



**BOARD OF SUPERVISORS  
AGENDA LETTER**

**Clerk of the Board of Supervisors**  
105 E. Anapamu Street, Suite 407  
Santa Barbara, CA 93101  
(805) 568-2240

**Agenda Number:**

**Submitted on:**  
(COB Stamp)

**Department Name:** Behavioral Wellness &  
Treasurer-Tax Collector-  
Public Administrator

**Department No.:** 043 & 065

**Agenda Date:** June 10, 2025

**Placement:** Departmental Agenda

**Estimated Time:** N/A

**Continued Item:** No

**If Yes, date from:**

**Vote Required:** Majority

**TO:** Board of Supervisors

**FROM:** Department Directors: Antonette Navarro, LMFT, Director  
Department of Behavioral Wellness

Harry E. Hagen, Treasurer-Tax Collector-  
Public Administrator

Initial  
KL

DocuSigned by:  
Kimberly Tesoro  
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Contact Info: Katie Cohen, PsyD, LMFT, Assistant Director of Clinical Operations  
Department of Behavioral Wellness

Arlene Diaz, Public Services Division Chief  
Public Administrator/Public Guardian/ProPay/Veteran's Services

**SUBJECT:** Community Assistance Recovery and Empowerment (CARE) Act Update, and Senate  
Bill 43 Presentation and Notice to Implement on July 1, 2025

**County Counsel Concurrence**

As to form: Yes

**Other Concurrence:**

As to form: N/A

**Auditor-Controller Concurrence**

As to form: Yes

**Recommended Actions:**

That the Board of Supervisors:

- Receive and file an update on the Community Assistance Recovery and Empowerment (CARE) Court Act that established CARE Court in Santa Barbara County effective December 1, 2024;
- Receive and file notice that a presentation of the Update on the Deferred Implementation of Senate Bill 43 (SB 43) which modifies Welfare and Institutions Code Section 5008 by expanding the definition of "Gravely Disabled" is moved from January 1, 2026 to now be implemented on July 1, 2025;
- Adopt and authorize the Chair to execute the attached resolution amending the implementation start date of SB 43 to July 1, 2025 to supersede Resolution 23-290 adopted and authorized by the Board of Supervisors on December 12, 2023; and
- Determine that the above-recommended actions are not a project that is subject to environmental review under the California Environmental Quality Act (CEQA), pursuant to CEQA Guidelines section 15378(b)(5), finding that the actions consist of administrative

activities of government that will not result in direct or indirect physical changes in the environment.

**Summary Text:**

This item is before the Board of Supervisors to receive an update on the County's progress with CARE Act implementation, as well as an update on the deferred implementation of SB 43, and approval of a resolution to revise the SB 43 implementation date to July 1, 2025. Since the Fall of 2022, Behavioral Wellness and Public Guardian have worked together with involved County departments and community stakeholders to prepare, coordinate, plan, and implement both CARE Act and SB 43.

Senate Bill 1338, known as the CARE Court Act, provided a comprehensive and proactive approach to address the treatment and housing for individuals suffering from untreated schizophrenia spectrum and psychotic disorders in California. Santa Barbara County was a part of the Cohort II Counties implementation, which began December 1, 2024.

Senate Bill 43 (SB 43) expanded the definition of grave disability, which was scheduled to go into effect on January 1, 2024. The Board of Supervisors adopted a resolution to defer implementation of SB 43 (Resolution 23-290), delaying the implementation until January 1, 2026.

**Background:**

**CARE Act**

Senate Bill 1338, known as the Community Assistance Recovery and Empowerment (CARE) Act, was signed into legislation on September 14, 2022. The nation's first-of-its-kind legislation provided a framework for a new civil court system of referral and treatment for people diagnosed with schizophrenia or other psychotic disorder classification diagnoses. CARE allows family members, persons who share a household, clinicians, and first responders, among others, to refer persons suspected to be experiencing symptoms related to schizophrenia or some other psychotic disorder classification diagnosis to a civil court to petition for assistance in securing treatment services for them.

Criteria for CARE participation requires an individual:

- Must be at least 18 years old;
- Is not clinically stabilized in ongoing voluntary treatment;
- Is unlikely to survive safely in the community without supervision and the individual's condition is substantially deteriorating OR needs services and support in order to prevent a relapse or deterioration that would be likely to result in grave disability or serious harm to the person or others, as defined in Section 5150 of the Welfare and Institutions Code;
- Participate in a CARE plan or CARE agreement that provides the least restrictive alternative necessary to ensure the person's recovery and stability; and
- Is likely to benefit from participation in a CARE plan or CARE agreement.

