



CARE

(Community Assistance, Recovery and Empowerment) Act

California Health & Human Services Agency
Person Centered. Equity Focused. Data Driven.

Stephanie Welch, MSW
Deputy Secretary of Behavioral Health
California Health and Human Services Agency
Person Centered. Equity Focused. Data Driven

CalHHS Roles and Responsibilities (overall)

- Lead coordination efforts with and between the Judicial Council and DHCS
- Engage with cross sector partners at city and county level, individually and through collaboratives and convenings
- Coordinate with partners and a diverse set of stakeholders via regular meetings – including county associations (*CSAC and key affiliates like CBHDA, RCRC, CA Association of PA/PC/PG, CWDA, etc.*)
- Support DHCS training, technical assistance and evaluation efforts, as well as implementation of Behavioral Health Bridge Housing program, monitor housing related needs throughout implementation
- Support communications through a website dedicated to the CARE Act, including a listserv, respond to media, legislature, and other stakeholder inquiries, provide proactive media and community engagement and outreach
- Regular cross sector convening of Cohort 1 counties for collaborative implementation planning (began November 2022), with information and resource sharing for Cohort 2 counties coming in 2023 and 2024

CalHHS Roles and Responsibilities (Working Group)

CARE ACT Working Group

- Working group met first on February 14, 2023 and serves as a mechanism to **receive feedback from partners to support successful implementation** and help key constituents understand policy and program progress who can then **disseminate accurate information**.
- 25+ members including representation from families, cities and counties, behavioral health providers, judges, legal counsel, peer organizations, disability rights and racial equity stakeholders, and housing and homelessness providers.
- Provide feedback on implementation activities including:
 - Annual report and evaluation plan, including data collection and reporting
 - TA/training for counties, volunteer supporters, legal counsel, judges, etc.
 - County implementation progress
 - Housing access
 - Other emerging issues

Background and Legislation's intent

- SB 1338 signed into law by Governor September 2022
- Eligible population = those with **untreated schizophrenia spectrum and psychotic disorders**
 - Estimated 7,000-12,000 in California
- CARE is intended to be a **new process**, that can be supported and served by **existing programs**
- Intended as a compassionate, **upstream diversion** to prevent more restrictive conservatorships or incarceration

The CARE process involves...

The respondent, as well as:

- Petitioner
- County Behavioral Health Department
- Civil court
- Legal Aid or Public Defender
- Voluntary Supporter, if desired
- Comprehensive CARE Plan

Why Courts?

- Criminal courts are often in the crosshairs of the lives of those suffering from severe, decompensated mental illness
 - By going upstream with a civil court process, CARE aims to serve individuals **before criminal court or conservatorship**
- CARE is a **vehicle for collaboration and coordination**, not compliance
 - County outreach and engagement begins before court engagement
- The court can deepen its engagement and oversight if:
 - The government entities can't implement an appropriate, person-centered plan; or
 - Client cannot participate

Implementation timeline

- **October 2023:** Cohort 1 counties
 - Glenn, Orange, Riverside, San Diego, Stanislaus, Tuolumne, and San Francisco
 - LA is accelerating implementation to December 2023
- **December 2024:** All 58 counties
 - Unless county granted additional time by DHCS

Funding

- **\$64.7m** to counties in current year in start up and implementation funds. See: <https://www.dhcs.ca.gov/provgovpart/Documents/BHIN-22-059-General-Uses-of-the-CARE-Act-Startup-Funding.pdf>
 - The Administration continues to work with Judicial Council and county partners to estimate costs associated with this new court process, including administrative costs.

Recent facility, residential, and housing investments most likely to serve CARE respondents

- **\$1.5b** in Behavioral Health Bridge housing. See: <https://bridgehousing.buildingcalhhs.com/>
- **\$2.2b** for Behavioral Health Continuum Infrastructure Program. See: <https://www.infrastructure.buildingcalhhs.com/>

