



MISSION

By understanding the needs of consumers and families, Tri-City provides high quality, culturally competent behavioral health care treatment, prevention and education in the diverse cities of Pomona, Claremont, and La Verne.

TRI-CITY MENTAL HEALTH AUTHORITY MENTAL HEALTH COMMISSION AGENDA

NOVEMBER 8, 2022
3:30 p.m.

MEETING LOCATION

There will be no in-person public meeting location. On September 16, 2021, the Legislature amended the Brown Act provisions regarding teleconferencing through Assembly Bill No. 361, codified under Government Code § 54953. Accordingly, the Mental Health Commission will hold this public meeting via teleconference and the public seeking to observe and to address the Mental Health Commission may participate telephonically or otherwise electronically.

To join the Mental Health Commission meeting click on the following link:

<https://tricitymhs-org.zoom.us/j/89123029184?pwd=NzJvbVBYREtEdUZSOXovc2pxSGFSUT09>

Passcode: xm.T07sV

Or Telephone: 1-213-338-8477

Webinar ID: 891 2302 9184

Passcode: 77232230

Posting of Agenda. The Agenda is posted 72 hours prior to each meeting at the following Tri-City locations: Clinical Facility, 2008 N. Garey Avenue in Pomona; Wellness Center, 1403 N. Garey Avenue in Pomona; Royalty Offices, 1900 Royalty Drive #180/280 in Pomona; MHSA Office, 2001 N. Garey Avenue in Pomona; and on the Tri-City's website: <http://www.tricitymhs.org>

*Public Participation. Section 54954.3 of the Brown Act provides an opportunity for members of the public to address the Mental Health Commission on any item of interest to the public, before or during the consideration of the item, that is within the subject matter jurisdiction of the Mental Health Commission. **The public can make a comment during the meeting by using the 'raised hand' feature, or by calling in, if they wish to address a particular agenda item or to make a general comment on a matter within the subject matter jurisdiction of the Mental Health Commission. The Chair will call on the member of the public at the appropriate time and allow the person to provide live comment. The public can also submit a comment by writing an email to molmos@tricitymhs.org.** All email messages received by 1:30 p.m. will be shared with the Mental Health Commission before the meeting. If you wish to speak on a matter which is not on the agenda, you will be given the opportunity to do so at the Public Comment section. No action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments. Any disclosable public records related to an open session item on a regular meeting agenda and distributed by Tri-City Mental Health Authority to all or a majority of the Mental Health Commission less than 72 hours prior to this meeting are available for public inspection at <http://www.tricitymhs.org>*

CALL TO ORDER

Chair Henderson calls the meeting to Order.

ROLL CALL

Anne Henderson – *Chair*
Wray Ryback – *Vice-Chair*
Carolyn Cockrell – GB Liaison
Clarence D. Cernal

Isabella A. Chavez
Nichole Perry
Joan M. Reyes
Twila L. Stephens

Alfonso Villanueva
David J. Weldon
Toni L. Watson

REGULAR BUSINESS

I. APPROVAL TO IMPLEMENT TELECONFERENCING REQUIREMENTS DURING A PROCLAIMED STATE OF EMERGENCY UNDER AB 361 (GOVERNMENT CODE SECTION 54953)

Recommendation: “A motion to ask the Executive Director, or designee, to perform all actions necessary to implement the Brown Act provisions regarding teleconferencing in compliance with Government Code § 54953.”

II. APPROVAL OF MINUTES FROM THE OCTOBER 11, 2022 MENTAL HEALTH COMMISSION REGULAR MEETING

III. PRESENTATION- OVERVIEW OF TRI-CITY MENTAL HEALTH AUTHORITY’S COURAGEOUS MINDS SPEAKER BUREAU

IV. EXECUTIVE DIRECTOR MONTHLY REPORT

COMMISSION ITEMS AND REPORTS

Commissioners are encouraged to provide comments or ask questions about the community’s mental health needs, services, facilities and special problems. In addition, this is an opportunity to provide reports on their activities.

PUBLIC COMMENT

The Public may speak regarding any Tri-City related issue. No action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments.

ADJOURNMENT

The Mental Health Commission will meet next in a Regular Joint Meeting with the Governing Board to be held on **Wednesday, December 21, 2022 at 5:00 p.m.** via teleconference pursuant to Government Code §54953.

