



San Francisco  
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

## Jail Health Services

A System of Care for Incarcerated People

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Director

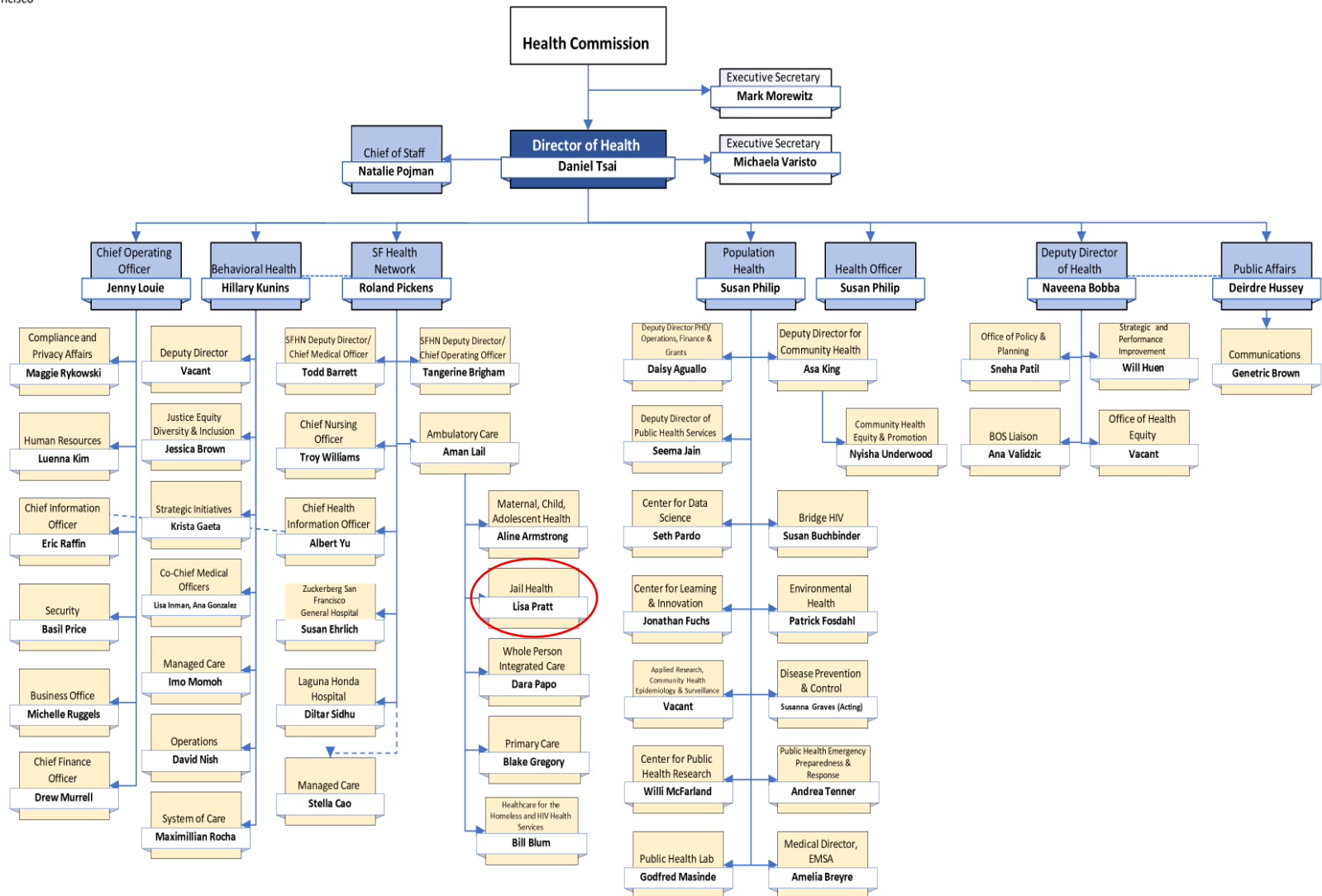
Jail Health Services

July 7, 2025



# Agenda

- DPH in the County Jail
- JHS Structure and Budget
- JHS Care Delivery Model
- CalAIM – Justice Involved Update
- STAR Initiatives and JHS





