

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

September 19, 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)
- <u>CalHHS CARE Act Site</u>
- Judicial Council CARE Act Site

Group Members in Virtual Attendance

- Jodi Nerell (Co-chair)
- Aaron Meyer
- Al Rowlett
- Brock Kolby
- Dr. Cameron Quanbeck
- Dr. Katherine Warburton
- Dr. Susan Partovi
- Jason Robison
- Nicole Cable
- Kiran Sahota

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 July. At the previous meeting, members had a robust discussion about the housing options available for CARE participants and heard from a panel of representatives from a Los Angeles CARE outreach team who shared their approach and strategies for engaging CARE respondents. All meeting materials, including the meeting recording and minutes, are available online.

3. Discussion of CARE Implementation and Q+A

San Diego Graduation Video

Linkins informed the group that San Diego recently celebrated their first CARE graduation and released a video highlighting the success of the process. Linkins shared the video with the group. After the video, Linkins provided a few more details on the particular case, noting that the graduate had begun the CARE process as a step down from conservatorship and is now reunited with her family.

Group members offered reflections on the video:

- Jason Robison asked if the CARE graduate is still conserved and how her experience and current outcomes aligns with her personal goals. Linkins clarified that when the graduate began the CARE process, her conservatorship ended.
- Jodi Nerell said that the message in the video is the one that needs to be highlighted in all media stories. Linkins agreed that the video is effective in shifting the narrative and emphasizing how CARE can empower the county.
- Brock Kolby said he is curious if the CARE process could effectively be used for LPS step downs in Tuolumne County, noting that it is an exciting possibility. Linkins added that the LPS to CARE pathway is one example of how CARE can be used as a tool in the broader system of care.

Judicial Council Updates:

Linkins introduced Audrey Fancy, Charlene Depner, and Cassandra McTaggart from the Judicial Council to share updates on training and technical assistance for courts:

- Depner provided an overview of the Judicial Council's role in CARE implementation, which includes interagency communication, coordinated planning at state and local levels, and providing assistance to courts in local CARE implementation.
- Depner emphasized the unique challenge and opportunity that CARE presents for state and local agencies who are not familiar with each other's work to learn how to collaborate effectively.
- Judicial Council is responsible for the development of statewide legal rules and forms, which they are continuing to work on improving in response to feedback.
- Judicial Council works with the State Bar to provide funding for legal representation to Public Defenders and legal aid organizations.

- Depner shared a list of trainings developed by the Judicial Council to support local courts, including process guidance and best practices for working with the CARE population. McTaggart added that Judicial Council regularly collaborates with Health Management Associates on training development.
- In addition to trainings, Judicial Council has developed several resources for courts, such as an implementation toolkit and process flowcharts.
- Judicial Council provides ongoing technical assistance to local courts in the form of monthly office hours and Cohort 2 outreach and planning meetings.
- McTaggart provided an overview of the resources available on the Judicial Council CARE website.
- Fancy outlined the role of Self-Help Centers in CARE. Self-Help Centers are available in all 58 counties and cannot provide legal advice but can provide legal information and help with petitioning to non-represented petitioners.
- Fancy shared a flowchart illustrating the CARE process, which is available online. She walked members through major components of the court process.
- All CARE Act forms are available at courts.ca.gov. Judicial Council will be modifying forms as needed in accordance with SB 42 and SB 1400. Fancy said that all forms are designed to be as user friendly as possible, though must adhere to statutory language. Key forms have been translated into several languages and informational forms are also available that provide guidance on the petitioning and court process.
- The Judicial Council facilitates trial court data collection (monthly submissions from courts, quarterly submissions from State Bar) and analyzes and reports data quarterly to DHCS.
- Court data is aggregated and includes numbers of petitions submitted, initial appearances and hearings held, CARE agreements and plans, and petitions dismissed. This data is reported manually.

Presenters took questions from group members:

- Dr. Aaron Meyer said he is concerned by the challenges with e-filing in most counties and said these challenges will negatively impact the end user experience. Fancy said Judicial Council is working on addressing this issue, though there is to way to standardize it across the state.
- Dr. Susan Partovi echoed Dr. Meyer's concern about e-filing and described specific challenges she has observed with petitioning in Los Angeles. She also expressed that the petition forms are quite repetitive and she has suggestions for how they could be made more user friendly.
- Al Rowlett asked if there is a feedback mechanism that exists for Judicial Council to collect and integrate feedback from end users. Fancy said they are always open to feedback and currently collecting feedback from Cohort 1.

- Depner added that the document assembly help available through Self-Help Centers is intended to simplify the process for family members.
- McTaggart encouraged members to email the Judicial Council with feedback. She emphasized their desire to make the process easier for users.
- Members expressed interest in compiling feedback as a group.