MICAELA P. OLMOS
JPA ADMINISTRATOR/CLERK



**Tri-City Mental Health Authority
AGENDA REPORT**

DATE: November 8, 2022

TO: Mental Health Commission of Tri-City Mental Health Authority

FROM: Rimmi Hundal, Executive Director

BY: Mica Olmos, JPA Administrator/Clerk

SUBJECT: Approval to Implement Teleconferencing Requirements during a Proclaimed State of Emergency Under AB 361 (Government Code Section 54953)

Summary:

On Tuesday, March 1, 2022, the California Department of Public Health (CDPH) relaxed the masking requirement for unvaccinated individuals; however, it did not lift the state of emergency. The following day, Cal-OSHA announced its intent to mirror CDPH's recommendations except in certain industries, such as healthcare settings. Per Cal-OSHA regulations, masking will continue to be required in healthcare settings until further notice. Accordingly, Tri-City Mental Health Authority must follow Cal-OSHA requirements.

Therefore, TCMHA will continue to hold virtual meetings per Assembly Bill No. 361 (AB 361) enacted on September 16, 2021, which amended the Brown Act by waiving certain provisions regarding teleconferencing; and effectively authorizing public agencies to hold its public meetings via teleconference under a proclaimed state of emergency which makes it unsafe to meet in person, provided that it allows the public, seeking to observe and to address the legislative body, to participate in real time telephonically or an internet-based service option during a virtual meeting; and the legislative body makes additional findings every 30 days in order to continue such teleconferencing pursuant to AB 361.

Background

The Ralph M. Brown Act requires that all meetings of a legislative or advisory body of a local agency be open and public and that any person may attend and participate in such meetings; and allows for legislative bodies to hold meetings by teleconference, but imposes the following requirements for doing so:

1. The public agency must give notice of each teleconference location from which a member will be participating in a public meeting.
2. Each teleconference location must be specifically identified in the meeting notice and agenda, including full address and room number.
3. Each teleconference location must be accessible to the public.

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4. Members of the public must be able to address the body at each teleconference location.

On March 17, 2020, Governor Newsom issued Executive Order No. N-29-20, suspending the Brown Act's teleconferencing requirements (enumerated above) in order to address the need for public meetings during the present public health emergency (COVID-19) and allow legislative and advisory bodies to meet virtually as long as certain notice and accessibility requirements were met; and on June 11, 2021, Governor Newsom issued Executive Order No. N-8-21 continuing the suspension of the Brown Act's teleconferencing requirements through September 30, 2021.

On September 16, 2021, the State Legislature amended the Brown Act through Assembly Bill No. 361 (AB 361), codified under Government Code § 54953, waiving certain provisions of the Brown Act in order to allow local agencies to continue to meet using teleconferencing without complying with the regular teleconferencing requirements of the Brown Act when a legislative or advisory body holds a meeting during a proclaimed state of emergency and it unsafe to meet in person.

In addition, Government Code section 54953 adds new procedures and clarifies the requirements for conducting remote (virtual) meetings, including the following:

- Public Comment Opportunities in Real Time – a legislative or advisory body that meets remotely pursuant to AB 361, must allow members of the public to access the meeting via a call-in option or an internet-based service option, and the agenda for the remote meeting must provide an opportunity for members of the public to directly address the body in real time. A legislative body cannot require public comments to be submitted in advance of the meeting.
- No Action During Disruptions – in the event of a disruption that prevents the local agency from broadcasting the remote meeting, or in the event of a disruption within the local agency's control that prevents members of the public from offering public comments using the call-in option or internet-based service option, AB 361 prohibits the legislative body from taking any further action on items appearing on the meeting agenda until public access is restored.
- Periodic Findings – Government Code § 54953(e)(B) requires the legislative body to hold a meeting during a proclaimed state of emergency for the purpose of determining, by majority vote, whether as a result of the emergency, meeting in person would present imminent risk to the health or safety of attendees.

The Commission must make these findings no later than 30 days after the first teleconferenced meeting is held after September 30, 2021, and must also make these findings every 30 days thereafter, in order to continue to allow teleconference accessibility for conducting public meetings (Government Code § 54953(e)(3).) AB 361 will sunset on January 1, 2024.

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Tri-City Mental Health Authority (TCMHA) has already implemented the above stated requirements for conducting public meetings and is in full compliance with AB 361, thus there will be no change of the currently established procedures. Teleconference accessibility is available via call-in option or through via RingCentral Webinars platform (internet-based service option) and both the telephone number and meeting link are listed on the published agenda for each meeting as well as on TCMHA's website.

