headquarters, the Integrated Care Center, located at 1563 Mission Street.



Our Reach

With more than 70 programs, HealthRIGHT 360 serves over 43,000 people each year across 10 California counties:

- Contra Costa County
- Los Angeles County
- Marin County
- Orange County
- San Diego County
- San Francisco County
- San Mateo County
- Santa Clara County
- Solano County
- Ventura County

People Served by HealthRIGHT 360 Programs FY 2024-2025				
Services	Clients Served			
Medical & Dental	6,603			
Residential & Outpatient	11,749			
Rock Medicine	15,000			
Criminal Legal Programs	7,956			
Prevention	1,626			
Youth Outreach	268			
Workforce Development	24			
Total	43,266			



Our Approach

Integrated, whole-person care spanning primary medical, dental, mental health, and SUD treatment.

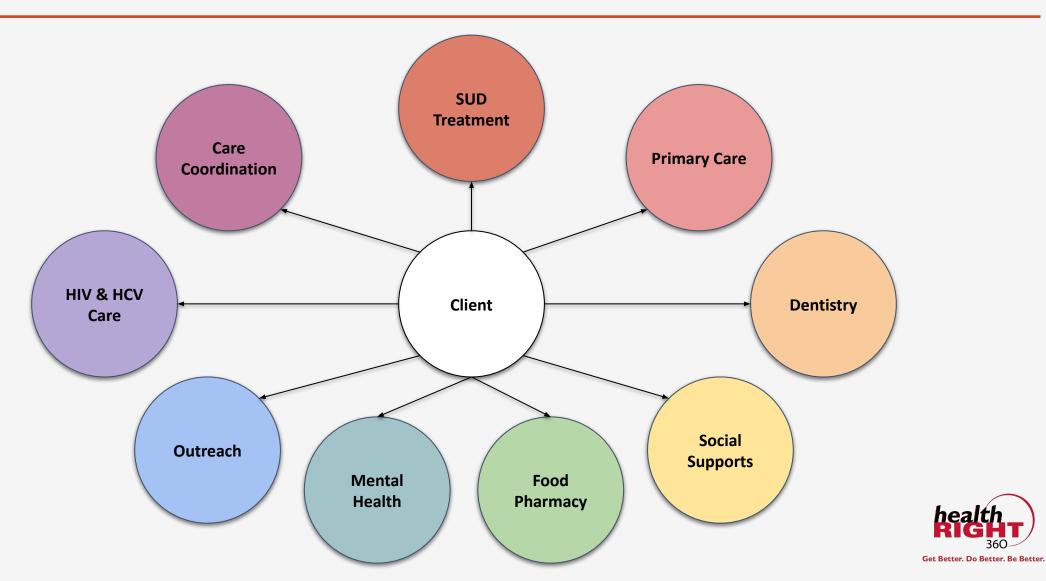
- Compassionate, community-based delivery, including street medicine and enhanced care management
- Addressing social needs such as housing, employment, and food security through case management and supports
- Empowerment-focused model that builds skills, engagement, and self-management
- Specialized, trauma-informed, culturally responsive services for diverse communities, including transgender and reentry populations
- Full continuum of SUD care from outreach to outpatient, residential, and recovery services



HealthRIGHT 360 services are grounded in equity and health justice.



Pathways to Care



A Growing Family of Programs: San Francisco Services



Acceptance Place: Residential substance use disorder treatment for gay, bisexual, and transgender individuals.

Adult Outpatient Services: Case management and treatment with low-, moderate-, and high-threshold tracks for all recovery stages.

African American Healing Center (AAHC): Culturally responsive behavioral health services supporting communities of color.

Asian Drug and Alcohol Prevention and Treatment: Bilingual, culturally competent care for AANHPI individuals.

Contingency Management: Evidence-based treatment using motivational incentives and counseling to address stimulant use disorder.

Dentistry: A full-service dental clinic linking adults and youth to primary medical and behavioral health care.

Food Pharmacy: Provides food, nutrition counseling, and support for individuals with chronic conditions or food access needs.

