

Health Commission | Street Teams

June 15, 2026



San Francisco Department of
Public Health

Street Team dual mission

The San Francisco Street Teams has a dual mission:
bring people in crisis on our streets into care and ensure
welcoming public spaces for the broader community.

Current vs. future state

Current state – DEM, HSH, DPH

Department of Emergency Management:

- Coordinating multi-disciplinary response to street conditions
- Managing 311/911 non-emergency response contract

Homelessness and Supportive Housing:

- Providing coordinated entry assessments, shelter placements, and housing case management
- Managing homelessness outreach contract

Department of Public Health:

- Providing intensive care navigation for the highest acuity unsheltered individuals
- Managing peer-based services contracts



Future-state –DPH only

Rapid-Response Team:

- Coordinating multi-disciplinary response to street conditions
- Managing 311/911 non-emergency response contract
- Supporting shelter placements and short-term case management
- Street-based behavioral health and medical care

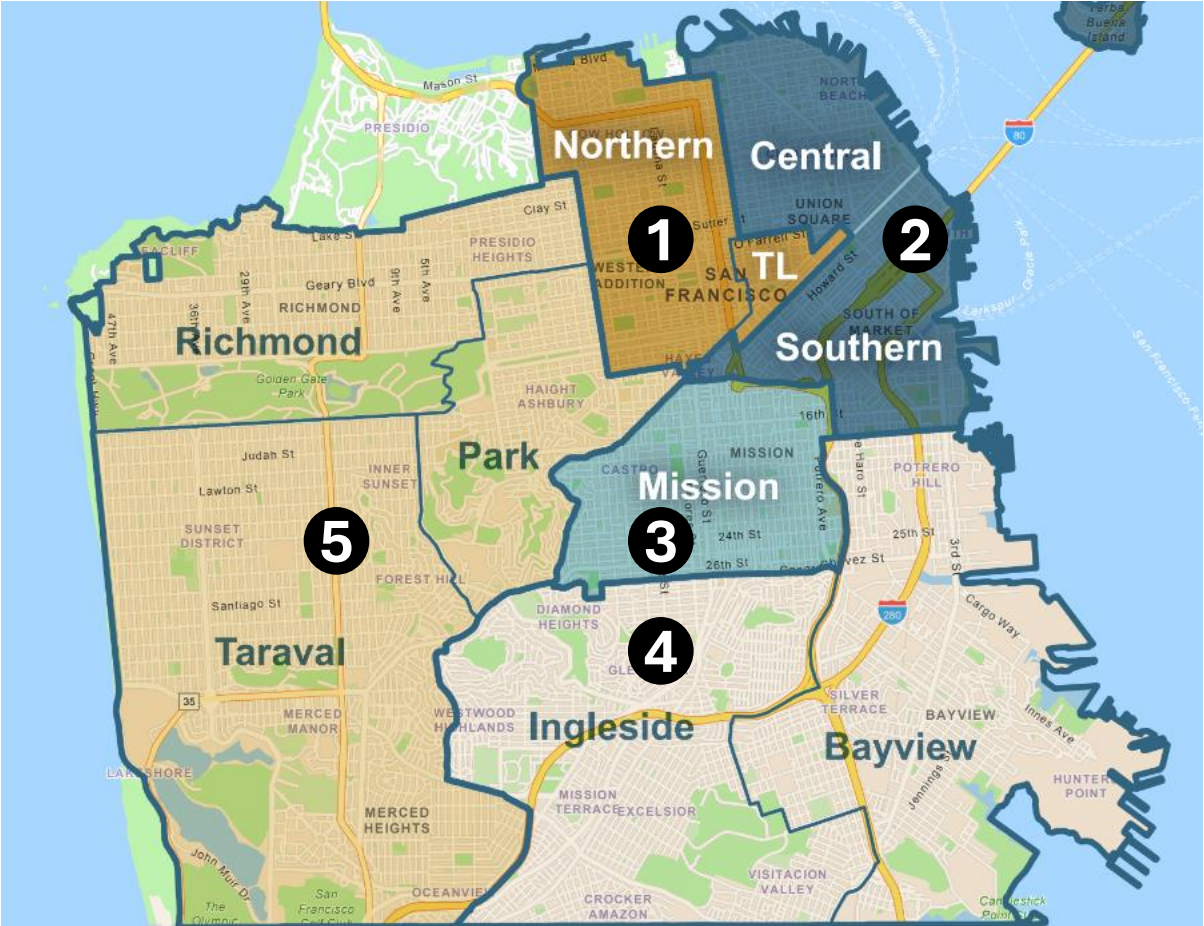
Shared-Priority Team:

- Providing intensive care navigation for the highest acuity unsheltered individuals, including shelter and housing connections
- Managing peer-based services contracts

Strategy Team:

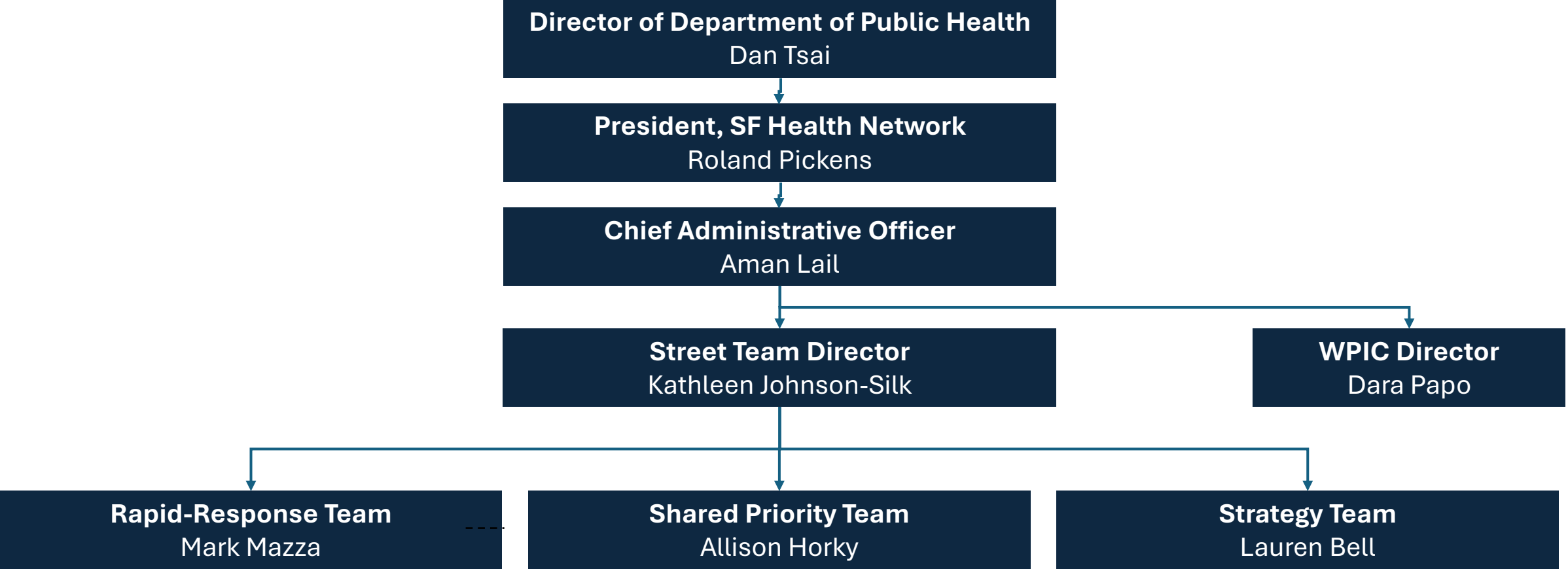
- Leading strategic planning, performance management, and data analytics
- Overseeing contract and grant management