The JPA Administrator/Clerk monitors public comment submitted via email correspondence (as published on the agenda); and designated staff monitors comment via teleconference throughout each public meeting and provides access for public comment opportunities in real time both verbally (via call-in or by using the 'raised hand' feature) and in writing (in the 'chat' and 'Q & A' options.)

Fiscal Impact:

None.

Recommendation:

Staff recommends that the Mental Health Commission (MHC) of Tri-City Mental Health Authority finds, determines, and declares by a majority of vote, the following:

1. That a state of emergency as a result of the threat of COVID-19 still exists and continues to impact the ability of members of the Mental Health Commission, Tri-City staff, and public to meet safely in person.
2. The State of California and the TCMHA continue to follow safety measures in response to COVID-19 as ordered or recommended by the Centers for Disease Control and Prevention (CDC), California Department of Public Health (DPH), California Occupational Safety and Health Administration (Cal/OSHA), and/or County of Los Angeles, as applicable, including facial coverings when required and social distancing.
3. That the MHC will make these findings every 30 days in order to continue such teleconferencing pursuant to AB 361.
4. That, pursuant to the findings listed in this Report, the Executive Director or her designee, continue to utilize teleconferencing accessibility to conduct MHC meetings and implement teleconference requirements in compliance with AB 361 (Stats. 2021, ch. 165) and Government Code § 54953 (as amended), effective immediately.

Attachments:

None.



MINUTES

REGULAR MEETING OF THE MENTAL HEALTH COMMISSION

OCTOBER 11, 2022 – 3:30 P.M.

The Mental Health Commission met in a Regular Meeting on Tuesday, October 11, 2022 at 3:34 p.m. via teleconference pursuant to Government Code § 54953, which allows the continuation to hold meetings without gathering in a room in an effort to minimize the spread and mitigate the effects of COVID-19 (Corona Virus Disease of 2019).

CALL TO ORDER Chair Henderson called the meeting to order at 3:34 p.m.

ROLL CALL Roll call was taken by JPA Administrator/Clerk Olmos.

PRESENT: Anne Henderson, Chair
Wray Ryback, Vice-Chair (joined the meeting at 3:42 p.m.)
Carolyn Cockrell, GB Member Liaison (joined the meeting at 3:41 p.m.)
Nichole Perry
Joan M. Reyes
Twila L. Stephens (joined the meeting at 3:41 p.m.)
Alfonso "Al" Villanueva
Toni L. Watson
David J. Weldon

ABSENT: Clarence D. Cernal
Isabella A. Chavez

STAFF: Rimmi Hundal, Executive Director
Liz Renteria, Chief Clinical Officer
Dana Barford, Director of MHSA & Ethnic Services
Gamaliel Polanco, Wellness Center Manager
Shawn Smith, Crisis/Medication Support Manager
Mica Olmos, JPA Administrator/Clerk

REGULAR BUSINESS

Item No. III was taken out of Order.

III. PRESENTATION

A. "RECOVERY MOMENTS" STORY

Gamaliel Polanco, Wellness Center Manager, stated that Tri-City has an internship program for Masters' of Social Work interns for the academic year beginning in September through May, noting that the interns get to experience community mental health work, and discussed their training; and announced that two former interns were in attendance to share their story about full time employment at Tri-City.

AGENDA ITEM NO. II

Stephanie Contreras, Clinical Therapist in the TCMHA Children's Outpatient Clinic, talked about her internship experience and her journey into mental health. She shared that she received her Masters' Degree of Social work from USC; that she has been providing mental health services to children; that she chose to pursue a degree in social work because she always had a desire to work in a profession specifically supporting underserved and stigmatized populations; that her internship experience was really wonderful and unique because of all the services that Tri-City has to offer; that Tri-City was her first exposure to the mental health field, noting that Tri-City put a lot of thought into the internship program, it was really structured and really well executed; that she received good exposure and hands-on experience to all the different types of settings that she could pursue with the social work degree, with therapy, and along with supervision, and just that she was really supported; that after her internship, she returned to Tri-City to work because of the support that was offered to her since she values the environment and the people that she surrounds herself with; and noted that it is amazing to be a part of an agency who really cares and wants to engage with the community and create all this change.

At 3:41 p.m. Commissioner Twila Stephens and Governing Board Liaison joined the meeting.

At 3:42 p.m. Vice-Chair Ryback joined the meeting.