Housing Opportunities for Persons with AIDS: Supportive transitional housing with case management, counseling, and medical care.

Integrated Care Center (ICC): The ICC provides nonjudgmental, integrated primary medical and behavioral health care addressing complex needs.

Mobile and Street Medicine Program: Citywide services, including primary care, screenings, wound care, vaccinations, labs, and case management.

Representative Payee Services: Helps clients on SSI/SSA manage funds responsibly, promoting stability and preventing homelessness.

Residential Step-Down Programs: Drug-free housing with peer support, care coordination, and outpatient treatment for transitioning clients.

Residential Treatment Services: Multicultural residential substance use and mental health treatment with peer support for adults.

Rock Medicine: Powered by 800+ trained volunteers to provide medical services at concerts, festivals, and other community events.

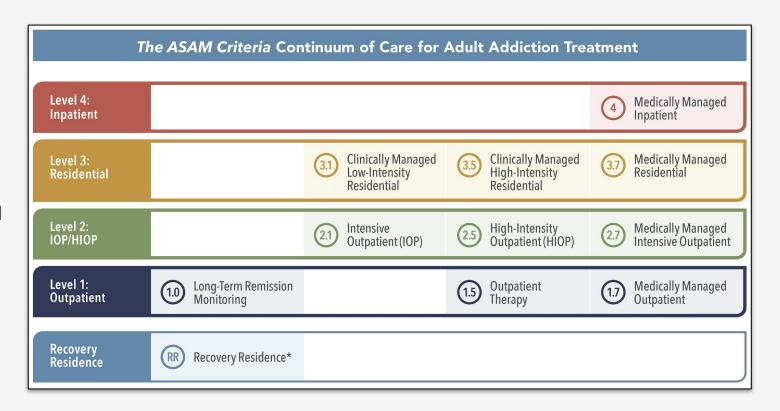
SoMa RISE: Low-barrier walk-in program for people experiencing homelessness, offering dignified services and referrals.

Women's HOPE: Residential treatment for pregnant and parenting women with co-occurring substance use and psychiatric disorders.

The Updated Continuum of Care for SUD Treatment

The ASAM continuum of care includes four broad treatment levels (1 through 4).

- Decimal numbers express gradations of intensity and types of care provided.
- Clients can move up or down in terms of intensity without necessarily being placed in a new benchmark level of care.





SoMa RISE Drug Sobering Center



SoMa RISE: Program Overview

A partnership between SFDPH and HealthRIGHT 360.

- The top recommendation by the 2019 Methamphetamine Task Force and included in Mental Health SF legislation.
- One of the first drug sobering centers in the nation, providing indoor monitoring for individuals experiencing drug intoxication.
- Focuses on low-barrier, accessible services for unhoused and unstably housed individuals with substance use and mental health challenges.
- HealthRIGHT 360 is a founding member of the National Sobering Collaborative.



The milieu at SoMa RISE, launched in June 2022.



SoMa RISE: Eligibility and Impact

SoMa RISE reduces the prevalence of intoxicated individuals on the streets, reduces reliance on emergency services, and increases engagement in treatment and housing services.

- Ages 18+, actively using substances or in a drug-related crisis.
- Unhoused or marginally housed.
- Ambulatory and able to consent verbally.

24/7 access and partnership with street teams enables rapid turnaround times.



The vitals monitoring station at SoMa RISE.



Mobile and Street Medicine Program



Mobile and Street Medicine: Program Overview

The Mobile and Street Medicine Program is an extension of HealthRIGHT 360's Integrated Care Center.

Provides medical care through two models:

- Mobile Medical Van: Two private exam rooms, triage area, and full range of medical services.
- Street Medicine: Care delivered in the community, with medical supplies carried in backpacks to meet patients where they are.

Services include urgent and primary care, screenings, wound care, vaccinations, labs, case management, and **referral to SUD treatment.**



HealthRIGHT 360's Mobile and Street Medicine Program was launched in October 2025.