Qualified Legal Services Projects Planning Grantees

Planning Grant Recipient	Cohort One County(ies) of Focus
Affordable Housing Advocates	San Diego
Asian Pacific Islander Legal Outreach	San Francisco
Bay Area Legal Aid	San Francisco
California Rural Legal Assistance, Inc.	Stanislaus
Coalition of California Welfare Rights Organizations	San Francisco
Community Legal Aid SoCal	Orange
Disability Rights Education & Defense Fund	Glenn; Orange; Riverside; San Diego; Stanislaus; Tuolumne; San Francisco
Inland Counties Legal Services	Riverside
Justice & Diversity Center of the Bar Assn. of San Francisco	San Francisco
Legal Aid Society of San Bernardino	Riverside
Legal Aid Society of San Diego	San Diego
Legal Aid Society of San Diego	San Diego
Legal Assistance to the Elderly	San Francisco
Mental Health Advocacy Services	Glenn; Orange; Riverside; San Diego; Stanislaus; Tuolumne; San Francisco
OneJustice	Glenn; Orange; Riverside; San Diego; Stanislaus; Tuolumne; San Francisco
Open Door Legal	San Francisco
Public Law Center	Orange
Senior Advocacy Network	Stanislaus
University of San Diego Legal Clinics	San Diego

Thank you!

**More
information on
CARE**

chhs.ca.gov/CARE-act/

Email us at
CAREAct@chhs.ca.gov
join the CARE listserv to
receive updates and
information on future
stakeholder events

Judicial Council

CSAC 2023 Legislative Conference

April 12, 2023



Judicial Council

The Judicial Council is the policymaking body of the California courts.

In accordance with the California Constitution, the Council is responsible for ensuring the consistent, independent, impartial, and accessible administration of justice.

Judicial Council Rules and Forms

The Judicial Council strives to maintain a rule-making process that is understandable and accessible the public and to justice system partners.

Judicial Council rules of court implement new legislation by setting down procedures and practices.

Judicial Council forms provide information and directions that walk parties through each step of required documentation.

CARE Act Rules

The 11 Rules of Court for the CARE Act:

State the purpose of the CARE Act rules; define terms; describe requirements (e.g. eligibility) and procedures (e.g. appointing and substituting counsel; providing notice), explain joinder rules and accountability provisions; consolidate the requirements of multiple statutory provisions (e.g., confidentiality of court records of CARE Act proceedings).

CARE Act Forms

The 13 Forms for the CARE Act:

Provide information for petitioners, respondents, justice partners; are designed for unrepresented parties; guide the reader sequentially through judicial proceedings under the CARE Act; provide item-by-item information on the forms; define terms (e.g. eligibility, venue); explain rights and roles; describe procedures; offer optional standard forms (to establish that respondent was properly served and received all required documents).

JUDICIAL COUNCIL CARE ACT PROGRESS UPDATE

- **Rules and Forms:** 11 rules of court and 13 forms and information sheets are submitted for approval at the May 12 Judicial Council meeting.
- **Communications:** Maintain Care Act Communication Hub and JC CARE ACT mailbox. Monthly meetings with courts and bimonthly convenings with courts and local partners.
- **Training and Technical Assistance:** following Judicial Council approval of rules and forms, training will begin.
- **Information Resources:** Posted CARE Act Fact Sheet; launched Adult Mental Health site on Judicial Council website at <https://www.courts.ca.gov/48654.htm>
- **Data Collection and Reporting:** In coordination with DHCS and cohort 1 courts, developing court data reporting design and implementation.

Community Assistance, Recovery, and Empowerment (CARE) Act

Ivan Bhardwaj

Chief, Medi-Cal Behavioral Health – Policy Division

Department of Health Care Services

DHCS' Role and Responsibilities

- » DHCS is a department within the California Health and Human Services Agency (CalHHS) that finances and administers a number of individual health care service delivery programs, including Medi-Cal.
 - Technical assistance to support CARE Act implementation (Welfare and Institutions Code (W&I Code) 5980 & 5983)
 - Consultation to support CARE Act implementation (W&I Code 5983)
 - Annual report (W&I Code 5985)
 - Independent evaluation (W&I Code 5986)
 - Administer startup funds, accountability fund, and ongoing mandated costs (W&I Code 5970.5, 5979, 5977, 5977.1, 5977.2 & 5977.3)
 - Issue guidance for delayed implementation (W&I Code 5970.5)

DHCS' TTA Contractor: Health Management Associates (HMA)

- » Project management support to DHCS
- » Training and Technical Assistance (TTA) coordination, development, provision, and iteration
 - Internal subject matter experts (SMEs) with TTA expertise across behavioral health (BH), housing/community supports, legal, and communications
 - Partner with local SMEs in TTA design and delivery
- » Data collection & reporting
 - Develop and manage data collection and reporting process
 - Support county BH data collection efforts
 - Support development of annual report
 - Assist DHCS' independent evaluation contractor with data collection to determine program outcomes, impact, and lessons learned related to the CARE Act program

