



CONTRA COSTA COUNTY

AGENDA

Behavioral Health Board

Wednesday, May 6, 2026

4:30 PM

1025 Escobar Street, Martinez |
<https://cchealth.zoom.us/j/99553669464> |

Call in: +1 646 518 9805

Meeting ID: 995 5366 9464

The public may attend this meeting in person at either above location. The public may also attend this meeting remotely via Zoom or call-in.

Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee

1. Roll Call and Introductions
2. Chair Announcements
3. Public comment on any item under the jurisdiction of the Board and not on this agenda (speakers may be limited to two minutes).
4. RECEIVE Presentation on the Community Assistance, Recovery and Empowerment (CARE) Act [26-1869](#)
Attachments: [BHB CARE Act 5.6.2026](#)
[BHB Forensics MH Services System Map CARE 5.6.26](#)
5. RECEIVE and APPROVE the Meeting Minutes from the March 4, 2026 Behavioral Health Board meeting, with any necessary corrections [26-1347](#)
Attachments: [BHB Meeting Minutes DRAFT 3.4.26](#)
6. RECEIVE Report from the March 2026 Nominating Committee

Adjourn

The next meeting is currently scheduled for June 3, 2026.

General Information

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For Additional Information Contact: Daniel Colin (Daniel.Colin@cchealth.org)



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-1869

Agenda Date: 5/6/2026

Agenda #: 4.

CONTRA COSTA
HEALTH



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Community Assistance, Recovery & Empowerment (CARE) Act

Elyse Perata, LMFT
Marie Scannell, PhD

May 6, 2026

Purpose of CARE

- ❖ To deliver co-occurring behavioral health and substance use services to the most severely ill and vulnerable individuals, while preserving self-determination to the greatest extent possible
- ❖ To help prevent recidivism and more restrictive levels of care or placement, such as conservatorship
- ❖ To meet individuals where they are physically and mentally, bring individualized services to them, and empower them to have an active role and voice in their treatment and goals

Source: California Health & Human Services Agency



- ❖ Welfare and Institutions Code (WIC) 5970-5987 (initially proposed under Senate Bill 1338, Senator Umberg)
- ❖ Contra Costa County Go-Live: December 1, 2024
- ❖ Civil Court Process, Voluntary

Involved entities include:

- Contra Costa Superior Court
- County Counsel
- Office of the Public Defender
- Behavioral Health Services (BHS)
- Enhanced Care Management
- Behavioral Health Bridge Housing
- Alcohol and Other Drug Services

Primary functions of Behavioral Health:

- Assessment, eligibility determination, and outreach and engagement
- Providing long-term behavioral health services and linkage to resources
- Coordinating amongst the System of Care for services deemed necessary by the Court
- Providing written updates to the Court
- Data Collection

❖ A petitioner could include:

- Family members: limited to a parent, spouse, sibling, child or grandparent
- A mental health professional or other service provider who is treating or has recently treated the client/respondent
- The director of a hospital in which the client/respondent was recently or is hospitalized
- The directors of public service agencies, such Behavioral Health (BH), Adult Protective Services (APS), Public Guardian or Public Conservator (PG/PC)
- A first responder who has had repeated contact with the respondent
- Homeless outreach worker
- A roommate/housemate
- The client/respondent