Mobile and Street Medicine: Days & Locations

Service areas initially cover Treasure Island and the Mission, with planned expansion in partnership with other providers.

Monday: 9:30 AM – 3:00 PM | Martin de Porres House of Hospitality & surrounding Mission/16th Street neighborhoods

Wednesday: 10:00 AM – 2:00 PM | Treasure Island – HealthRIGHT 360 Residential Step-Down

Thursday: 9:30 AM – 3:00 PM | Treasure Island – Sherry Williams Community Center

Friday: 9:30 AM – 3:00 PM | Calle 24 Latino Cultural District & surrounding Mission/24th Street neighborhoods



HealthRIGHT 360's Mobile and Street Medicine Program was launched in October 2025.



Outpatient Treatment



Outpatient Care at HealthRIGHT 360

Outpatient utilizes a comprehensive case management model with low-, moderate-, and high-threshold tracks, for:

- Adults with SUDs, mental health needs, or co-occurring conditions
- High-risk populations from diverse backgrounds
- Walk-ins, referrals, and step-down transitions from residential programs

A combination of services designed to meet complex needs:

- Case Management
- Mental Health Services
- Day & Evening Groups
- Socialization Activities
- Contingency Management



HealthRIGHT 360 has provided outpatient behavioral health services since 1985.



Phases of Treatment

HealthRIGHT 360 launched a phased model to meet clients where they are and sustain momentum.

Elements of Phased Treatment:

- Distinct directionality in treatment that directly addresses our client's needs and challenges as they evolve.
- A defined structure for our providers, giving them a guide in sustained care.
- Multiple points of celebration as the client graduates from phase to phase.
- Adherence and retention over the arch of treatment are standardized.

<u>Phases</u>	Description	Services	Requirements to Move to Next Phase	Timeline
1. Insight	Deepen your understanding of yourself and recovery	8 hrs of group counseling per week. 1 hr of individual counseling per week.	7 hrs of average attendance in group counseling per week. 100% attendance in individual counseling.	4 Weeks
2. Foundation	Build coping skills, manage responsibilities, and find employment.	3 hrs of group counseling per week. 1 hr of individual counseling per week.	2.5 hrs of average attendance in group counseling per week. 80% attendance in individual counseling.	6-8 months
3. Mastery	Integrate your knowledge into daily life and prepare for independent living.	2 hrs of group counseling per week. 1 hr of individual counseling per week.	1.5 hrs of average attendance in group counseling per week. 80% attendance in individual counseling.	6 Months
4. Independence	Apply your skills to live independently and build stability.	1 hr of group counseling per week. 1 hr of individual counseling per week.	0.75 hrs of average attendance in group counseling per week. 80% attendance in individual counseling.	3 Months
5. Alumni	Maintain recovery through support networks.	1 hr of group counseling (or) 1 hr of individual counseling per week.	N/A on going	



Sample Programmatic Framework

Intensive outpatient track:

- Week 1: Understanding the impact of SUD (Body, Mind, Relationships) and developing supportive recovery routines
- Week 2: Understanding and managing internal and external triggers
- Week 3: Understanding trauma, its interconnectedness to SUD, and traumatic containment
- Week 4: Understanding change and recurrence of use prevention

Thursday Mindfulness: Every Thursday is oriented in mindfulness to build recovery awareness and increase affect tolerance.

Friday Graduation: Because we have rotating cohorts, each cohort gets to experience a graduation every Friday, building motivation to remain engaged.

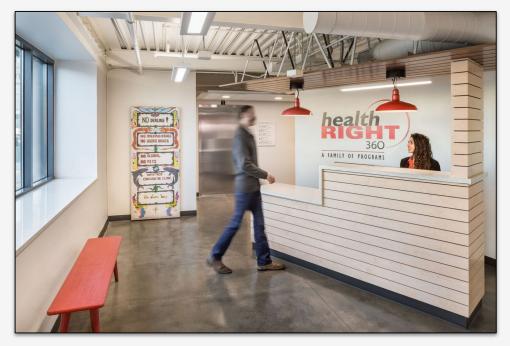


Withdrawal Management



Inclusion Criteria for Withdrawal Management

- Mild-Moderate alcohol or substance withdrawal
 - For alcohol: CIWA less than or equal to 15
- Requires withdrawal management in a residential setting
- Must perform all activities of daily living (ADLs) independently
- Must be able to follow directions
- Must be able to take prescribed oral medications without assistance or reminder
- Uncomplicated psychiatric or medical co-morbidity
- Does not require hospitalization or acute medical care



Intake is located at HealthRIGHT 360's Integrated Care Center at 1563 Mission Street.