# Jail Health Services (JHS) Overview

- JHS provides primary care, urgent care, dentistry, substance use treatment and psychiatric services to all people incarcerated in the San Francisco Jails in partnership with the SF Sheriff's Office
- Jail Health Services is the **only** section of DPH that admits and cares for patients 24/7/365 with no option to divert patients or close to admissions
- Historically, JHS was 100% general-funded because until recently federal law prohibited use of federal funds for medical care provided to "inmates of public institutions", including Medicare and Medicaid



# DPH in the County Jail

- United States Constitution guarantees right to healthcare *only for those who are incarcerated* - by 8<sup>th</sup> and 14<sup>th</sup> amendments
- California law – Title 15 – county sheriff holds the responsibility to provide healthcare to incarcerated people in county jails
- SF Sheriff partners with SFDPH to ensure that incarcerated individuals receive necessary healthcare services, as recognized by the resolution *Incarceration is a Public Health Issue* adopted by the Health Commission in 2019



## Our Mission

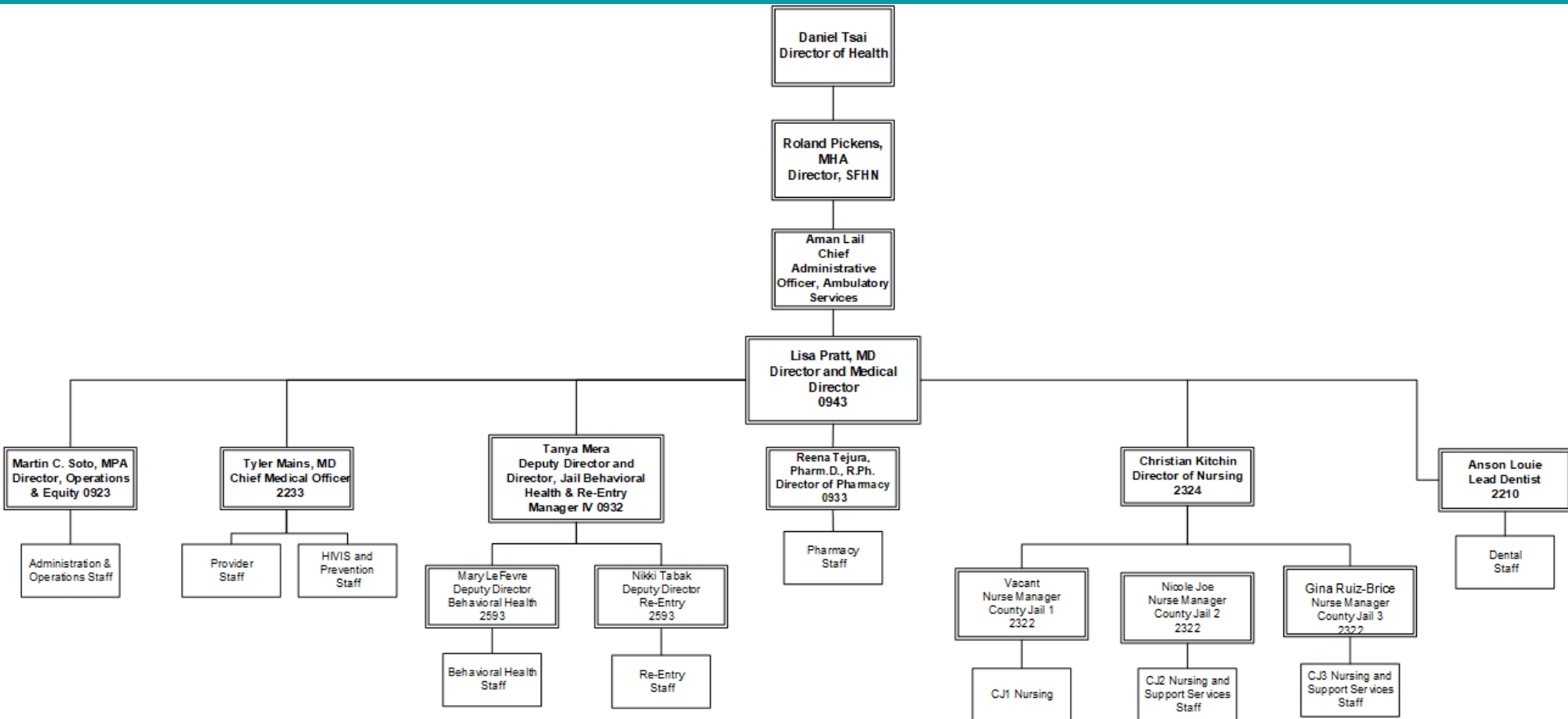
- To provide comprehensive, compassionate, and respectful care for incarcerated people while mitigating the effects of structural racism and historical injustices as a fully integrated and collaborative member of San Francisco's Public Health Department.