Street Team | Team Geographies

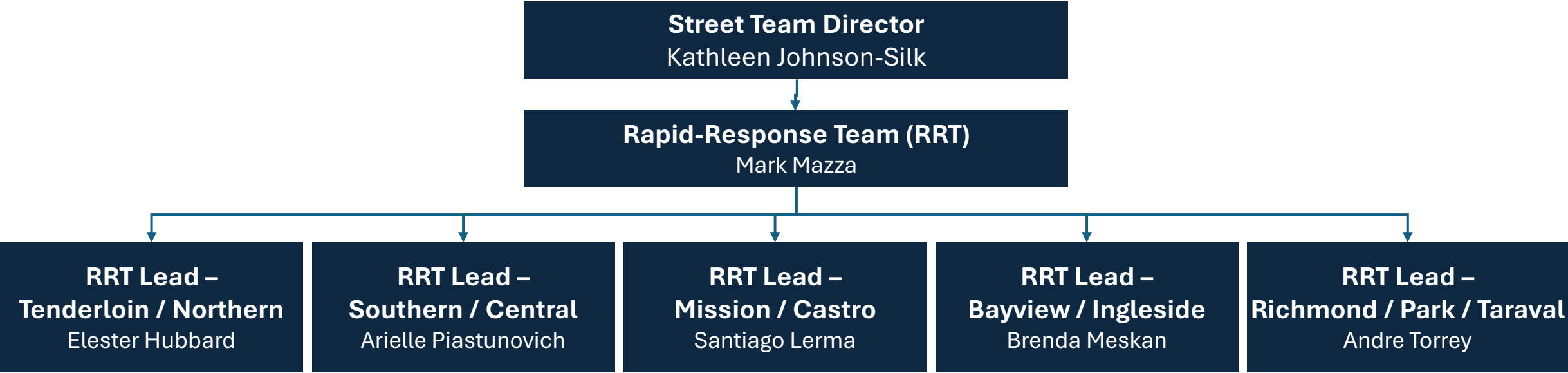


- 1** Tenderloin / Northern
- 2** Southern / Central
- 3** Mission / Castro
- 4** Bayview / Ingleside
- 5** Richmond / Park / Taraval

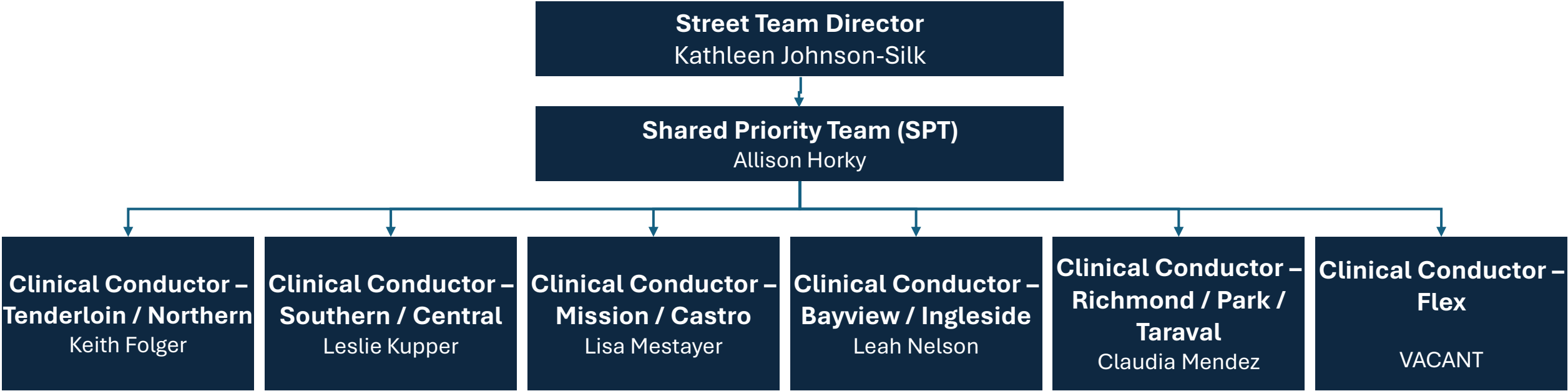
Street Team Org. Structure Overview



Street Team – Rapid-Response Team Overview



Street Team – Shared Priority Team Overview



Future-state staffing

Original Dept.	Civil Service staff	CBO Contracts
Department of Emergency Management	Seven (7) civil service staff , incl. Managers – 2 Manager IIIs and 5 Manager Is	One (1) CBO contract Urban Alchemy – HEART
Homelessness and Supportive Housing	Twelve (12) civil service staff , incl. - Managers – Manager II and Health Program Coordinator III - Behavioral Health Clinicians - Health Workers - Administrative and analytics support	Two (2) CBO contracts , incl. - Heluna Health – SFHOT program - Homeless Youth Alliance – Case Management
Department of Public Health	~Fifty (50) civil service staff , incl. - Managers – Manager IV, Manager II, and Health Program Coordinators - Behavioral Health Clinicians - Health Workers - Nurses and medical prescribers (MDs/NPs)	Two (2) CBO contracts , incl. - RAMS – Peer program - Code Tenderloin – Night Navigators program
Total	Approximately 69 civil service staff	Five (5) CBO contracts

