

# Psychiatric and Substance Use Treatment Referrals on a Street Medicine Service

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## Background:

- Substance use disorders (SUDs) and mental health problems are highly prevalent among unhoused populations
- The Street Medicine service in San Mateo County has provided behavioral health (SUD and mental health) treatment directly to people living on the street, in encampments, and in vehicles since 2016
- According to the Street Medicine 2022 Annual Report, there were 3,783 unique Street Medicine visits to unhoused people in San Mateo County,<sup>1</sup> but the number related to behavioral health concerns is unknown
- No existing data measured the utilization or functioning of San Mateo Street Medicine behavioral health services

## Study Objectives:

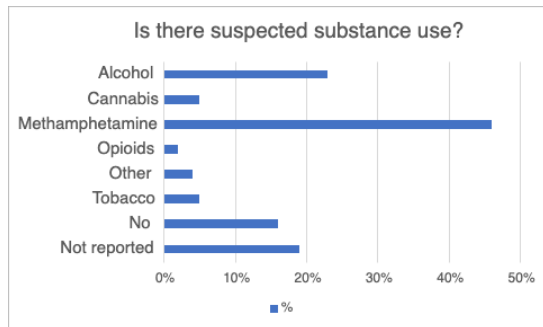
- Quantify the number of referrals made to SUD and psychiatry in a three-month period to gauge utilization
- Understand providers' experiences with the referral system (e.g., what is working well, areas for improvement)

## Methods:

- Collected quantitative data from behavioral health providers on total number of referrals to SUD and psychiatry, and demographics (age, gender, suspected behavioral health disorder, languages spoken) of those referred
- Structured interviews with all Street Medicine providers (n=9 providers) regarding screening/referral processes

## Results: Quantitative Findings

- 77 referrals were made to SUD and psychiatry between December 2023-February 2024
  - Age: mean=43 years ( $SD=12.3$ , range=22-68)
  - Gender Identity: 56% man, 40% woman, 4% non-binary or gender expansive
  - Language Spoken: 79% English, 40% Spanish, 25% with limited English proficiency



Suspected diagnosis	# referred to psych (n=65)	# referred to SUD (n=12)
Substance use disorder	32	12
Mood disorder	30	4
Psychotic disorder	16	2
Anxiety disorder	14	0
Other	11	2
Unknown	3	2

## Results: Qualitative Interviews

- Providers interviewed: 4 Nurse Practitioners, 2 Medical Support Assistants, 3 therapists
  - Years of experience:  $M=9$  ( $SD=8$  years, range=1-27 years); Years of experience on Street Medicine team:  $M=3$  ( $SD=2.5$  years, range=0.5-8 years)
- Key Themes:
  - Importance of rapport building: a slow and steady approach focused on building trust first (*"So, a softer touch where I get to know them as a human being and as I get to know them better, I look at drugs and alcohol and stuff like that."*)
  - Use of screening tools varies across providers: 5 use at least one standardized tool
  - What's working well? Recent new availability of psychiatry services, current SUD counselor is excellent
  - What could be better?
    - System reactivity: quicker connections to detox services
    - Need for more Spanish-speaking staff
    - Integration of medication assisted treatment into Street Medicine care
    - Education in harm reduction for providers
    - Delays in patient insurance approval

## Recommendations:

- Additional SUD staff or hours to react more quickly to patient interest in detox
- Lobby county for additional detox facilities and fewer barriers to access for patients
- Hire more Spanish-speaking staff
- Collaborate with IMAT team to increase harm reduction and MAT education
- Standardize use of screening tools

<sup>1</sup>[https://www.smchealth.org/sites/main/files/file-attachments/2022\\_hchfh\\_annual\\_report\\_0.pdf?1695860184](https://www.smchealth.org/sites/main/files/file-attachments/2022_hchfh_annual_report_0.pdf?1695860184)