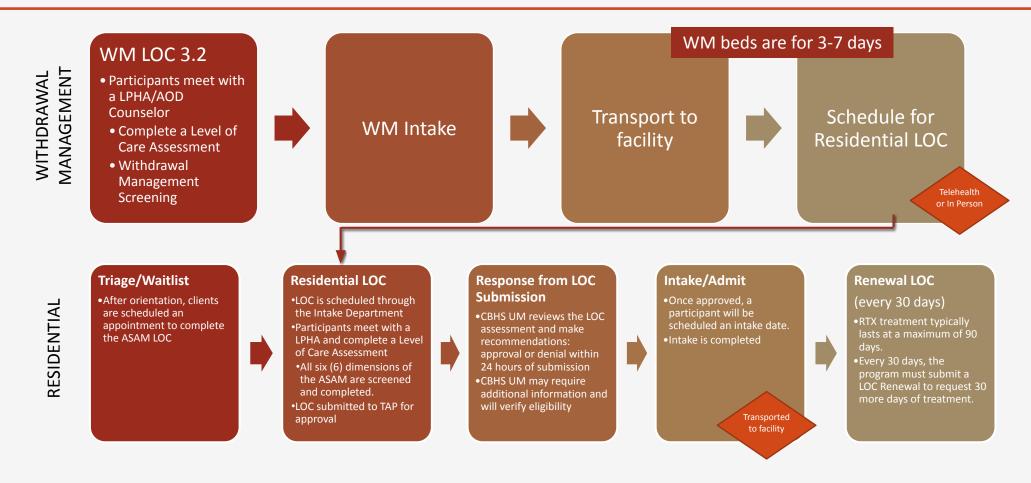


Potential Exclusion Criteria for Withdrawal Management

- Unstable physical condition requiring continuous monitoring, intravenous medications, or fluids
- Severely impaired cognitive status, such as delirium or moderate/severe dementia
- Current plan for self-harm or harm to others
- Current assaultive threats or behavior
- Current psychotic or depressive symptoms that significantly impair ability to self-care and/or participate in a social model program
- Recently started and/or restart on a psychiatric medication within the past seven days
- Unable to consent to and participate in the intake evaluation



Withdrawal Management and Residential Workflow





Residential Inpatient Treatment



Referral Process



1. Submission

Submit the online referral form.



2. Review

HR360 Intake staff review the referral and contact the referrer with any questions.



3. Decision

HR360 determines placement.
Depending on referral type,
instructions will indicate
whether to present at 1563
Mission Street or await
scheduling by the intake team.



4. Admission

Client completes intake at 1563 Mission Street, then HR360 staff transport the client to the assigned facility.



Eligibility for Residential 3.1, 3.3, & 3.5

1. San Francisco County Resident

Factors supporting residency (non-exhaustive):

- San Francisco Medi-Cal
- Documentation of transfer request
- LPS conservatorship in SF
- SF General Assistance
- Current official documents with SF address
- Previous SF history
- Placement by BHS/LPS/DHS conservator from out of county

2. Substance Use Disorder Diagnosis

Must meet ASAM criteria for medical necessity, including:

- Risk of recurrence of use
- Continued Use
- Problem Potential (i.e., areas of function)

3. Risk Factors

- Recent hospitalization (psychiatric or medical)
- Mental health needs
- Incarceration or other relevant risk factors



Other Eligibility Information

4. Certain Criminal Convictions

- Cannot admit individuals with convicted sex offenses requiring registry.
- Cannot admit individuals with a history of arson or arson-related charges.