Street Team Functional Overview

Team responsibilities

Rapid-Response

Mobilizes quickly to engage people in services

- 311 and non-emergent 911 same-day follow up
- Short-term case management
- Street-based behavioral health and medical care
- Community outreach to highly impacted areas
- Lead outreach for encampment resolution team (in collaboration w/ SFPD)
- Cross-departmental coordination for street conditions in each specific neighborhood

Shared Priority

Outcome-driven clinical and medical care for high-risk people

- Identifies highest risk people experiencing street homelessness through data and outreach
- Performs comprehensive, frequent engagement clinical care and case management
- Coordinates across departments and healthcare systems on behalf of individuals with complex cases and needs
- Prepares individuals to enter shelter and housing

Strategy and Ops

Aligns Street team mission, daily operations, and outcome reporting

- Strategic planning for Street Team
- Reporting and performance management
- Data analytics and tech transformation
- Data stewardship and compliance
- Contract management
- Training development
- Fleet mgmt.
- Facilities mgmt.
- Hiring and human resources support

Future state key metrics for street response

DRAFT – HIGHLY PRELIMINARY & CONFIDENTIAL

Citywide outcome metrics

North Star metrics:

- Reduction in unsheltered homelessness
- Reduction in fatal and nonfatal overdoses
- Reduction in distressing street behavior

Shared outcome metrics:

- Reduction in tent, structure and inhabited vehicle count
- Increase in Journey Home transports
- Increase in 911 medical/SCRT calls closed and speed to closure
- Increase in 5150 follow-up rates
- Increase in MOUD start/retention
- Reductions in hotspots



Outcome metrics for services

Overall metric: Connections to services

(medical/SUD/mental health services, medication, shelter/housing)

Rapid Response team metrics:

- Outcome of encounters (transported to alternative destination vs self-transport vs remained in place)
- 311/911 non-emergency tickets closed
- Speed of ticket closure
- Journey Home transports
- Street conditions

Shared Priority team metrics:

- System utilization (ER/SCRT/hospitalizations/5150/ODs)
- Distressing street behavior
- Connections to services
- Cases closed due to productive outcome and avg days before closure

DPH Street Team: From Identified Need to Seamless Health Connection

1 Identified Need & Triage

HOW PEOPLE REACH US

- Street encounter
- 311 or non-emergency call
- Self-referral or walk-up
- Hospital or shelter partner
- Warm interagency referral

TRIAGE ASSESSMENT

- Acute crisis or medical need?
- Chronically unsheltered?
- Behavioral health complexity?
- Housing-ready or stabilized?

2 DPH Street Team Response

Rapid-Response Team

Mobilizes quickly to engage people in services

Shared Priority Team

Outcome-driven clinical and medical care for high-risk people

3 Broader Health Ecosystem

CONNECTED SERVICES

Primary Care	Maria X. Martinez/DPH clinics
Behavioral Health	Psychiatric & SUD services
Substance Use	Methadone, residential Tx
Housing	Navigation ctrs, PSH
Emergency	SF General, EMS
Benefits	Medi-Cal, SSI, CalFresh
Shelter	MSC South, SIP hotels
Peer Counseling	Support from lived experience

