A DOS Contract is a Contract for the provision of goods or services that directly supports DPH's operations.

Contracto	: The Regents of the University of			ivision/Section:	SFDPH/Jail Health	SFDPH/Jail Health Services Tanya Mera Martin Soto		
California			D	eputy Director:	Tanya Mera			
Address:	490 Illinois St. F	490 Illinois St. Fl 11, Box 1242			: Martin Soto			
	San Francisco, C	CA 94143		rogram dministrator:	Tanya Mera	Phone:	415-995-1713	
Contact:	Marta Gilbert	Phone: (415) 5	02-0392 C	ontract Analyst:	Tyrone Webb	Phone:	628-271-7092	
Stand Tria Health Jai months co	ol Mental Health Div I Health Services Di Dommencing on Deco	version program vision. The total ember 1, 2025 to	ming on beh proposed co	alf of the City and entract amount is	n Francisco to perforr Couty of San Francisc \$9,376,440.51 for the	co, Departi	ment of Public	
	y one for each que: ·	stion below:	C: -					
1. Vend			For Profit [☐ Non-Profit ⊠	Government Entity			
2. Is the LBE?	e Vendor a CMD Ce	ertified \square	Yes [□ No				
3. Purc	hasing Authority:		RFP		Administrative Code Chapter 1.25 Government to Government		GPO	
If ye: busii	s DPH have other ex s, approximately ho ness with this Vend	ow many years l lor? Provide exp	nas DPH bee	n doing	Yes			
CONT	RACT INFORM	ATION		Proposed Tra				
FUNDING SOURCES:				12/1/25 - 6/3	0/30		_	
Department of State Hospitals			als					
=	TOTAL DPH REVE	NUES WITHOUT	CONTINGEN	<u>cv:</u> \$8,371,821.8	8			
		129	% CONTINGEN	ICY: \$1,004,618.63	3			
TOTAL CONTRACT AMOUNT WITH CONTINGENCE								
<u> 101A</u>	L CONTRACT AIM	OUNT WITH C	ONTINGEN	<u> </u>				
	<u>0</u>	NE-TIME UPF	RONT COS	<u>rs:</u> \$186,774				
				Year 1 pro-rates Year 2: \$1,675 Year 3: \$1,73 Year 4: \$1,805 Year 5: \$1,87	7,243.25 5,705.42	092,467.33	3	

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PROPOSED BREAKDOWN OF ITEMS/SERVICES

Item or Service	Quantity	Unit Price	Amount
Implementation Funds	One-time funding		\$186,774
	Up to 16 clients		
	per year for the 5-		
Wrap-Around Dual Diagnosis Intensive Clinical Services	year term of the		
and Housing with 5% annual increase/COLA	agreement	\$237/client/day	\$6,345,047.88
Court Liaison	5 years	\$43,000/year	\$215,000
	Up to 16 clients		
	per year for the 5-		
	year term of the		
Violence Risk Assessment	agreement	\$325,000/year	\$1,625,000

Purpose of Contract:

The purpose of this contract between the San Francisco Department of Public Health (SFDPH) and UCSF Citywide Case Management (Citywide) is to implement and operate the permanent Felony Incompetent to Stand Trial (IST) Mental Health Diversion (FMHD) Program on behalf of the City and County of San Francisco. This program is funded through SFDPH's agreement with the California Department of State Hospitals (DSH) under the State's Diversion and Community-Based Restoration Initiative.

Through this contract, SFDPH and Citywide will collaborate to fulfill statutory requirements under California Penal Code § 1001.36 and Welfare and Institutions Code § 4361 by providing community-based wrap around services as an alternative to incarceration or inpatient restoration for individuals with serious mental illness who have been found IST on felony charges and are deemed eligible for diversion.

Under the terms of this agreement:

- **Citywide** will deliver clinically appropriate, evidence-based behavioral health services—including intensive case management, psychiatric care, substance use disorder services, and psychosocial rehabilitation—for up to sixteen (16) participants annually. Each client will receive an average of 18 months of coordinated care and support.
- **SFDPH** will oversee the program's implementation, fiscal management, and compliance with all applicable State and local requirements. This includes administrative oversight, coordination with justice partners, and data reporting to DSH.

