

Building Behavioral Health Capacity & Workforce

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Behavioral Health in California

Stephanie Welch, MSW

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(CalHHS)

Person Centered. Equity Focused. Data Driven.

Agenda

- CalHHS Strategic Behavioral Health Priorities & Behavioral Health Landscape in California
- Key Areas of Interest
 - ✓ Status of CARE Act implementation
 - ✓ Crisis Care Continuum and AB 988
 - ✓ Infrastructure Projects

CalHHS Strategic Behavioral Health Priorities & Current Landscape

Behavioral Health Transformation Goals

CalHHS Strategic Priorities

Create an Equitable Pandemic Recovery

Build a Healthy California for All

Integrate Health and Human Services

Improve the Lives of the Most Vulnerable

Advance the Well-being of Children & Youth

Build an Age-Friendly State for All



Behavioral Health Continuum of Care

California's Behavioral Health Continuum of Care



BUILDING BLOCKS

Children & Youth BH Initiative \$4.7 Billion	BH Infrastructure Program \$2.2 Billion	BH Workforce Initiative \$1 Billion	BH Parity and Benefit Alignment
Medi-Cal Transformation \$10 Billion	BH Bridge Housing \$1.5 Billion	Older Adult BH Initiative \$50 Million	DSH BH Diversion \$600 Million

Community Assistance Empowerment and Recovery (CARE) Act (SB 1338)

Legislative Intent

- SB 1338 signed into law by Governor September 2022
- Eligible population = those with **untreated schizophrenia spectrum and psychotic disorders**
 - ✓ Estimated 7,000-12,000 in California
- CARE is intended to be a **new process**, that can be supported and served by **existing programs**
- Intended as a compassionate, **upstream diversion** to prevent more restrictive conservatorships or incarceration

Key State Agencies Involved in CARE

CalHHS

- Lead coordination efforts
- Engage with cross sector partners and stakeholders at city and county level, and associations
- Support DHCS training, technical assistance and evaluation efforts
- Implementation of Behavioral Health Bridge Housing program
- Support communications, respond to media, legislature, and other stakeholder inquiries, provide media

Key State Agencies Involved in CARE (cont.)

Department of Health Care Services (DHCS)

- Develop training & technical Assistance for counties, counsel and volunteer supporters, including contractor management and RFI
- Supporting data collection, reporting, and independent evaluation
- Administer implementation and start up funding

Key State Agencies Involved in CARE (cont.)

Judicial Council

- Interagency planning and communication
- Initial CARE Act Procedural Memo distributed to all courts
- Court Communication Hub: information sharing within and across courts; collaboration platform
- Meetings with court teams
- Statewide Court rules & forms (Probate and Mental Health Advisory Committee)
- Court data collection procedural plan
- Legal representation
- Budget administration
- Targeted court training and technical assistance needs; webinars
- Self-Help legal information, assistance, and tools for parties

Implementation Timeline

- **October 2023:** Cohort 1 counties
 - ✓ Glenn, Orange, Riverside, San Diego, Stanislaus, Tuolumne, and San Francisco
- **December 2023:** Los Angeles
- **December 2024:** Remaining 58 counties
 - ✓ Unless county granted additional time by DHCS

DHCS Updates and Upcoming Activities

- Finalized CARE Act Data Dictionary to support reporting
 - ✓ Guidance and Data Dictionary released in early October
- Stakeholder Engagement
 - ✓ DHCS and Training and Technical Assistance vendor Health Management Associates (HMA) collaborated with counties, counsel, associations, and a broad range of subject matter experts to inform trainings and develop technical assistance resources
 - ✓ HMA has partnered with Painted Brain to support trainings and resources related to the volunteer supporter role and psychiatric advance directives
- Finalizing contract with Independent Evaluation vendor

Training and Technical Assistance

DHCS will provide training and technical assistance to county behavioral health agencies, counsel and supporters

Judicial Council will provide training and technical assistance to Judges

Available and Upcoming Trainings Include:

- CARE process
- CARE eligibility in practice
- Petition filing
- Agreement and plan services and supports
- Symptoms and outcomes of schizophrenia spectrum disorders
- Supported decision-making and the supporter role
- Trauma-informed care and elimination of bias
- Psychiatric advance directives
- Family psychoeducation/family role
- Evidence-based models of care for people with severe behavioral health conditions
- Data collection

Judicial Council Updates

- **Budget:** Court allocation methodology approved by Judicial Council. Planning and Implementation funding distributed to all counties
- **Data Collection & Reporting:** Preparing for data collection and reporting; time reporting data required in FY 23 Budget Act. Meetings with Cohort 1/LA court data specialists to review data collection protocols and align measurement approaches
- **Readiness:** Cohort 1 courts bimonthly check ins; did trial run on data collection. Technical Assistance to court Self-Help Centers
- **Training completed:** CARE Act Rules and Forms – for Cohort 1/LA; Judicial Officers; Clerk Training, Overview Courses for Self-Help Center staff; CJER CARE ACT training at Cow County Judges Institute. Additional audiences and topics planned

Information Resources: [Judicial Council website](#) has checklists and supporting information for courts, as well as [CARE Act 101 Webinar: Overview of the Court's Role in Implementation](#)

- **Rules and Forms:** Available on [Adult Mental Health page](#) on Judicial Council public website
 - [CARE-050-INFO](#) (Information for Petitioners-About the CARE Act)
 - [CARE-060-INFO](#) (Information for Respondents-About the CARE Act)
 - [CARE-100](#) (Petition to Commence CARE Act Proceedings)
 - [How to File the CARE 100](#)
 - [CARE-101](#) (Mental Health Declaration-CARE Act Proceedings)
 - [CARE-113](#) (Notice of Respondent's Rights-CARE Act Proceeding)

Judicial Council Updates (cont.)

