



## California Health and Human Services Agency Community Assistance, Recovery & Empowerment (CARE) Act Services & Supports Subgroup Meeting Minutes

July 18, 2024 | Virtual Meeting

Meeting Materials and Recording Available on [Working Group Site](#)

Public Zoom chat from meeting is included as an Appendix to this file

For additional information and resources, please see the following sites:

- [CARE Act Resource Center \(managed by HMA for DHCS\)](#)
- [CalHHS CARE Act Site](#)
- [Judicial Council CARE Act Site](#)

### Group Members in Virtual Attendance

- **Jodi Nerell (Co-chair)**
- Al Rowlett
- Brock Kolby
- Carina Gustafsson
- Dawan Utecht
- Deb Roth
- Dr. Susan Partovi
- Jason Robison
- Kelli Weaver
- Kiran Sahota
- Lauren Rettagliata
- Zachary Coil

### 1. Welcome, Introductions, and Goals of This Group

**Karen Linkins, Principal, Desert Vista Consulting**, opened the meeting and introduced the rest of her team. She thanked the group members and members of the public in attendance and shared virtual meeting guidelines.

Karen Linkins recapped the rules and objectives of the group, including that meetings are subject to Bagley-Keene requirements and that all materials are posted online.

All group members in attendance introduced themselves, beginning with the group's co-chair, Jodi Nerell, and the group's special advisor, Dr. Katherine Warburton. Linkins said that the group's other co-chair, Tracie Riggs, would be unable to join.

## 2. Recap Previous Meeting

**Karen Linkins** provided an overview of the previous meeting of this subgroup, which was held in June. At the previous meeting, HMA provided an overview of their April housing training and Dr. Susan Partovi presented on her model of street medicine in Los Angeles County. All meeting materials, including the meeting recording and minutes, are available online.

Linkins outlined the agenda items for today's meeting.

## 3. Discussion of CARE Implementation and Q+A

### Discussion of Mental Health Treatment Beds and Housing Continuum

**Jodi Nerell** began a discussion on the mental health treatment beds and housing continuum, with the objective of establishing standardized definitions. She shared an informational document from CHCF which she said is a good summary of treatment bed types and reflects the changes in the continuum made in recent years.

Nerell pointed out that there has not been a substantial amount of recuperative care beds made available for behavioral health, which should be expanded for both mental health and SUD. She discussed additional areas where there are opportunities for more development.

Group members offered their thoughts:

- Lauren Rettagliata discussed treatment and housing options in Contra Costa County, noting unique and successful traits of their system.
- Dawan Utecht discussed how new many recent investments are. She also emphasized the ongoing lack of affordable housing, which makes using funding sources more difficult.
- Brock Kolby discussed Tuolumne County's recent experience with working to expand their continuum, highlighting successes and challenges.
- Jason Robison highlighted the strengths of peer-run housing, as well as the associated challenges and exciting opportunities created by BHSA.
- Nerell emphasized the need to build out the entire continuum so people are not stuck in the wrong level of care.
- Kiran Sahota said that staff shortages and capacity also negatively impact the ability to step people down to lower levels of care.
- Robison said that providers need to increase the connections they make to employment to help people step down. He also discussed the way that Medi-Cal billing requirements make it challenging to expand the peer workforce and move services into the community.
- Al Rowlett shared an example of a successful peer-run housing site operated by his organization.

### CARE Outreach Team Panel – LA County:

Jennifer Brya introduced a panel of the following representatives from LA County DMH:

- Nilsa Gallardo
- Linda Boyd
- Sarah Church-Williams
- Dwayne Clements
- Juan Mayorga
- Liroy Williams

Brya facilitated the panel discussion. The panelists shared information on LA's outreach team composition and approach:

- DMH outreach teams are made up of a variety of roles, including psychologists, SUD counselors, CHWs, and nurses.
- Dr. Church-Williams discussed the role of psychologists in the CARE process, focusing on clinical evaluation and court reporting requirements.
- Mayorga discussed his role in assessment, direct outreach, and crisis intervention.
- Clements, an SUD counselor, said that their team operates with a high level of collaboration and flexibility in their roles. He also discussed some challenges of connecting people with SUD treatment.
- Williams, a Sr. CHW, discussed how their team establishes rapport and other elements of his role. He said that most clients have a high level of fear around engaging in treatment and accessing other resources.
- Dr. Church-Williams emphasized that rapport building is a slow process with people who have refused treatment. She said having the right people in these roles is crucial.