The goals of this partnership are to:

- Expand San Francisco's capacity to provide diversion for felony IST clients;
- Reduce reliance on the State Hospital system and avoid unnecessary incarceration through clinically informed, community-based alternatives; and
- Strengthen collaboration across behavioral health, court, and justice partners to improve outcomes and public safety.

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Ultimately, this contract establishes the operational and fiscal framework through which SFDPH and UCSF Citywide will provide Felony IST Mental Health Diversion services in compliance with State law while improving continuity of care for San Francisco's most vulnerable justice-involved residents.

Performance Monitoring

Under this agreement, UCSF Citywide Case Management shall be responsible for implementing and operating clinical, programmatic, and reporting components of the Felony Incompetent to Stand Trial (IST) Mental Health Diversion Program. UCSF Citywide shall ensure full compliance with all applicable laws, regulations, and court orders and shall maintain close coordination with the Superior Court of San Francisco, the Office of the District Attorney, the Office of the Public Defender, and the Adult Probation Department.

A. Client Evaluation and Placement

- 1. Eligibility Determination: UCSF Citywide shall assess and determine eligibility and suitability of individuals found IST on a felony charge in accordance with Penal Code §1001.36 and Welfare and Institutions Code §4361.
- 2. Timeliness: UCSF Citywide shall submit diversion eligibility and suitability reports and individualized treatment plans to the committing court promptly upon determining clinical appropriateness.
- 3. Initial Assessment: UCSF Citywide shall complete initial clinical assessments within timelines established by the court and the FIST MHD Program Plan.

B. Use of Validated Tools

- 1. Risk Assessment: UCSF Citywide shall use an empirically validated structured professional judgment tool to assess violence risk.
- 2. Substance Use Screening: UCSF Citywide shall use a validated screening instrument to assess substance use disorders and inform treatment planning.

C. Individualized Treatment Program

- 1. UCSF Citywide shall provide intensive, trauma-informed treatment addressing both mental illness and co-occurring substance use disorders.
- 2. Services shall include peer support and access to crisis intervention twenty-four (24) hours per day, seven (7) days per week.
- 3. Weekly multidisciplinary case conferences shall be held to review progress and treatment effectiveness.
- 4. UCSF Citywide shall obtain informed consent for psychotropic medications and coordinate medication administration with prescribing providers.

D. Documentation

- 1. UCSF Citywide shall maintain complete clinical and program records for a minimum of seven (7) years.
- 2. All services shall be documented in Epic, SFDPH's medical record in accordance with requirements set forth by SFDPH and the Department of State Hospitals.

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E. Data Collection and Reporting

- 1. UCSF Citywide shall be responsible for all data collection, analysis, and reporting required by the Department of State Hospitals, and the court.
- 2. UCSF Citywide shall submit:
 - Progress reports to the committing court as ordered;
 - AWOL and Special Incident Reports (SIRs) to the Department of State Hospitals (DSH) within twenty-four
 (24) hours of occurrence, with narrative follow-up within forty-eight (48) hours;
 - Revocation reports to DSH within two (2) business days;
 - Weekly and monthly data submissions as required by DSH; and
 - o Annual expenditure and performance reports in accordance with SFDPH standards.

F. Discharge Planning

- 1. UCSF Citywide shall initiate discharge planning no later than thirty (30) days prior to the anticipated program completion.
- 2. Discharge planning shall include coordination of community handoffs, continued access to prescribed medications, and linkage to ongoing behavioral health and social services.

G. Program Capacity and Fidelity

- 1. UCSF Citywide shall maintain program capacity for sixteen (16) clients annually, with an average length of stay of eighteen (18) months.
- 2. Services shall comply with the DSH Diversion Program Manual and the Permanent Diversion Policy and Procedure Manual.
- 3. UCSF Citywide shall operate a multidisciplinary treatment team consisting of licensed clinical staff and peer specialists to ensure fidelity to the program model.

Listing of CEO, Board of Directors, and Owners of 10% or More of the Firm:

CEO:	N/A
Board of Directors:	
Owners of 10% or more of the Firm:	N/A