A valid petition may result in either a voluntary CARE agreement or a court-ordered CARE agreement that will provide treatment services for a period up to two years. Services will be provided in the county behavioral health system through the Full Service Partnership (FSP) Program, and can include court-ordered, but not forced, medication.

As part of the CARE Act, the County must demonstrate the availability of a full range of housing options for access to CARE recipients to be located within the County. The legislation requires

counties to provide counsel to all persons referred to CARE Court if they do not have representation, which occurs through the Public Defender's Office; and that the civil CARE Court offer a "supporter" to each Respondent to facilitate decision-making, treatment engagement, and act as a liaison to both the behavioral health and court proceedings, to keep the Respondent on track with the CARE agreement/plan, which occurs through volunteer supporters at the County's Mental Wellness Center.

The entire treatment process will be overseen by the Court with regularly scheduled updates no less than every 60 days. If a person fails out of their CARE Plan, within 21 days there must be an evaluation for competency and/or need to proceed to court-ordered medication. However, under the CARE Act, medication cannot be forced. The law states that after one year, if the person is not successful, the court can only order up to one more year of outpatient care and support. Following a successful graduation at end of year one, or completion of two years of care, a person will be exited from the program. No automatic referral to the Public Guardian's Office for conservatorship will be made unless the evaluation done following noncompliance demonstrates that it should be done.

#### Senate Bill (SB) 43

The Lanterman-Petris-Short (LPS) Act (Welfare and Institutions Code section 5000, et seq.) provides for the evaluation, conservatorship, and treatment of a person who is gravely disabled, which is defined to mean a condition in which a person, as a result of a mental health disorder, is unable to provide for his or her basic personal needs for food, clothing, or shelter. SB 43, signed by the Governor of California on October 10, 2023, expanded the definition of grave disability effective January 1, 2024. Before this change, only people with serious mental health needs and chronic alcohol abuse could be conserved. Now, it has expanded to be inclusive for people with severe drug use. If a person is unable to take care of their basic needs because of their mental health condition or substance use disorder, then they are considered gravely disabled. The definition of these basic needs also changed under SB 43. Previously, someone was considered gravely disabled if they could not provide for their own basic needs for food, clothing, and shelter; that now also includes not being able to manage their own critical medical care and stay safe in their community.

The functional and financial responsibility for administering the LPS system falls solely to the counties. SB 43's expansion of the definition of grave disability required significant effort in building and expanding the treatment, workforce, delivery networks, housing capacity, and models for locked treatment settings, and models of care for involuntary substance use disorder (SUD) treatment to successfully meet the conservatorship needs of the population.

Behavioral Wellness (BWell) and the Public Guardian's Office have worked closely together with our county partner agency stakeholders (law enforcement and local hospitals) and have worked with County and State partners to discover, plan, and address the system impact that will occur as a result of SB 43. Impacts explored include additional staffing, physical space needs, expanded training related to the fortification of service capacity, additional treatment beds, and specialized treatment models.

While the majority of California counties received approval to delay the implementation of SB 43, two counties, San Luis Obispo (SLO) and San Francisco (SF) began implementation in January 2024. Eighteen (18) months into their implementation, these counties have shared data and valuable insights as to how the remaining counties, including Santa Barbara, can most efficiently and effectively implement the new legislation. The postponement of the SB 43 Implementation to originally January 1, 2026, allowed BWell and Public Guardian's Office to closely review this

information and integrate it into our Santa Barbara County implementation plan. This updated report to the Board of Supervisors details the preparation and our implementation plan to begin SB 43 on July 1, 2025.

### **Discussion**

BWell and Public Guardian are presenting updated information on both CARE Act and SB 43 for the Board of Supervisors and requesting the adoption of a resolution to amend Resolution 23-290 to begin implementation of SB 43 on July 1, 2025.

As indicated in Table 1.1 below, the majority of petitions to CARE Court since December 1, 2024, have been from the Public Guardian's office to step down individuals from conservatorship. This population is different than originally anticipated in initial planning efforts based on data reported by Cohort 1 Counties.

Measures of success will include the number of CARE agreements, and, ultimately, number of graduations from the program. To date, there have been four CARE agreements, and the multi-departmental implementation workgroup looks forward to planning the first graduation within this calendar year.

Alongside County departments, NAMI has been a consistent participant and partner in planning process. They have staffed office hours to support community members with petition process and have provided useful feedback for how County agencies can support family members most effectively through the CARE act process.