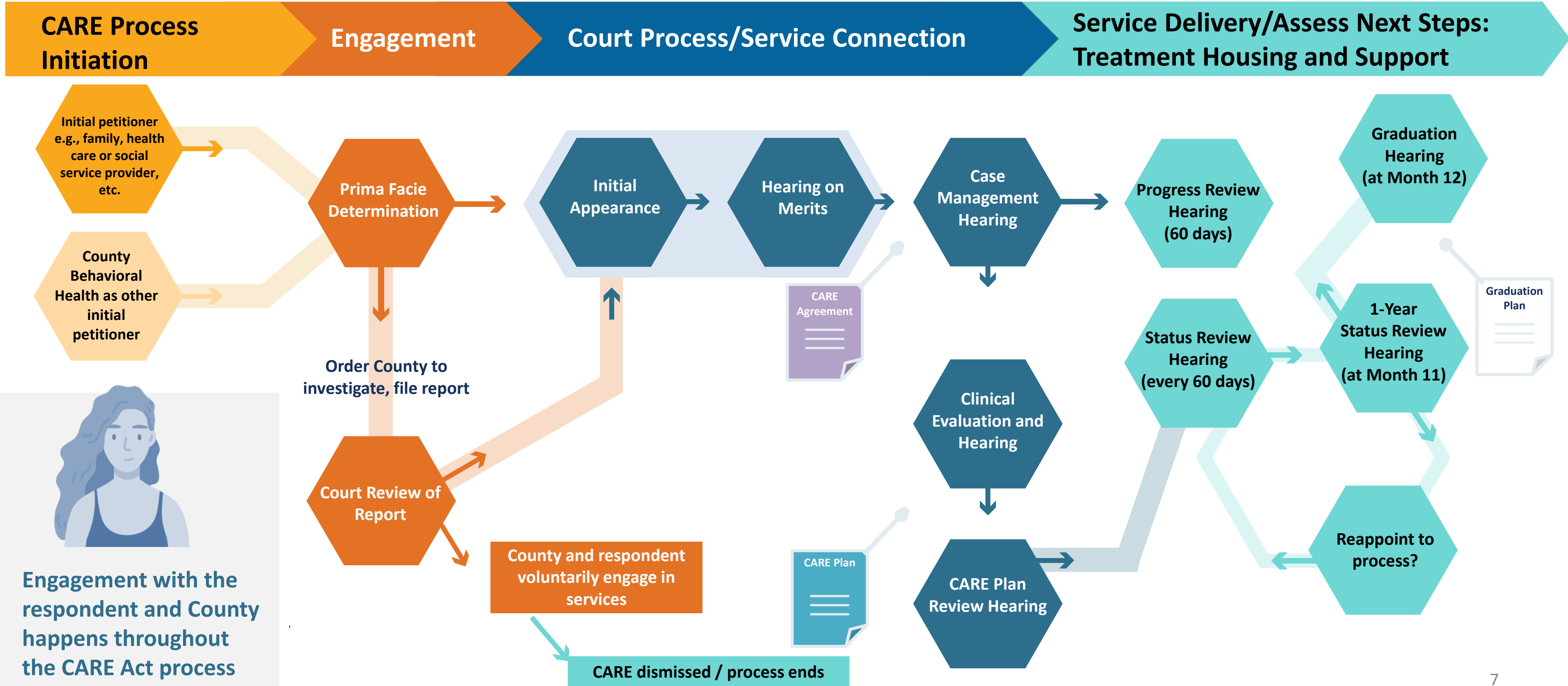


❖ Must meet all criteria:

- 18 years or older
- Currently experiencing a “serious mental disorder” as defined in WIC 5600.3(b)(2) and has a diagnosis in the disorder class: Schizophrenia Spectrum or Other Psychotic Disorders & Bipolar I with psychotic features, as defined in the most recent Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Not clinically stabilized in ongoing voluntary treatment
- At least one of the following is true:
 - The person is unlikely to survive safely in the community without supervision and their condition is substantially deteriorating
 - The person is in need of services and supports to prevent relapse or deterioration that is likely to result in harm to self and/or others or grave disability, as defined in WIC 5150
- CARE is the least restrictive placement necessary to ensure recovery and stability
- The person is likely to benefit from participation in a CARE Agreement or Plan

- ❖ Senate Bill 27 (SB 27) amends provisions of the CARE Act in a number of ways:
 - Adds Bipolar I Disorder with psychotic features as an eligible diagnosis
 - Defines “clinically stabilized in ongoing voluntary treatment”: stable condition and active participation
 - Provides a process by which certain court referrals can constitute a CARE petition without a separate petition form being filed
 - Allows criminal courts to consider CARE referrals earlier for individuals found incompetent to stand trial (IST) in misdemeanor cases
 - Allows nurse practitioners and physician assistants to complete an affidavit in support of a CARE petition
 - Makes other technical amendments to the CARE process

The Court Process



Behavioral Health Services Data

December 2024 to February 2026

❖ Petitions

Petitioner Category	Number of Petitions Filed
Family Member	39
Hospitals	34
Public Guardian	22
Department 10 (SB 27, Year 2026 only)	12
Self	7
BHS Provider	4
Department 20 (SB 27, Year 2026 only)	2
Licensed Provider	1
Total	121

❖ Dismissals

Dismissal Categories	Number of Dismissals
Unable to locate	16
Did not meet criteria	16
Higher level of care	7
Did not meet prima facie	2
Declined to participate	2
Engaged in voluntary services	2
Total	49