Elizabeth Maciel, Clinical Therapist, in the TCMHA Children's Outpatient Clinic, shared that she received her Masters' Degree of Social work from USC; that she was one of those students who started her studies on campus and then finished the second half of her studies virtually because of the pandemic; that she wanted to work on breaking some of the intergenerational cycles about working families in the pursuit of higher education to have a better life; that she had a great internship experience and received a wealth of knowledge, noting that Tri-City has so many different departments which provided exposure to working with some of the Wellness Center groups and in the school based program, under great supervision, which she really valued because she never felt alone; that after her internship she decided to work for Tri-City because she was able to observe some of the therapists that had already been working Tri-City, and noticed that their clinical skills were very well polished and she was just inspired by the way they were providing services to the family and children which allowed her to see the transformation of how it really does change people's lives.

Executive Director Hundal thanked Clinical Therapists Maciel and Contreras for sharing their experience; and expressed that Tri-City is lucky to have them as interns and now part of our staff.

Chair Henderson thanked Clinical Therapists Maciel and Contreras for sharing their story.

B. OVERVIEW OF PSYCHIATRIC ASSESSMENT CARE TEAM (PACT) PROGRAM

Shawn Smith, Crisis/Medication Support Manager, stated that he has been working for Tri-City since 2006 and has had the honor of being the program manager for several different programs, including the Psychiatric Assessment Care Team (PACT). He then introduced the team, Dr. Kim, program supervisor for the Intensive Outreach and Engagement Team (IOET); Alexia Hamel, program supervisor for the Medication Support Team; Shana Acosta, program manager for the Medication Support team; and Dominique King, psychiatric technician, who has been with Tri-City for approximately six weeks, noting that there is currently an opening for a licensed therapist. He then talked about the PACT, noting that their hours are Monday - Friday, 8:30 a.m. - 6:00 p.m., with a dedicated office space in the Claremont Police Department and a dedicated vehicle, which helps the PACT conduct assessments and get out to the field in an expedient matter when called; that services are in line with the collaborations undertaken by LACDMH (Los Angeles County

Department of Mental Health) and other police agencies; and that Tri-City is on par with what is happening in the County, and perhaps throughout the rest of the State. He then shared his screen to show a power point presentation, and indicated that the purpose of the PACT is to efficiently respond to social and emotional mental health needs of Claremont residents and/or visitors, by using trained mental health professionals to take lead on non-violent, non-criminal calls that do not require law enforcement intervention, including in response to addressing persons who do not have a permanent residence; that the goal is to quickly facilitate entry into appropriate levels of care and services for persons they respond to in real time, and provide professional mental health support during regular Tri-City business hours, to the Claremont Police Department, noting that Tri-City offers a whole person system of care. He explained that the PACT also follows-up on persons placed on 5150 holds after hours or on weekends, to ensure no one falls through the system of care, and to coordinate with Claremont Police Department and facilitate access and increase likelihood of engagement to appropriate level of linkage support.

Commissioner Reyes inquired where persons are taken when they require a 5150 hold. Crisis/Medication Support Manager Smith replied that it would depend on the situation; for example, they might not even be able to write a 5950 hold if somebody has acute medical issues which required a 911 call, and in turn, they are taken directly to the nearest local medical facility.

Commissioner Villanueva inquired where staff was located in the Claremont Police Department. Crisis/Medication Support Manager Smith replied that Ms. King is located at CPD from 8:30 a.m. – 6:00 p.m., and that he, Dr. Kim, Ms. Hamel, and Ms. Acosta are located at the adult outpatient clinic.

Discussion ensued regarding the PACT referral process and follow-up services.

Commissioner Villanueva shared that the PACT have done a lot of good work in the Barrio Park; and complimented them on their good work with the homeless population in the City of Claremont.

Chair Henderson thanked Crisis/Medication Support Manager Smith for his presentation.

At 4:00 p.m. Governing Board Liaison Cockrell left the meeting.

I. APPROVAL TO IMPLEMENT TELECONFERENCING REQUIREMENTS DURING A PROCLAIMED STATE OF EMERGENCY UNDER AB 361 (GOVERNMENT CODE SECTION 54953)

There being no comment, Commissioner Watson moved, and Commissioner Reyes seconded, to ask the executive director, or designee, to perform all actions necessary to implement the Brown Act provisions regarding teleconferencing in compliance with Government Code § 54953. The motion was carried by the following vote: AYES: Commissioners Perry, Reyes, Stephens, Villanueva, Watson, and Weldon; Vice-Chair Ryback; and Chair Henderson. NOES: None. ABSTAIN: None. ABSENT: Commissioners Cernal and Chavez; and Board Member Liaison Cockrell.