## Our Vision

- Create a culture and system of care that enhances wellness



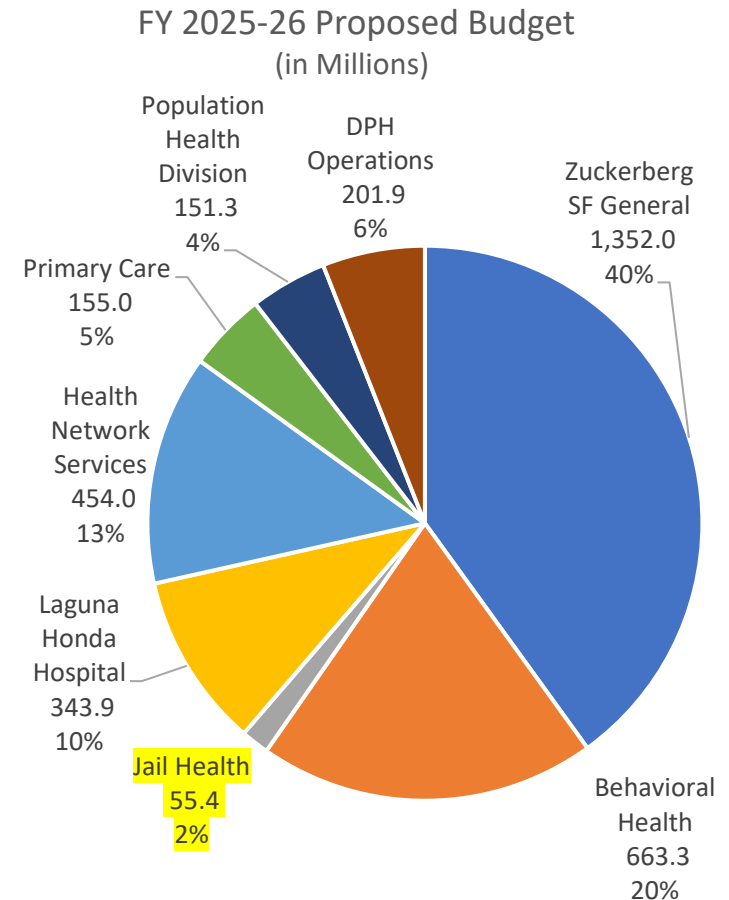
# JHS Organizational Chart





# JHS Budget and DPH Overall

DPH Division	FY 2025-26 (\$s in Millions)	FTE
Zuckerberg SF General	\$1,352.99	2,970
Behavioral Health	663.31	833
Jail Health	55.41	181
Laguna Honda Hospital	343.85	1,312
Health Network Services	454.04	814
Primary Care	154.96	511
Population Health Division	151.31	471
DPH Operations	201.91	591
<b>Total</b>	<b>3,376.77</b>	<b>7,684</b>