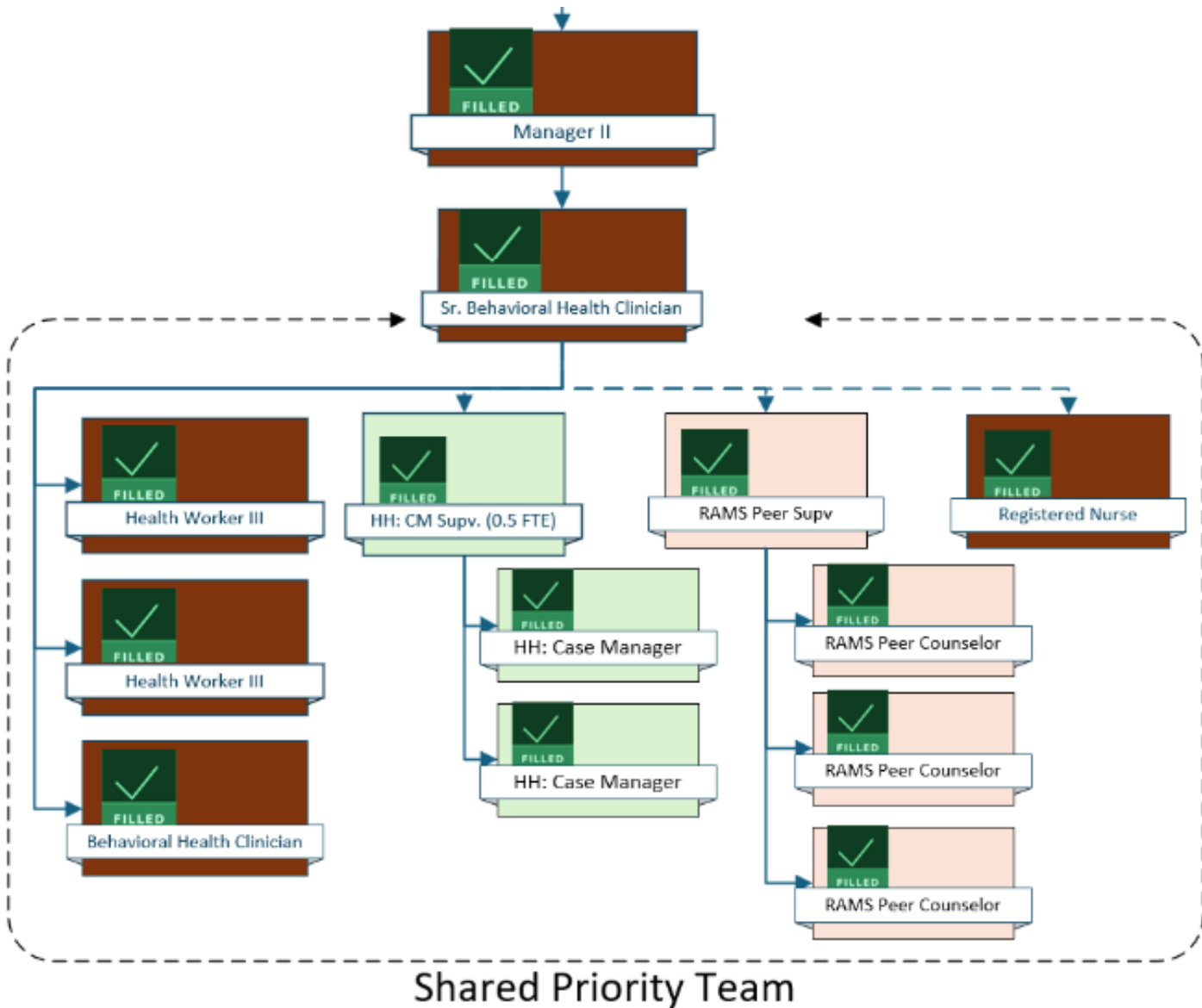
“Rory” Journey: DPH Street Team



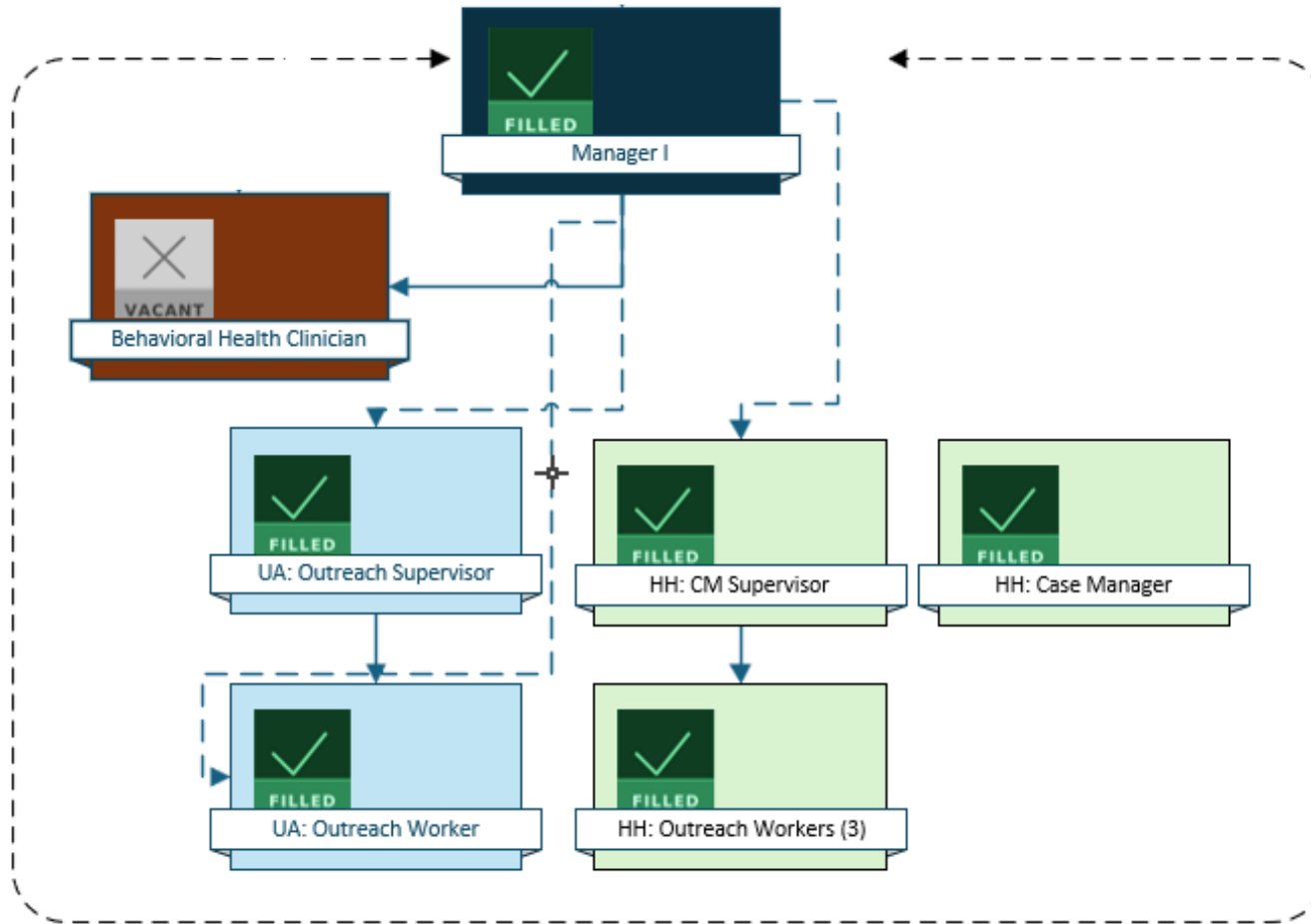
1. “Rory” was known to be disruptive in the Castro and not interested in services.
2. The DPH Rapid Response Team (RRT) Manager located Rory early in the morning through **routine outreach** and requested RRT outreach.
3. A team familiar with Rory, **quickly triaged immediate needs** and promptly engaged, bringing Rory to Ross to buy needed clothes while awaiting shelter placement support.
4. RRT team members coordinated a placement at the Divisadero Navigation Center and **facilitated a quick connection** to RRT case management.
5. Through **effective communication and tight coordination**, Rory was transitioned to Gough Cabins, a longer-term, shelter with **specialized behavioral health support**. At Gough Cabins, Rory **accepted medical care** for the first time.
6. **Rory continues to be supported and has not been disruptive in the community since this collaborative engagement.**



ILLUSTRATIVE Organizational Structure | Shared Priority Team



ILLUSTRATIVE Organizational Structure | Rapid Response Team



Team 5: Rapid-Response Team (RPT Morning)

Thank you | Questions ?



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Public Health