



**California Health and Human Services Agency  
Community Assistance, Recovery & Empowerment (CARE) Act  
Training, Technical Assistance & Communications Subgroup Meeting  
Minutes**

**September 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:**

- Amber Irvine
- Cassandra Vigardt (standing in for Stacey Robbins-Podvin)
- Mike Phillips
- Nicole Cable
- Susan Holt

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

**Karen Linkins, Principal, Desert Vista Consulting**, opened the meeting, 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. She shared that the purpose of this subgroup, which supports the efforts of the Working Group, is to review, assess, and provide feedback on training and communication material and strategies. Their goal is to provide recommendations to be applied at the local level that support uniform implementation.

All group members in attendance introduced themselves, beginning with the group's co-chair, Susan Holt. Co-chair Anthony Ruffin and the group's Special Advisor, Dr. Warburton, were unable to attend.

## **2. Recap Previous Meeting**

Linkins provided an overview of the last meeting of this group, which was held in July. July's meeting consisted of a presentation from Health Management Associates on their recent outreach and engagement training. Following the presentation, members had a robust discussion of recent media coverage of CARE and strategies to ensure accuracy.

Linkins laid out what would be discussed in today's meeting.

### **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.

Amber Irvine from San Diego BHS shared additional background on the video and the first CARE graduate. She also shared that there has now been a second graduation.

Linkins invited comments from group members:

- Co-chair Holt expressed appreciation for the sentiment captured in the video. She said that she is grateful for the work Cohort 1 has done to establish models for Cohort 2 as they prepare for implementation.
- Cassandra Vigardt said that the video gives her hope for what will be possible in Tuolumne County, even though they currently have a low petition volume. She shared that even though Tuolumne does not yet have any CARE agreements, they have been able to connect a number of people to services as a result of CARE petitions.
- Cassie McTaggart from the Judicial Council said that the video captures the heart of the successes that they are observing across counties.

#### **Judicial Council Updates:**

Linkins introduced Audrey Fancy, Charlene Depner, and Cassie 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. She said that courts were very eager to dive into the work of implementation despite the steep learning curve.
- 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.

Linkins thanked the presenters and invited group members to ask questions:

- Depner added that Self-Help Center services are free of charge. Linkins expressed how impressed she was by the Self-Help Centers on county site visits.
- Co-chair Holt said she appreciated how user friendly the Judicial Council website is.
- Irvine shared that many petitioners in San Diego have been helped through Self-Help Centers. She said that as a clinician, she appreciates the work Judicial Council has done to make their materials accessible and person-centered.
- Nicole Cable said that Behavioral Health in Sacramento is not fully clear on all the court components, so the Judicial Council presentation and resources, particularly about how to handle information sharing, are very helpful.

### **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 and ideas from group members:

- Irvine said that in San Diego, most petitions initially came from family members, and it took a lot of time and creativity to figure out how to engage other petitioner types. First responders are now their second largest petitioner group. The BHS team has been hands on in order to make the process less intimidating through methods such as texting petitioners right before they have to log on virtually for initial appearances so they do not have to come to the courthouse.

- Cable said that Sacramento is actively thinking about how to engage partners, including other behavioral health programs. They have an upcoming presentation to contract providers and are regularly sharing information about the petitioning and referral processes with various groups.

Linkins asked Cable if she is noticing any gaps in the available TTA.

- Cable said that specific trainings tailored to petitioner types such as Public Guardians/Public Conservators would be very helpful.
- Irvine said that in San Diego, CARE is under the same umbrella as the Public Conservator's office. The county established a clinical committee to assess which LPS cases would be appropriate to be stepped down to ensure that all clients are being treated at the most appropriate level of care.
- John Freeman of Desert Vista Consulting added that all outreach to respondents after a petition has been filed is billable under CARE, even when outreach workers are unable to make contact. He mentioned that this information should be shared with contracted providers.
- Mike Phillips said that SB 42 will allow the original petitioner to remain informed of the process after the initial appearance unless it would be detrimental to the respondent's progress. He said that this raises civil rights concerns, as it overrides people's privacy.
- Co-chair Holt said that she is doing similar stakeholder engagement as Cable discussed, which is also like the work they are doing to prepare for SB 43 implementation. Fresno is leveraging existing cross sector collaborations to share information. She asked for more information on the homeless service provider pathway on the slide that Linkins presented and shared concerns about homeless service providers not having sufficient behavioral health knowledge. Linkins said that homeless service providers are essential partners to engage and collaborate with but wouldn't necessarily be the ones filing.
- Irvine said that in San Diego, certain homeless service providers have made referrals to BHS.
- Vigardt said that families have been the primary petitioners in Tuolumne, but they are conducting outreach to some system partner types.

## **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. There are a variety of available forums for counties to request specific TTA.
- 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 to support the trainings.
- Upcoming trainings, resources, and TA for counties include a health plan billing guide, an implementation readiness panel, and a rural county affinity group call.

- HMA is partnering with system partners and counties on the development of all TTA, including Irvine.

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 invited questions and comments from group members:

- Co-chair Holt said she appreciates the liaison model and shared that her team loves their liaison.

Linkins revisited the earlier discussion about homeless service providers and clarified that they are an eligible petitioner type in statute.

- Co-chair Holt said that targeted trainings for this petitioner type would be beneficial, as there is a high level of variation in the roles and backgrounds of homeless service providers across the state.

## 4. Call for Public Comment

**Linkins** shared instructions for how to make public comment and said that comments can also be submitted at any time via email at [CAREAct@chhs.ca.gov](mailto:CAREAct@chhs.ca.gov).

No public comments were made.

## 5. Meeting Wrap Up and Next Steps

**Karen Linkins** reminded the group of the communication tools that have already been developed and are accessible online. She shared the date of the next CARE Act Working Group meeting and said that the next meeting of this group will take place in October. She also shared meeting information for the other ad hoc subgroups and encouraged members to attend. She thanked everyone for attending and adjourned the meeting.

## Appendix I: Public Zoom Chat

From John Freeman - DVC to Everyone:

Judicial Council site is available here with these resources for the community:

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

From John Freeman - DVC to Everyone:

Self-Help site is here: <https://selfhelp.courts.ca.gov/care-act>

From John Freeman - DVC to Everyone:

Email is [care.act@jud.ca.gov](mailto:care.act@jud.ca.gov)

From Mike Phillips to Host and panelists:

[https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill\\_id=202320240SB42](https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB42)

From John Freeman - DVC to Everyone:

For reference, the WIC element Susan is referencing is:

From John Freeman - DVC to Everyone:

(d) The director of a public or charitable organization, agency, or home, or their designee, who has, within the previous 30 days, provided or who is currently providing behavioral health services to the respondent or in whose institution the respondent resides.

From John Freeman - DVC to Everyone:

As well as: (f) A first responder, including a peace officer, firefighter, paramedic, emergency medical technician, mobile crisis response worker, or homeless outreach worker, who has had repeated interactions with the respondent in the form of multiple arrests, multiple detentions and transportation pursuant to Section 5150, multiple attempts to engage the respondent in voluntary treatment, or other repeated efforts to aid the respondent in obtaining professional assistance.

From John Freeman - DVC to Everyone:

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

From John Freeman - DVC to Everyone:

CARE Act Resources for Petitioners

<https://care-act.org/library/petitioners/>

From John Freeman - DVC to Everyone:

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

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:

For more information on the cohort 2 meetings, please contact us or reach out to [CAREAct@chhs.ca.gov](mailto:CAREAct@chhs.ca.gov)