II. APPROVAL OF MINUTES FROM THE SEPTEMBER 13, 2022 MENTAL HEALTH COMMISSION REGULAR MEETING

There being no comment, Commissioner Reyes moved, and Commissioner Stephens seconded, to approve the Minutes of the September 13, 2022 Regular Meeting of the Mental Health

Commission. The motion was carried by the following vote: AYES: Commissioners Perry, Reyes, Stephens, Villanueva, and Weldon; Vice-Chair Ryback; and Chair Henderson. NOES: None. ABSTAIN: Commissioner Watson. ABSENT: Commissioners Cernal and Chavez; and Board Member Liaison Cockrell.

IV. EXECUTIVE DIRECTOR MONTHLY REPORT

Executive Director Hundal announced that the first week of October is dedicated to Mental Illness Awareness Week, during which staff did a lot of social media postings and social media campaign; she also shared that staff is very excited to support peers on staff as they work on becoming certified as peer specialists through the Department of Health Care Services (DHCS) and a statewide organization called CalMHSA (California Mental Health Authority) who are taking the lead on the trainings and the exams for the peers to become certified, noting that this will allow them to bill MediCal for the work they do; that Tri-City is in the process of recruiting for the MHSA Projects Manager position, noting that in the interim Dana Barford is continuing to do the stakeholder process. She then reported that on Saturday, seven staff members attended the gala of the local Pride Center in Pomona, including the Tri-City Governing Board Chair and Vice-Chair, and had received an award for Organizational Impact, for demonstrating leadership and service while enhancing the wellbeing of our LGBTQIA+ community, and expressed being such an honor to receive this award, and that Supervisor Hilda Solis was in attendance to give Tri-City this award; and that Senator Connie Leyva had approached her to congratulate Tri City's leadership, which means the Commission and the Governing Board for the organizational impact that Tri-City is having in our communities.

Discussion ensued regarding the work that peers provide, such as their principal role to coach and mentor people by using their own lived experience; that the Peer Certification will allow Tri-City to bill for services that the Peers are providing, which up to date, they were not allowed to do regardless that the services were being provided; and that the work done by Peers is being recognized as a specialized work because it is provided by individuals that have lived experience or individuals that have a family member with lived experience, and the certification provides professional pathways in the workforce.

COMMISSION ITEMS AND REPORTS

Chair Henderson reported that she had received an email communication from CALBHBC (California Association of Local Behavioral Health Boards & Commissions) regarding trainings; and requested that staff forward the email to all Commissioners.

Commissioner Reyes inquired if Tri-City was collaborating with Bonita Unified School District (BUSD). Executive Director Hundal indicated that Tri-City works and collaborates with the three school districts in the three cities, not just BUSD, where Tri-City provides mental health services to its students, and also provides a lot of trainings for teachers, school staff, and parents.

Comments were shared regarding the dire situation that students are in because of lack of mental health services across the nation, not just in California, due to the behavioral health workforce shortage for several years now, long before the pandemic; however that the pandemic only intensified that shortage; and that everyone is doing their best to attract, retain, and support qualified staff to fill that gap during such a difficult period.

Commissioner Stephens announced that the City of Los Angeles is opening its Section 8 waitlist on October 17th through October 30th; and that Tri-City's Housing Department will have laptop stations and mobile hotspots set up at the Wellness Center and at the Adult Outpatient Clinic for a two-week period to help individuals apply, regardless if they are a Tri-City client or not.

Commissioner Watson announced that groups at the Wellness Center are being held hybrid, both in person and virtually, which it has been great to have the opportunity to participate from home when she has not been able to attend in person due to health issues; and expressed appreciation for the staff at the Wellness Center for holding hybrid group meetings.

Commissioner Villanueva announced that yesterday it was Indigenous Day, a Federal holiday; that during the last Commission AdHoc Committee, Dana Barford announced the new Native American liaison for Tri-City had been selected, and that he was looking forward to working with her; that on January 1, 2023, a new law will come into effect which will not allow the local police departments detain or question people who are soliciting prostitution, and is going to have a significant impact on the communities of color, especially here in Pomona and Claremont; and discussed strategies that he is working with the community to prevent prostitution. He then asked for prayers for his mother who recently had an accident.

Chair Henderson announced that there was an article in the newspaper about the implementation of care courts and requested that staff provide more information during the next Commission meeting about how this is going to affect Tri-City.