Linkins thanked the presenters.

System Pathways for Petitions:

Linkins said that most petitions around the state have been filed by family members and current TTA efforts are focused on helping system partners understand the petition process and value of CARE. She shared a slide with a list of essential pathways, focusing especially on behavioral health providers, hospitals, LPS diversions and step downs, Jail Mental Health, and MIST and FIST diversions. Trainings are currently being developed for each of these groups and outreach is happening to counties to ensure they are actively thinking about how to work with these system partners.

Linkins invited comments from group members:

- Dr. Partovi said that the system is not straightforward and responsive to petitioners, which can be discouraging. She asked what the role of this group is and said she wants the group to play a more active part in improving the seamlessness of the process. Linkins said that there is fragmentation of information in the field and it would be appropriate for this group to work on generating solutions to these issues, which HMA can also integrate into their TTA.
- Dr. Partovi discussed an example of a case she is familiar with in LA, in which the respondent is not getting adequate care from the county.
- Kiran Sahota said she has heard from multiple counties around the state that there are high levels of confusion due to the number of mental health court programs available, which not all partners understand the distinctions between. She suggested a flowchart or similar tool be developed so potential petitioners can determine which path would be most appropriate. She also shared additional barriers that she has heard from counties. She suggested that CARE TTA could be integrated into CIT trainings and collaborative meetings focused on high utilizers.

Sutter Hospital Petition Pilot:

Co-chair Jodi Nerell updated the group on a pilot that Sutter is launching at an Alameda County facility:

- The Sutter pilot idea originated from Nerell's feeling that Emergency Departments would be unlikely to file petitions, but there may be other places in the hospital system where workflows could be established with more ease, particularly Sutter's inpatient facilities.
- The pilot will be starting at Alta Bates Herrick in Alameda County, which accepts patients from all over the state.

- Nerell's team created workflows for Herrick staff that are driven by social workers identifying potentially eligible patients and sharing information with them about CARE, with support from the psych legal team who will manage the actual petitioning.
- Nerell emphasized that while the petition seems onerous, it is possible to fill it out in just a few minutes once you understand what the essential elements are.
- Sutter administration will collect process and outcomes data to share with DHCS.
- Since not all counties are live, they will begin with filing petitions in San Francisco and prepare to scale up for the December launch.
- Nerell said that bringing in more providers into planning discussions will be essential for engaging the essential system partners in petitioning.

Linkins invited questions and comments from the group:

• Nicole Cable said that she would like to partner with Nerell once Sacramento launches.

HMA Updates:

Laura Collins from HMA provided updates on their recent and upcoming TTA activities:

- The 2024 TTA plan focuses on CARE in practice and has been informed by a broad range of stakeholders, including the petitioner categories identified as priority audiences for trainings.
- TTA priorities that counties have expressed include implementation resources, billing, data collection, and the petition process, among other priority areas.
- HMA's current focus for TTA development is on providing practical guidance to the array of eligible petitioners, beginning with a three part video series on petitioning for system partners.
- HMA will be re-launching office hours, beginning by focusing on the petitioning process.
- Upcoming trainings, resources, and TA for counties include a health plan billing guide, an implementation readiness panel, and a rural county affinity group call.

Deborah Rose from HMA shared updates on the Data Dictionary and data collection:

- Updates to the data dictionary have been proposed, though have not yet been finalized and released. Changes are focused on updating the data elements to reflect learnings from the first year of implementation.
- HMA provides ongoing technical assistance on data collection and reporting for all 58 counties.
- HMA has 12 liaisons assigned across the 58 counties, who provide support and guidance to counties on data and other implementation needs.

Rose shared recent updates that have been made to the CARE Act Resource Center website.

Linkins thanked Rose and Collins and said it would be valuable to hear more about the liaison model at a future meeting.

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 November and the next meeting of this group in October. 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 to join the CARE listserv to receive updates and information on future stakeholder events.

From John Freeman - DVC to Everyone: Judicial Council of California (JC) CARE Act Website (court forms and more): <u>https://www.courts.ca.gov/48654.htm</u>

From John Freeman - DVC to Everyone: Court Self-Help Centers can be found at: <u>https://selfhelp.courts.ca.gov/care-act</u>

From John Freeman - DVC to Everyone: JC email for CARE is <u>care.act@jud.ca.gov</u>

From John Freeman - DVC to Everyone:

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

From John Freeman - DVC to Everyone: Petitioner page: <u>https://care-act.org/library/petitioners/</u>

From John Freeman - DVC to Everyone:

Links to County and Court CARE sites: https://care-act.org/library/county-websitedirectory/