❖ Total IST Referrals

Referral Category	Number of Referrals
Unable to locate	25
Active	8
Did not meet criteria	6
Petitioned by BHS	3
Higher level of care	1
Total	43

❖ Total CARE Agreements: 19

- In process: 4

❖ Total CARE Plans: 0

❖ Individuals housed via Behavioral Health Bridge Housing: 18

❖ First graduation anticipated in April 2026

❖ Court Data: December 2024 to January 2026

Hearing Category	Number of Hearings
Initial Appearances	167
All other hearings	140
Total	307

- ❖ Contra Costa Superior Court Self-Help Center: contracosta.courts.ca.gov/self-help
- ❖ Contra Costa CARE Website: cchealth.org/services-and-programs/behavioral-health/care-act
- ❖ CalHHS CARE Website: chhs.ca.gov/care-act/
- ❖ DHCS CARE Website: dhcs.ca.gov/Pages/CARE-ACT.aspx

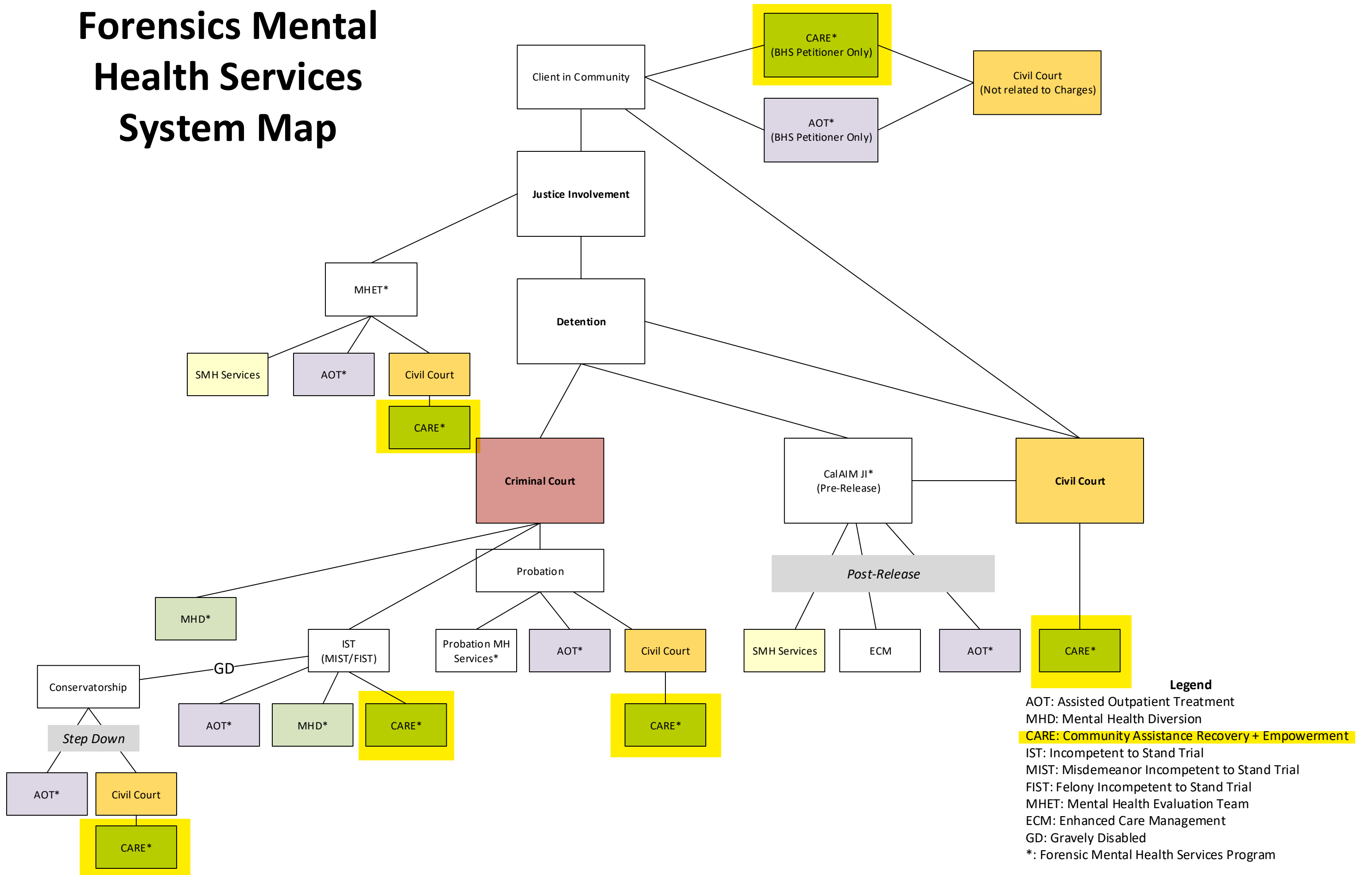
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Thank you!