### **Performance Measure:**

**CARE has received a total of 17 petitions since the program's inception December 1, 2024 through May 1, 2025.**

**Table 1.1** **CARE Court Petition Originators**

Public Guardian	9
Family Member	7
Department of State Hospitals (DSH)	1
Total	17

**Table 1.2** **Petitioner Status**

Unknown	1
County Behavioral Health Agency	2
Family Member	7
Hospital	1
Public Guardian or Conservator	6
Total	17

**The Superior Court dismissed 5 CARE petitions during this period for the reasons outlined below.**

**Table 1.3** **Reason for Dismissal**

Met criteria for Assisted Outpatient Treatment	1
Unable to locate	1
Remained conserved	1
Petition withdrawn by family member	1
Impairment criteria not met (connected to FSP)	1
Total	5

**Table 1.4                      Respondent Demographics**

<b><u>Age</u></b>	
18-59	15
60+	2
Total	17

<b><u>Gender</u></b>	
Female	8
Male	9
Total	17

<b><u>Disability Status</u></b>	
None	6
Developmental	0
Hearing	1
Mental	8
Mobility	0
Speech	0
Visual	0
Other	0
Unknown	3
Total	18

<b><u>Housing Status</u></b>	
Institutional	4
Permanent	2
Unhoused	2
Unknown	9
Total	17

From April 2024 through November 2024, BWell facilitated 29 CARE Act information events with 23 County partner agencies.

The Mental Wellness Center and the Santa Barbara chapter of the National Alliance on Mental Illness (NAMI) offer phone and drop-in hours to assist with understanding the CARE Act process and completion of the petition. Support is available in both English and Spanish. To date, they have assisted in the completion of four petitions and fielded seven calls for general information about CARE Act.

**Fiscal Impacts:**

Budgeted: Yes

**Fiscal Analysis:**

BWell received a \$282,719 allocation from DHCS as part of the AB 179 appropriation to DHCS for county start-up and implementation of the CARE Act. To date, BWell has expended a total staffing cost of \$102,432 (\$19,398 in FY 2023-24, and \$83,034 in FY 2024-25), leaving approximately \$180,000, which is included in the FY 2025-26 recommended budget, to be expended as necessary to increase resources as the program continues to grow.

The Public Guardian hired three additional staff members this fiscal year in anticipation of the expanded workload due to the implementation of SB 43. The Board of Supervisors authorized the additional positions on October 8, 2024, effective December 1, 2024. The annualized ongoing cost funded by the General Fund is \$485,000.

For FY 2024-25, Public Defender (PD) received \$137,495.50. Through March 31, 2025, PD has expended \$26,974. PD anticipates another \$20,000 in expenditures through June 30, 2025. PD anticipates exhausting all implementation funding by December 31, 2025.

**Staffing Impacts:**

To meet the staffing needs for CARE Act implementation, BWell transferred one caseworker from another program and has temporarily reassigned a clinical psychologist to CARE. BWell is actively recruiting to hire the second caseworker to serve the West and North regions. The clinical psychologist position that was initially assigned to the CARE program has been difficult to fill and has been swapped for a practitioner position to expedite hiring and support for the program. BWell staffing and vacancy details are listed below in Table 1.5.

**Table 1.5 BWell CARE Staffing and Vacancies**

Position Title	Filled	Vacant	Total FTE
Practitioner II	0	1	1
Caseworker	1	1	2

Public Defender has utilized an existing attorney within the department, combined with State funding for CARE representation, to meet staffing needs for CARE. Public Defender case statistics are listed below in Table 1.6 and 1.7.

**Table 1.6 Public Defender CARE Workload through May 1, 2025**

New Cases	17
Closed Cases	2
Hearings Attended	23
Negotiations Attended	25

**Table 1.7 Public Defender CARE Staff Hours through May 1, 2025**

**(Inclusive of implementation efforts prior to court going live.)**

In Court	21
Total Hours	275

**Special Instructions:**

Please return one (1) Minute Order and executed resolution to M. Simon-Gersuk at [msimongersuk@sbcbswell.org](mailto:msimongersuk@sbcbswell.org); to Arlene Diaz at [akdiaz@countyofsb.org](mailto:akdiaz@countyofsb.org); and to BWell Contracts at [bwellcontractsstaff@sbcbswell.org](mailto:bwellcontractsstaff@sbcbswell.org).

**Attachments:**

**Attachment A** – CARE Act and SB 43 Presentation June 10, 2025

**Attachment B** – SB 43 Resolution

**Authored by:**

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