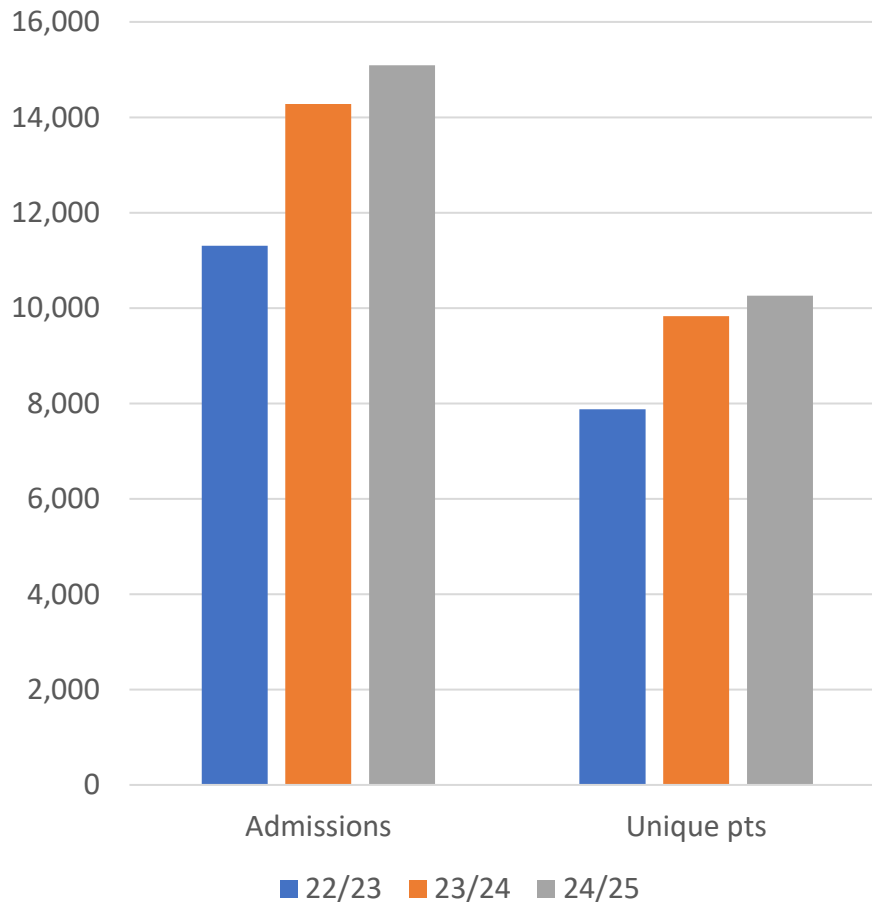
*Note: the majority of DPH FTEs and budget are direct care workers (nurses, social workers, clinicians) and staff (e.g., food services, janitorial, facilities) required to run our healthcare settings like ZSFG, outpatient primary care and behavioral clinics, etc.*