5. Ability to Perform ADLs (Activities of Daily Living)

- Participants must care for themselves independently: cleaning, feeding, and mobility.
- ADA accommodations are available; wheelchair users must be able to transfer independently.

6. Minimum Clinical Hours

- DHCS/licensing requirement: at least 20 hours per week of clinical programming (groups, classes, one-on-one sessions).
- Plan schedules carefully if participants have multiple appointments that require leaving the facility.



Intake Flow (Day of)



Check-In

Temperature Check Name Assigned to a Numbered Seat Teams Message to Intake Team



Screening

AOD Counselor Escorts
Client to Assessment Room

Demographics
Medi-Cal Status/Insurance
Megan's Law/National Sex
Offender Registry
Substance Use History
Withdrawal Symptoms
Mental Health Symptoms
Medications
Readout to Intake Team



Assessment

MAT (AUD, OUD, &
Polysubstance)
Screen for Dependency
Severity
Speak with Provider
Withdrawal Management
Tools

Mental Health Safety Planning Medication Review Reality Testing Safe in Congregate Settings

3.2 ASAM LOC for SF Medi-Cal



AOD Prepares Chart Consent Forms Releases of Information Health Questionnaire Admission Agreements



UAs Collected Property Search



What to Bring to Treatment

Residential treatment is a communal living environment with limited space.

- Bring only what you will need during your stay.
- Limit belongings to no more than two bags.
- Bring at least a 30-day supply of all current medications.
 - Medications will be collected at intake and held by facility staff for safekeeping.
- Cell phones are allowed, but you must provide your phone number at intake.





Treatment Environment

Participants share rooms with one or more peers in a communal setting.

- All meals are provided. Dietary restrictions for health or religious reasons are accommodated whenever possible.
 - Outside food is not permitted.
- Clothing and hygiene items are provided if needed.
- Active participation in treatment is required, including:
 - Counseling sessions
 - Group activities
 - Program operations and community-based activities
- Participants must complete a minimum of 20 clinical hours per week to remain in compliance.
 - Consistent non-participation may result in discharge from the program.





Other Medical Requirements

Physical Examination

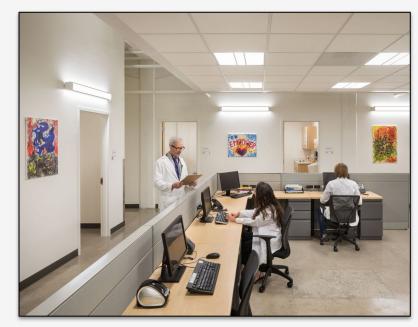
- Not required before referral.
- If completed within the last 7 days, please send documentation.
- Otherwise, HR360 medical staff will conduct the exam.

Laboratory Testing

- Not required before referral.
- If labs have been completed, please send documentation.
- Otherwise, HR360 medical staff will order and follow up as needed.

TB Screening

- Not required before referral.
- If completed within the last 30 days, please send documentation.
- HR360 can provide TB testing as appropriate.



The primary care clinic at the Integrated Care Center.



San Francisco Facilities



District-Level Service Overview, Capacity, & Reach

HealthRIGHT 360 San Francisco Service Overview, FY 2024-2025						
District	Location	Services Offered	Beds	Unduplicated Clients		
5	Buena Vista	Withdrawal Management & Residential	100	1,374		
5	Haight	Residential Step-Down	64	115		
5	Hayes	Acceptance Place & Men's Residential	99	613		
5	Hayes	Outpatient, Intensive Outpatient, Contingency Management	NA	156		
6	Howard	SoMa RISE Sobering Center	22	1,988		
6	Mission	Intake, Contingency Management, Outpatient & Intensive Outpatient	NA	712		
6	Mission	Primary Medical & Dental	NA	6,603		
6	Treasure Island	Residential Step-Down	190	447		
9	Bryant	Women's HOPE Perinatal Residential	15	40		
10	Donner	AAHC Outpatient & Intensive Outpatient	NA	116		



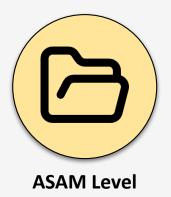
Dual Diagnosed Residential & Detox



- Residential facility that provides MH/SUD treatment for people who are dual-diagnosed, in addition to withdrawal management and detox services.
- Provides counseling/therapy, education, medication services, collateral services, crisis intervention, treatment planning, case management, physician consultation, discharge planning, care coordination.