Information Resources: [Judicial Council website](#) has checklists and supporting information for courts, as well as [CARE Act 101 Webinar: Overview of the Court's Role in Implementation](#)

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CalHHS CARE Act Working Group

- CARE Act Working Group established **31 members** include representation from counties, providers, peers, families, Legal Aid, Disability Rights, Homelessness, hospitals, and other stakeholders
- Purpose: provide coordination, on-going engagement, and collaboration among stakeholders to support successful implementation of the CARE Act
- Meets quarterly
 - ✓ 2024 meetings: February, May, August, and November
 - ✓ See [CARE Act Working Group webpage](#) for additional information

Three Ad Hoc Sub-Groups of CARE Act Working Group Established

Workgroups:

1. Services and Supports
2. Training, Technical Assistance, and Communication
3. Data Collection, Reporting, and Evaluation

- Cross cutting perspectives include:
 - ✓ Peers, Families, Lived Experience
 - ✓ Racial Equity and Social Justice
 - ✓ Providers
- All sub-groups met in October
- Next meetings scheduled for Dec 2023 and Jan 2024

Cohort 1 Status Update

Cohort 1 counties and courts successfully launched on October 2nd.

Los Angeles county successfully implemented on December 1st.

Key Issues Being Tackled:

Workforce

- Most counties experiencing staffing shortages, particularly behavioral health

Housing/residential placements

- Limited availability of housing and residential facilities
- Behavioral Health Departments working to identify and develop new facilities

Communications

- Maintaining consistent state and local communication to manage community expectations

Data sharing

- Collecting data from multiple partners with separate data management systems

Engaging respondents

- Court continuances often needed to better engage respondents and encourage them to participate

Coordination of specific local relationships

Cohort 1 Status Update

- From October 2 to November 29:
126 petitions submitted
- Courts have begun determining whether petitions meet prima facie standards
 - ✓ 9 petitions dismissed for not meeting the standard
- CalHHS coordinating with local National Alliance on Mental Illness (NAMI) chapters to distribute information, including via [website](#) and newsletter



Father and daughter hope CARE Court treatment program will change their lives
kpbs.org

Story of Impact: Na'Kia Lavendar

"I feel that the CARE Court is going to give her that routine back and give her that hope that she may not have at this time," Timothee Lavendar, Father of Na'Kia who has experienced homelessness and untreated schizophrenia

Site Visits



California Health & Human Services Agency

3,909 followers

2w



On November 17, CalHHS and Judicial Council staff traveled to San Diego to discuss the ongoing rollout of the CARE Act with local implementation partners.

Staff also visited a housing site with supportive services to assist clients on a path to recovery & housing stability.



California Health & Human Services Agency

3,909 followers

3d



CalHHS visited Tuolumne County earlier this week to learn about how they are implementing the CARE Act.

Staff learned about their work to meet clients' holistic care needs & toured the county's first navigation center funded in part by CARE start-up resources.