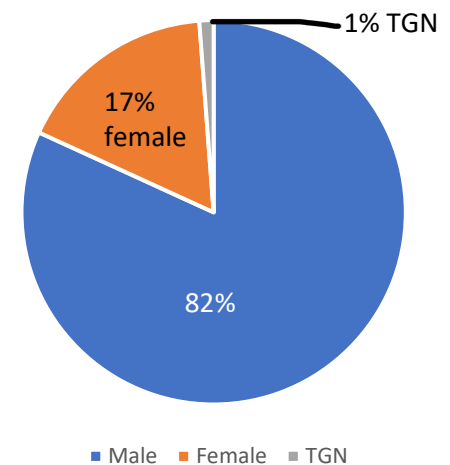


# Intake Trends + FY24/25 Demographics

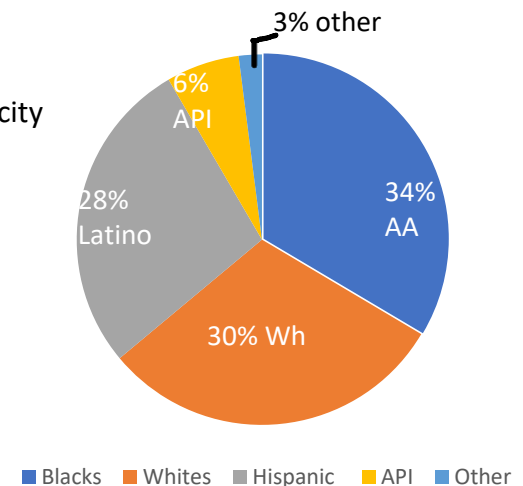
## Intake FY22-25



## Gender Identity 24/25

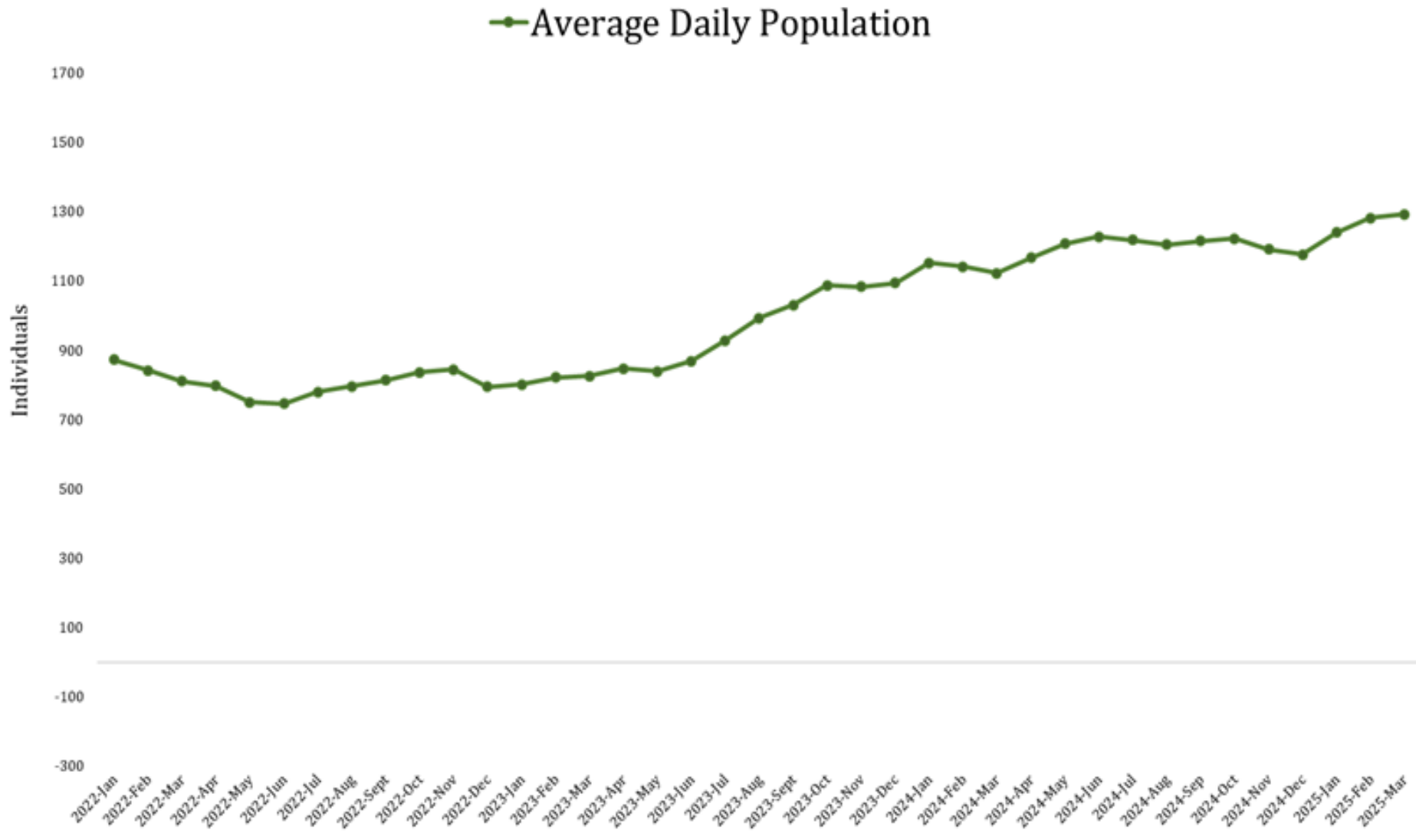


## Race/Ethnicity





# Jail Census 2022-2025





# JHS Medical and Behavioral Health Care: Safety Net of the Safety Net

## Intake and Screening

All people screened on intake for history of mental illness, psychiatric medication use, substance use, suicide risk, medical conditions, injury