Brya asked about how the team works to connect people to a variety of services that they have been disconnected from.

- Dr. Church-Williams said their CARE teams are court ordered to not give up on engaging people, which differentiates them from other treatment teams. She said that her team is providing an FSP level of care with even more engagement. The team can offer housing and SUD treatment right away, in addition to other services.
- Clements said that they also offer a high level of support to families and work to connect them to services as well.
- Mayorga and Dr. Church-Williams shared additional information and anecdotes related to how they support families and address the needs of the entire family system.
- Clements discussed how he builds rapport with SUD clients and how challenging it is to secure treatment beds.
- Dr. Church-Williams provided information on how they approach SUD in the context of eligibility determinations.

- Williams gave two examples of success stories.
- Boyd said that in addition to treatment team staff, DMH also has staff at the Self-Help Centers at the courts.

Panelists took questions from group members:

- Aaron Meyer asked about continuances from the court for longer engagement timelines. Dr. Church-Williams said that they almost always ask for a continuance in order to build rapport, but the Judges have only been granting a couple of continuances and then they will schedule initial hearings.
- Dr. Partovi said that the LA referral portal has been helpful for her as a provider. She also said that she does not believe that DMH should focus on if psychosis is substance-induced or not. Additionally, she advised that mental health treatment should generally be prioritized over placing someone in SUD treatment.
- Dr. Church-Williams agreed with Dr. Partovi's assessment.
- Robison asked what goals respondents are identifying and how DMH is centering their goals in the process. Williams, Clements, and Dr. Church-Williams provided information on their approaches, which is to let goals come up naturally over time and address them as they are raised. Dr. Church-Williams emphasized that centering respondents' goals is essential and many goals are related to employment and stability.
- Meyer asked if the team had experience linking people with the assisted living waiver program. Mayorga said that their team has not been doing this but are interested in learning how to utilize the benefit.

Linkins thanked the presenters.

#### **4. Call for Public Comment**

**Karen Linkins** shared instructions for how to make public comment and said that comments can also be submitted at any time via email. No comments were made.

#### **5. Meeting Wrap Up and Next Steps**

**Karen Linkins** shared a list of available online resources. She shared the dates of the next CARE Act Working Group meeting in August and the next meeting of this group in September. She also shared meeting information for the other ad hoc subgroups. She thanked everyone for attending and adjourned the meeting.

## Appendix I: Public Zoom Chat

From John Freeman - DVC to Everyone:

Information about this and other meetings is available on the CARE Act Working Group Site:  
<https://www.chhs.ca.gov/home/committees/care-act-working-group>

Email us at [CAREAct@chhs.ca.gov](mailto:CAREAct@chhs.ca.gov) to join the CARE listserv to receive updates and information on future stakeholder events.

From John Freeman - DVC to Everyone:

CHCF Document available here: <https://www.chcf.org/publication/behavioral-health-treatment-beds-housing-ca-explainer/#related-links-and-downloads>

From Lauren Rettagliata to Host and panelists:

SUD Oxford House Inc national known with long term housing web address [oxfordhouse.org](http://oxfordhouse.org)

From Lauren Rettagliata to Host and panelists:

<http://oxfordhouse.org>

From Kiran Sahota to Host and panelists:

That is a great point Dawan. When counties look at a remodel or build, it can take years.

From Lauren Rettagliata to Host and panelists:

challenge of making sure once housing is provided the participant continues to interact the treatment team and moving in quickly once interaction stops; immediate action to find people who leave housing provided

From Dawan Utecht to Host and panelists:

Some of the newer housing options do not require folks to be engaged in treatment in order to receive and/or maintain housing.

From Lauren Rettagliata to Host and panelists:

I am not suggesting that they be taken out of housing if they do not respond to treatment, but that should be a red flag that intensive intervention needs to happen.