Men's Residential & Acceptance Place

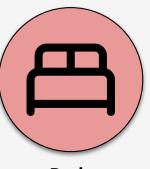


3.1, 3.5



· acincy

Hayes Street



Beds

89 + 10



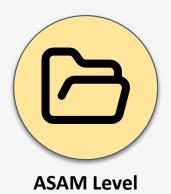
Population

Men, Gay/Bisexual Men, Trans Men, Men who have sex with other Men

- Residential facility that provides counseling/therapy, education, medication services, crisis intervention, treatment planning, case management, physician consultation, discharge planning, care coordination.
- The colocated Acceptance Place offers residential treatment services designed to serve male individuals identifying as Gay, Bisexual or Transgender with substance use disorders.



Women's Healing Opportunities Parenting Education (HOPE)



3.1, 3.5



Bryant Street



15



Population

Pregnant/Parenting Women, Those trying to reconnect with children

- Residential treatment program for pregnant women and mothers with young children.
- Parenting support along with SUD treatment.



Types of Referrals to SUD Treatment

Withdrawal Management & SoMa RISE

- Limited beds, quantity changes daily
- First come, first serve basis

In-person screenings only, participants are triaged accordingly

Hospital Detox

- Limited beds, quantity changes daily
- Fax applicable documentation to (415) 701-791

 Discharges from hospital settings are coordinated with medical social workers and providers

Community Referrals Residential

- Drop-in during business hours
- LOC Scheduled for Authorization

 Prior Authorization required via LOC assessment, can be scheduled in person at 1563 Mission Street



Hours of Operation: Integrated Care Center

Residential/Withdrawal Management

• When: Monday-Friday, 8:30 AM to 5:00 PM

• Where: 1563 Mission Street, 4th Floor

Prior Authorization required for residential

Outpatient

When: Monday-Friday, 8:30 AM to 5:00 PM

• Where: 1563 Mission Street, 3rd Floor Front Desk

Added to a waitlist, managed by each OP Program

Clinic Hours (Medical and Dental)

When: Monday-Friday, 8:40 AM to 4:30 PM

• Where: 1563 Mission Street, 5th Floor

• Saturday: Youth Dental Clinic



Contact Information

Residential/Withdrawal Management

MaryAnn Swift, Managing Director of Residential Programs Rochelle Collins, Director of Treatment Access Raymond Macias, CATC-I, Admissions Supervisor Lynne Evangelista, Intake RN (628) 588-7458 | mswift@healthRIGHT360.org (415) 864-9313 | rcollins@healthright360.org (415) 912-6118 | rmacias@healthright360.org (415) 519-5662 | levangelista@healthright360.org

Outpatient

Max Williams, Divisional Director of Outpatient Services(415) 213-1739Angela Rose Ball, Managing Director of Outpatient Services(415) 762-3700African American Healing Center (AAHC)(415) 685-4780Asian Drug and Alcohol Prevention and Treatment (ADAPT)(415) 750-5125Lee Woodward Counseling Center for Women (LWCC)(415) 523-7677Specialty Mental Health(415) 800-8500

(415) 213-1739 | mawilliams@healthright360.org (415) 762-3700 | anball@healthright360.org (415) 685-4780 (415) 750-5125 (415) 523-7677



Thank you!

MaryAnn Swift, Managing Director of NorCal Residential Programs mswift@healthright360.org

Max Williams, Divisional Director of Outpatient Services mwilliams@healthright360.org

Wesley Saver, Managing Director of Policy & Public Affairs wsaver@healthright360.org



Get Better. Do Better. Be Better.