## Primary/Urgent Care

Stabilize untreated conditions. Onsite primary and urgent care, dental, podiatric, OB/GYN services. Linkage to ongoing care at discharge. HIV, HCV, STI screening and treatment. Specialty OB/GYN care onsite. SUD withdrawal management and MOUD.

## Infection Control

Intensive screening and isolation or quarantine for communicable diseases such as COVID-19, MPX, influenza, and tuberculosis

## Skilled Nursing/Long Term Care

All meds nurse administered individually, and staff provides IV antibiotics, complex wound care, other office-based procedures. Limited access to real time diagnostic capability (labs, imaging, etc.)

## Mental Health

Care in the jails: screening and assessment, crisis intervention, psychiatry, and individual and group treatment. Full spectrum of care from general behavioral health support to specialty mental health care

## Substance Use Disorder

Care in the jails: individualized treatment plans include medications for addiction treatment (MAT), abstinence models (12-step, AA, NA), BHS support via group and individual treatment; overdose prevention education and naloxone distribution



# Patient Success

Story: a woman admitted to the jail and was 9 weeks pregnant. She started on buprenorphine during her incarceration, was connected to a JUNO navigator and released to Friendship House Residential Treatment. She was also connected to Team Lily at ZSFG for pregnancy care and postpartum support. She completed her 90-day residential treatment and transitioned to Epiphany House Residential Treatment. She has continued to engage in treatment, take medication as prescribed, connected to a mental health agency for services and gave birth to a healthy baby.

Keys to success – People, Place, Purpose:

- Patient engagement – she felt committed to a healthy pregnancy and a healthy baby
- Support to resolve criminal legal issues
- Stable housing – left jail and went to residential treatment
- Ongoing treatment – continued access to buprenorphine
- Integration of services, navigation and case management across DPH and CBOs – Jail Health, Project JUNO, Friendship House, Team Lily at ZSFG, Epiphany House, Westside Community Services



# CalAIM Justice Involved Initiative



**Represents the first State and Federally-mandated, Health Department established minimum standards for healthcare in jails and prisons**



**Advances health equity** by requiring equal requirements for healthcare delivery including medical, mental health, SUD, care coordination and transition planning services.



**Aims to improve health outcomes** by providing targeted services to a population disproportionately burdened by disease and disparity.



Requires Jail Health Services to bill Medi-Cal for clinical services already provided and for a **significantly expanded set of release planning services** designed to support the transition from jail to the community



# CalAIM- JI Launch

- CalAIM – JI launched successfully on April 1, 2025 with 1 year implementation period
- Expanded Services:
  - MediCal screening and eligibility
  - Screening for pre-release services
  - Screening for behavioral health linkage
  - Medication for SUD, pre-release and at discharge
  - In-reach provider support
  - Behavioral health linkage
  - Care management Reentry Plan
- Revenue Projections based on Apr-Jun 2025:
  - Initial revenue projection for FY25/26 estimated at \$7.63M
  - Estimated actual revenue based on first 3 months is \$11.2M



# JHS OUD System of Care

**JHS operates the largest medical withdrawal management unit in San Francisco and is one of the city's largest source of buprenorphine treatment initiation**



## Integrated Treatment

SUD treatment is fully integrated into Jail Health's care delivery system, beginning at booking and continuing throughout incarceration.



## Medication Management

Comprehensive withdrawal management and medication assisted treatment services are provided by qualified medical professionals.