Coordination Efforts

CalHHS

- Lead Coordinator Between JCC and DHCS
- Engagement with Cross-Sector Partners
- Desert Vista - Working Group Coordination
- Desert Vista - Cohort I County Learning Community Coordination
- Monitor housing related needs throughout implementation

JCC

- TTA to Judges
- TTA to Counsel/Courts
- Probate and Mental Health Advisory Committee
- Support to Self-Help Centers
- TTA Data Collection and Reporting
- Office of the Center for Families, Children, & the Courts

DHCS

- Implementation of BH Bridge Housing
- Administration on startup funds, accountability fund, & ongoing mandated costs
- Guidance on delayed implementation
- Independent Evaluator
- Annual Data Report

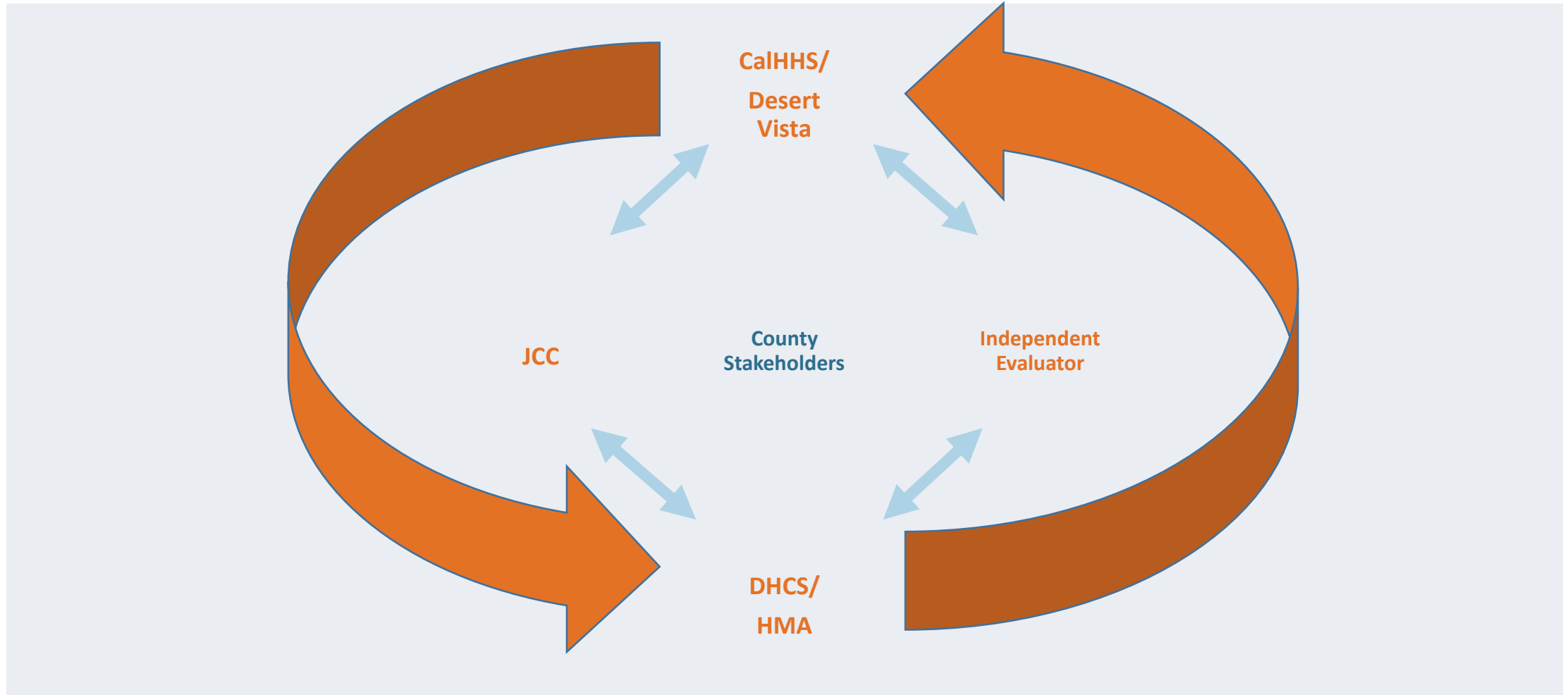
DHCS (HMA)