Chief Clinical Officer Renteria stated that Tri-City cannot exactly do work to divert people from prostitution; that Tri-City will certainly treat people that are involved in trauma from being trafficked, noting that prostitution is human trafficking, and give people supportive services to find other ways to be protected and take care of themselves; however, that Tri-City does not have a specific program where staff goes out to divert individuals from this situation.

Commissioner Villanueva thanked Chief Clinical Officer Renteria for her comment, noting that he is aware that Tri-City deals with this problem because prostitution for most is a mental health issue.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT

At 4:35 p.m., on consensus of the Mental Health Commission its Regular Meeting of October 11, 2022 was adjourned. The next Regular Meeting of the Mental Health Commission will be held on Tuesday, November 8, 2022 at 3:30 p.m. via teleconference pursuant to Government Code § 54953.



III. PRESENTATION - TCMHA COURAGEOUS MINDS SPEAKER BUREAU

Presenter: Brittany Nguyen, Community Capacity Organizer



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: November 8, 2022

TO: Mental Health Commission of Tri-City Mental Health Authority

FROM: Rimmi Hundal, Executive Director

SUBJECT: Executive Director's Monthly Report

GRAND OPENING OF GENOA PHARMACY

The grand opening of the Genoa Pharmacy took place on Tuesday, October 25th at noon at 2008 North Garey Ave. in Pomona at our Adult Clinic. The event was attended by the Tri-City Governing Board Chair – City of Claremont Mayor Jed Leano, Commissioner Joan Reyes and a representative from Supervisor Hilda Solis' office. The vision behind the pharmacy is to help improve client outcomes, increase access and adherence to prescribed drug therapy regimens, and create efficiencies in the healthcare delivery model.

CARE ACT

There are seven counties that are a part of the first cohort for the implementation of the Care Act are San Diego, Orange County, Riverside County, San Francisco County, Stanislaus County, Tuolumne County, Glenn County. The CARE Act creates a new pathway to deliver mental health and substance use disorder services to the most severely impaired Californians who too often suffer in homelessness or incarceration without treatment. The CARE Act moves care and support upstream, providing the most vulnerable Californians with access to critical behavioral health services, housing and support.

The CARE process is an upstream diversion to prevent more restrictive conservatorships or incarceration; this is based on evidence which demonstrates that many people can stabilize, begin healing, and exit homelessness in less restrictive, community-based care settings. With advances in treatment models, new longer-acting antipsychotic treatments, and the right clinical team and housing, participants who have historically suffered tremendously on the streets or during avoidable incarceration can be successfully stabilized and supported in the community.

CARE is not for everyone experiencing homelessness or mental illness; rather it focuses on people with schizophrenia spectrum or other psychotic disorders who meet specific criteria – before they get arrested and committed to a State Hospital or become so impaired that they end up in a Lanterman-Petris-Short (LPS) Mental Health Conservatorship. CARE may also be an appropriate next step after a short-term

involuntary hospital hold (either 72 hours/5150 or 14 days/5250) or for those who can be safely diverted from certain criminal proceedings.

Pathway



Referral

Family members, behavioral health providers and first responders with a history of engagement with the individual, or other parties specified in the CARE Act may refer an individual with untreated schizophrenia spectrum or other psychotic disorder who meets specific criteria in order to prevent institutionalization and ensure appropriate care.

Clinical Evaluation

After outreach by the county, if the individual is unable to voluntarily engage in services, the court reviews the petition for evidence as to whether the individual meets the CARE criteria, and appoints legal counsel and a voluntary supporter selected by the individual if desired. The court may also order a clinical evaluation to help determine the individual's eligibility for CARE. If the individual is determined to meet the CARE criteria, the court orders the development of a CARE plan.

Care Plan

An individualized CARE plan is developed by the county behavioral health agency, participant, participant's legal counsel, and supporter. The CARE plan may include behavioral health treatment, stabilization medication, and a housing plan. The court reviews and adopts the CARE plan with both the participant and county behavioral health as party to the court order for up to 12 months.

Support

County behavioral health agency begins treatment to support the recovery and stability of the participant, and the court will review and update the CARE plan and associated progress during regular status hearings. The court may approve the participant to remain in the CARE plan for up to one additional year.

Success

Successful completion and graduation by the Court. Participant remains eligible for ongoing treatment, supportive services, and housing in the community to support long term recovery. The participant may elect to execute a Psychiatric Advance Directive, allowing them to document their preferences for treatment in advance of potential future mental health crisis.