From Lauren Rettagliata to Host and panelists:

Since LA County has 9.7 Million which is about 1/4 of CA population. How many CARE Teams does LA County have? Would not LA County need many more CARE Teams than all other counties.

From Nicole Cable to Host and panelists:

Is LA County providing the FSP/ACT level of services within the county or are they contracting with community based organizations?

From Nerell, Jodi to Host and panelists:

What are the caseload sizes for your team?

From Nilsa Gallardo to Host and panelists:

We have a team in each of our eight service areas

From Lauren Rettagliata to Host and panelists:  
Thanks for the number of teams so about 1 team per 1.2 M people.

From Nicole Cable to Host and panelists:  
How many petitions has LA County had since December?

From Nilsa Gallardo to Host and panelists:  
caseloads vary by service area depending on the make up of the teams. we are still in the process of fully staffing all service areas. some teams have caseloads of 10-12/15. Others have higher caseloads just because they are not fully staffed.

From Linda Boyd to Host and panelists:  
DMH is providing the services for CARE clients.

From Linda Boyd to Host and panelists:  
We have received about 189 petitions since December from the court

From John Freeman - DVC to Host and panelists:  
Panelists, we have changed the settings to allow your chats to be shared with all participants. So if you do use the chat, please be sure it is set to go to Everyone.

From John Freeman - DVC to Everyone:  
Linda Boyd notes "We will have BHBH Bridge Housing with CARE clients getting priority"

From Aaron Meyer to Everyone:  
What has LA DMH experience been with linking patients to a board and care through the DHCS assisted living waiver program?

From Aaron Meyer to Everyone:  
If the respondent meets the prima facie showing but engagement was not effective, does LA DMH dismiss the petition or schedule an initial appearance on the petition?

From Linda Boyd to Host and panelists:  
We ask the court for a continuance so that we can continue to try to engage. We often have several continuances for Initial Hearings for that very reason.

From Dawan Utecht to Everyone:  
There can definitely be variations across counties with how the courts deal with the petition and continuances.

From Brock Kolby, Tuolumne to Host and panelists:  
Susan Partovi makes some great points on individualized treatment which may not always be residential treatment, but some clients will fail housing programs or not be admitted due to substance use issues, because the housing is joint housing, and other residents are placed at risk of relapse due to the substance use behavior.

From Dawan Utecht to Everyone:  
unfortunately, especially outside of Care Act programs, we often get in a catch 22 with housing where housing won't accept a client until they have been through SUD treatment, but then SUD

won't accept them until they are stable with their mental health. Hard to get them accepted in many places.

From Laura Collins to Everyone:

HMA/DHCS does have some additional information we have pulled together re: the ALW that we would be happy to share

From John Freeman - DVC to Everyone:

Email us at [CAREAct@chhs.ca.gov](mailto:CAREAct@chhs.ca.gov) to join the CARE listserv to receive updates and information on future stakeholder events.

From John Freeman - DVC to Everyone:

For reference, here are a few sites to keep in mind for additional information:

Training and Technical Assistance and other resources are available on the CARE Act Resource Center <https://care-act.org/>

CARE Act Working Group Site: <https://www.chhs.ca.gov/home/committees/care-act-working-group>

Department of Health Care Services (DHCS) CARE Act Website:

<https://www.dhcs.ca.gov/Pages/CARE-ACT.aspx>

Judicial Council of California (JC) CARE Act Website (court forms and more):

<https://www.courts.ca.gov/48654.htm>

CalHHS CARE Act website: <https://www.chhs.ca.gov/care-act/>

Links to County and Court CARE sites: <https://care-act.org/library/county-website-directory/>

From John Freeman - DVC to Everyone:

Information for Petitioners Site: <https://www.chhs.ca.gov/care-act-petitioners/>

1-Page Information Flyer for Petitioners: [https://www.chhs.ca.gov/wp-content/uploads/2023/09/CAREActResourcesForPetitioners\\_R3.pdf](https://www.chhs.ca.gov/wp-content/uploads/2023/09/CAREActResourcesForPetitioners_R3.pdf)

How to File the CARE 100 Infographic for petitioners:

<https://www.courts.ca.gov/documents/How-to-File-CARE-100-083123.pdf>