- TTA and Cross-Agency Collaboration to County BH Agencies
- TTA and Cross-Agency Collaboration to Counsel/Courts
- TTA to Volunteer Supporters
- TTA and Cross-Agency Collaboration to Other County Stakeholders (i.e., Housing)
- TTA and Cross-Agency Collaboration on Data Collection Process & Reporting
- Communications Support (website, inbox, stakeholder feedback)

Counties

- Startup Funding to support CARE Act implementation
- Participation in TTA
- Participation in Learning Community
- Data Collection and Submission

TTA & Data Collection Collaboration Across Entities



TTA Target Groups

» **County BH agencies (W&I Code 5983)**

- Including their providers and consultants
- Customized to rural and urban counties and potentially other cohorts, as needed

» **Volunteer supporters (W&I Code 5980)**

- In consultation with disability rights groups, county BH and aging agencies, individuals with lived expertise, families, racial justice experts, and other appropriate stakeholders

» **Counsel (W&I Code 5983)**

- In consultation with relevant state departments and the California Interagency Council on Homelessness (Cal ICH)

2023 TTA Timeline

- » Workplan Development
 - TTA plan/content
 - Initial stakeholder outreach

- » TTA on data collection & reporting with county BH agencies
- » TTA & stakeholder engagement with volunteer supporters

- » Cohort 1 Counties begin implementation

Q2/3/4 2023

Apr – Dec

Fall 2023

Q1 2023

Jan – Mar

Q3/4 2023

Jul – Dec

Q4 2023

Oct – Dec

- » Initial TTA on CARE Act, CARE Plan, housing, evidence-based (EB) topics/interventions, data, continuous quality improvement (CQI)
 - County BH agencies/providers, counsel, JCC
- » Stakeholder engagement to assess unique needs faced by rural counties
- » TTA on annual data collection of trial data with JCC

- » TTA in coordination with DHCS initiatives
 - County BH agencies/providers, JCC, counsel, volunteer supporters
- » Launch resource center/webpage

2023 Priority Topics and Timing

Category	Topics
April – Jun 2023	
1	CARE Statute; the CARE Process
1	CARE Plan/Agreement services & supports
2	Serious Mental Illness & Evidence-Based Care
3	Housing resources, strategies, best practices; overview & coordination with BHBH
5	Data Collection & Reporting
2	The Assertive Community Treatment approach within the CARE Act
2	Treatment for individuals with co-occurring SUD

Category	Topics
Jul – Sept 2023	
1	The Supporter Role and Supported Decisionmaking (SDM)
3	Accessing Local Community Supports
2	Family and Supporter Psychoeducation
4	Trauma-Informed Care (TIC)
4	Elimination of Bias
4	Diversity, Equity and Inclusion
4	Person and Family-Centered Care and Peer Support

**Suggested Topics from the CARE Act Working Group*

Category	Topics
Oct – Dec 2023	
5	Continuous Quality Improvement
1	Working with Justice-Involved CARE Act Participants
4	Psychiatric Advance Directives
4	Community-Defined Practices*
1	The Care Act Workflow/Logistics for Providers*

Key for TTA Categories

- 1.** CARE Act Process
- 2.** Serious Mental Illness & Evidence-based Care
- 3.** Housing/Community Supports
- 4.** Equitable/Person-Centered Care
- 5.** Data Collection & Reporting

TTA Formats



Synchronous virtual training



Asynchronous/recorded virtual training



Stakeholder meetings/TA (virtual/in-person)



Open-forum “webinars”



Website

Resource library

Stakeholder feedback form

Written materials

Public facing material

Frequently asked questions



Other modalities to be identified by DHCS and HMA

Customized TTA & Resources



Partnering with local SMEs by topic



Rural and community specific technical assistance



Stakeholder and county specific training



Ad-hoc stakeholder engagement



Webinars – a forum for emerging topics, strategizing & problem-solving



Trainings – Refine content in response to feedback, current needs & specific audience

CARE Act Policy Guidance

- » **BHIN 22-059 General Uses of the CARE Act Startup Funding**: Notifies counties of the purposes of the startup funds distributed in support of the implementation of the CARE Act
- » **BHIN 23-XXX: CARE Act Guidelines to Delay Implementation**: Notifies counties of the guidelines under which they may apply for, and be provided, additional time to implement the CARE process.



**STAY
INFORMED
ON
UPCOMING
TTA!**

To receive notification of trainings, technical assistance and other stakeholder engagement opportunities, please subscribe to the [CARE Act Communications List](#).

Thank you!

For more information contact DHCS at DHCS CARE Act@dhcs.ca.gov