Forensics Mental Health Services System Map





CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-1347

Agenda Date: 5/6/2026

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Meeting Minutes - Draft

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Agenda Items: Items may be taken out of order based on the business of the day and preference of the Board

1. Roll Call and Introductions

Chair Campbell called the meeting to order at 4:30 p.m.

Present	Anthony Arias, Y'Anad Burrell, Logan Campbell, Ken Carlson, Roland Fernandez, Laura Griffin, Candace Hendra, Avery Gould, Max Sala, Lacharonda Taylor, and Jenelle Towle
Absent	Candace Andersen, Anya Gupta, Rebecca Harper, Alexander Quintero, and Dhoryan Rizo

2. Public comment on any item under the jurisdiction of the Board and not on this agenda (speakers may be limited to two minutes).

There were seven requests for public comment.

3. RECEIVE Report from Behavioral Health Director, Suzanne Tavano, PhD

Dr. Tavano provided an update on Behavioral Health's facility projects funded through BHCIP and Proposition 1, including major awards for new facilities in Richmond, Pleasant Hill, Pittsburg, Antioch, and San Pablo. Key completion dates ranged from June 2027 for Richmond Mental Health Rehabilitation Center to June 2030 for the East County Recovery Center. Dr. Tavano noted that AB 339 had created contracting delays by requiring county labor review, up to 45 days, before contracts or Requests For Proposals could proceed. To prevent service disruption, the department planned to extend existing contracts through December while preparing for Prop 1-related system changes.

Attachments: BHB Director's Report BHCIP Projects 3.4.26

4. RECEIVE Presentation Overview on Recovery Residences

Speakers: Fatima Matal Sol, Alcohol and Other Drugs Services Program Chief, Tom Aswad, Support4Recovery

Fatima Matal Sol provided an overview presentation of recovery residences of Alcohol and Other Drugs Services including the definition of recovery residences, regulatory funding authority, regulatory requirements and clinical considerations. Data presented from Fiscal Year 2024/2025 indicated 352 clients served, 179 clients that gained employment, decrease in relapses and zero overdoses.

Tom Aswad, Co-Founder, CFO, and Board President of Support4Recovery, summarized the history of recovery housing efforts in Contra Costa County and Support4Recovery’s long-standing role in developing cost-effective, community-led sober living programs. He highlighted completion rates and cost savings of the current Measure X Level 3 sober living program, especially for Spanish-speaking participants. He emphasized the lack of comparable services for Spanish-speaking women and the importance of sustaining these programs. He stated that continuation of the program requires funding commitments and urged support for the program, citing its cost-effectiveness, demonstrated outcomes, and the need to maintain services for underserved populations.

- 5. RECEIVE and APPROVE the Meeting Minutes from the February 4, 2026 Behavioral Health Board meeting, with any necessary corrections

This was approved with revision to include record of action.

Motion: Carlson

Second: Hendra

Aye: Arias, Burrell, Campbell, Carlson, Fernandez, Griffin, Hendra, Gould, Sala, Taylor, and Towle

Absent: Andersen, Gupta, Harper, Quintero, and Rizo

Result: Passed

- 6. DISCUSS Appointment of Board Members to Ad Hoc Nominating Committee for Election of Executive Committee Membership

Campbell requested volunteers to establish the March 2026 Nominating Committee, which will begin planning the solicitation process for developing a nomination slate for the Chairperson roles of the proposed Community Awareness and Programs and Services Subcommittees. Once the Chairpersons for these subcommittees are elected, they will join the Behavioral Health Board Chairperson and Vice Chairperson to form the Executive Committee. The following Board members that volunteered to become part of the nominating committee include Campbell, Griffin, Hendra and Gould.

Adjourn

Meeting was adjourned by Campbell at 6:12 p.m.

The next meeting is currently scheduled for April 1, 2026.

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