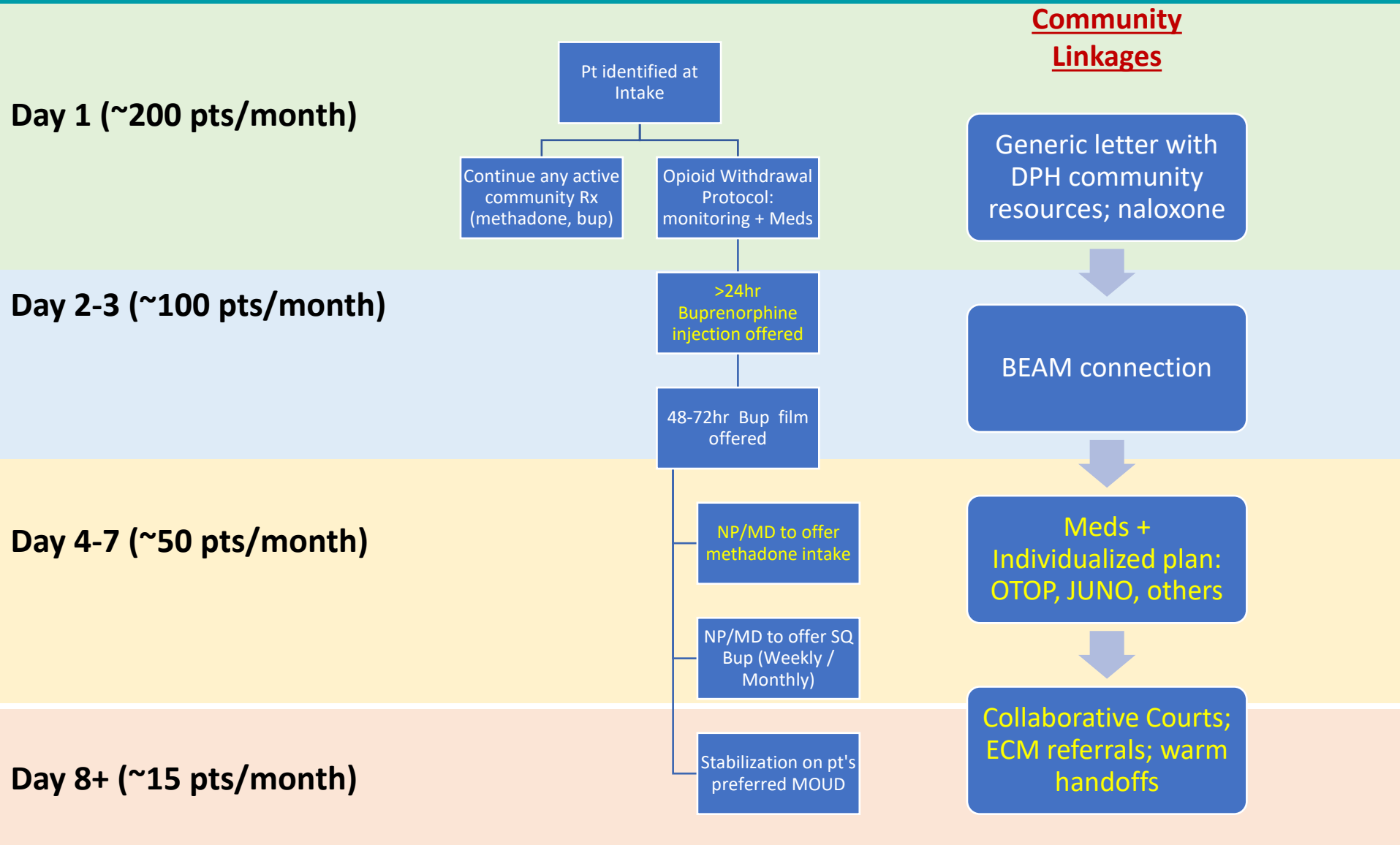


## Continuity of Care

Treatment includes group and individual therapy, SUD counseling and programming, and release planning and community linkage, ensuring care for dually diagnosed individuals continues beyond incarceration.



# STAR Priority Initiatives - JHS







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Thank You!

Questions?