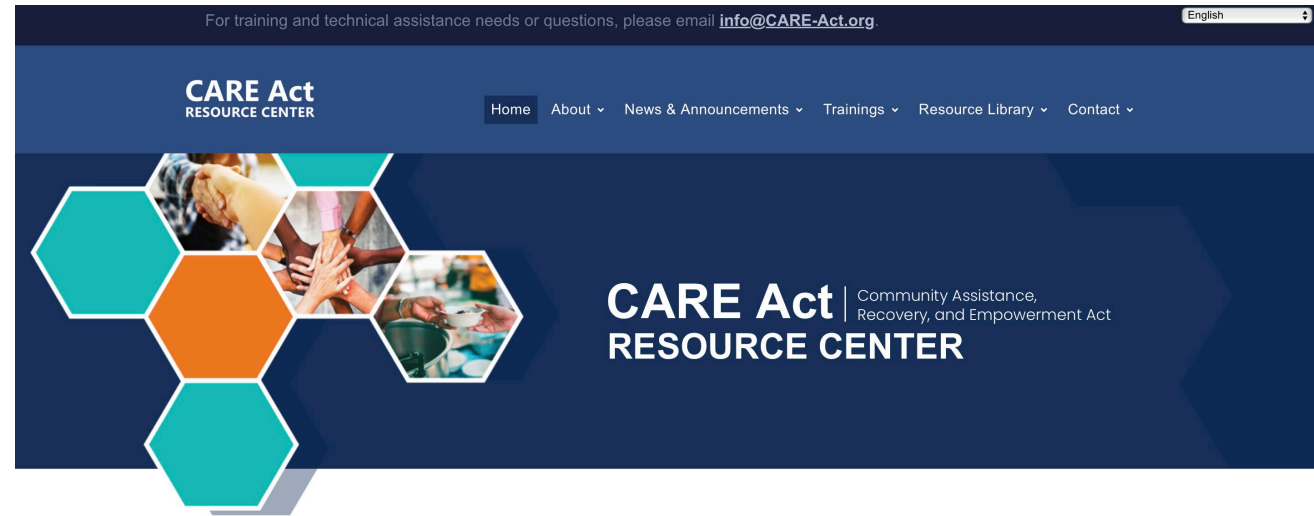


CARE Act Next Steps

- Monitor ongoing implementation, including annual reporting
- DHCS to finalize contract with Independent Evaluator
- Continued training and technical assistance for counties, courts, and other partners
 - ✓ **Recently Released:** Role Of The Family In The CARE Process & Intro To Family Psychoeducation
- Coordinate and support planning for Cohort 2 counties
- Continued Cohort 1 County convenings
- Continued CARE Act Working Group meetings

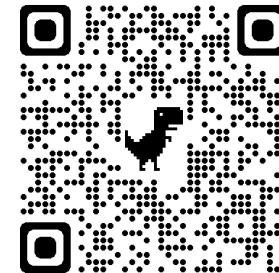
CARE Act Resource Center

- Training and Technical Assistance, including list of upcoming trainings
- Resource library
- Timeline with implementation milestones and progress
- FAQ
- Technical assistance request form
- Stakeholder feedback form
- Ability to join the listserv



CARE Act OVERVIEW

Through a new civil court process, the [CARE Act](#) provides community-based behavioral health services and supports to Californians living with untreated schizophrenia spectrum or other psychotic disorders.



Crisis Care Continuum Plan & AB 988: The Miles Hall Lifeline and Suicide Prevention Act

Crisis Care Continuum Plan



Components of Future State Crisis Care Continuum

BH crisis systems strive to serve anyone, anywhere and anytime and fall along a continuum:

Preventing Crisis

Community-based preventive interventions for individuals at risk for suicide or mental health / substance use crises (e.g., Zero Suicide, harm reduction programs, warmlines, peer support, digital-self help, recovery support services, addressing stigma)



Responding to Crisis

Acute crisis response services, including hotlines, 911 / 988 coordination, mobile crisis teams, social service response, and co-response models



Stabilizing Crisis

Community-based crisis stabilization services, including in-home crisis stabilization, crisis receiving facilities, peer respite, crisis residential services, sobering centers and transitioning individuals to care



Crisis Care Continuum Plan (CCC-P)

- **Three Strategic Pillars** for the future crisis care system:
 - ✓ Build towards **consistent access statewide**
 - ✓ Enhance **coordination across and outside of the crisis care continuum of care**
 - ✓ Design and deliver a **high quality and equitable system**
- **Near-, medium-, and long-term milestones** over the next five years
- **Prioritize inclusion and equity** and explores best practices and evidence-based strategies to ensure the crisis care continuum meets the needs of diverse populations.

AB 988 Legislation

The Miles Hall Lifeline and Suicide Prevention Act was enacted in September 2022

- Creates the 988 State Suicide and Behavioral Health (BH) Crisis Services Fund via surcharges on telecom per access line per month
- Requires the California Governor's Office of Emergency Services (CalOES) to convene a state 988 Technical Advisory Board
- **Requires CalHHS to convene a state 988 policy advisory group (988-Crisis Policy Advisory Group) to advise on a set of recommendations for the 5-year implementation plan for the 9-8-8 System by Dec. 31, 2024**

AB 988: 988-Crisis Policy Advisory Group

Members of the 988-Crisis Policy Advisory Group must include:

- The Department of Health Care Services
- The Office of Emergency Services
- The State Department of Public Health
- Representatives of counties
- Representatives of employees working for county behavioral health agencies
- Agencies who subcontract with county behavioral health agencies who provide these services
- 988 Centers
- Health plans
- Emergency medical services
- Law enforcement
- Consumers, families, and peers
- Other local and statewide public agencies.

AB 988: 988-Crisis Policy Advisory Group Tasks

The 988-Crisis Policy Advisory Group must make recommendations of 14 topics listed in AB 988, related to:

- Federal partnership with the Substance Abuse and Mental Health Services Administration and the administrator of the National Suicide Prevention Lifeline
- A state governance structure to support the implementation and administration of BH crisis services accessed via 988
- A Comprehensive Assessment of BH Crisis Services
- Statewide 988 standards and guidance, including 988 infrastructure, staffing and training standards and compliance with state technology requirements

AB 988: 988-Crisis Policy Advisory Group Tasks (cont.)

The 988-Crisis Policy Advisory Group must make recommendations of 14 topics listed in AB 988, related to:

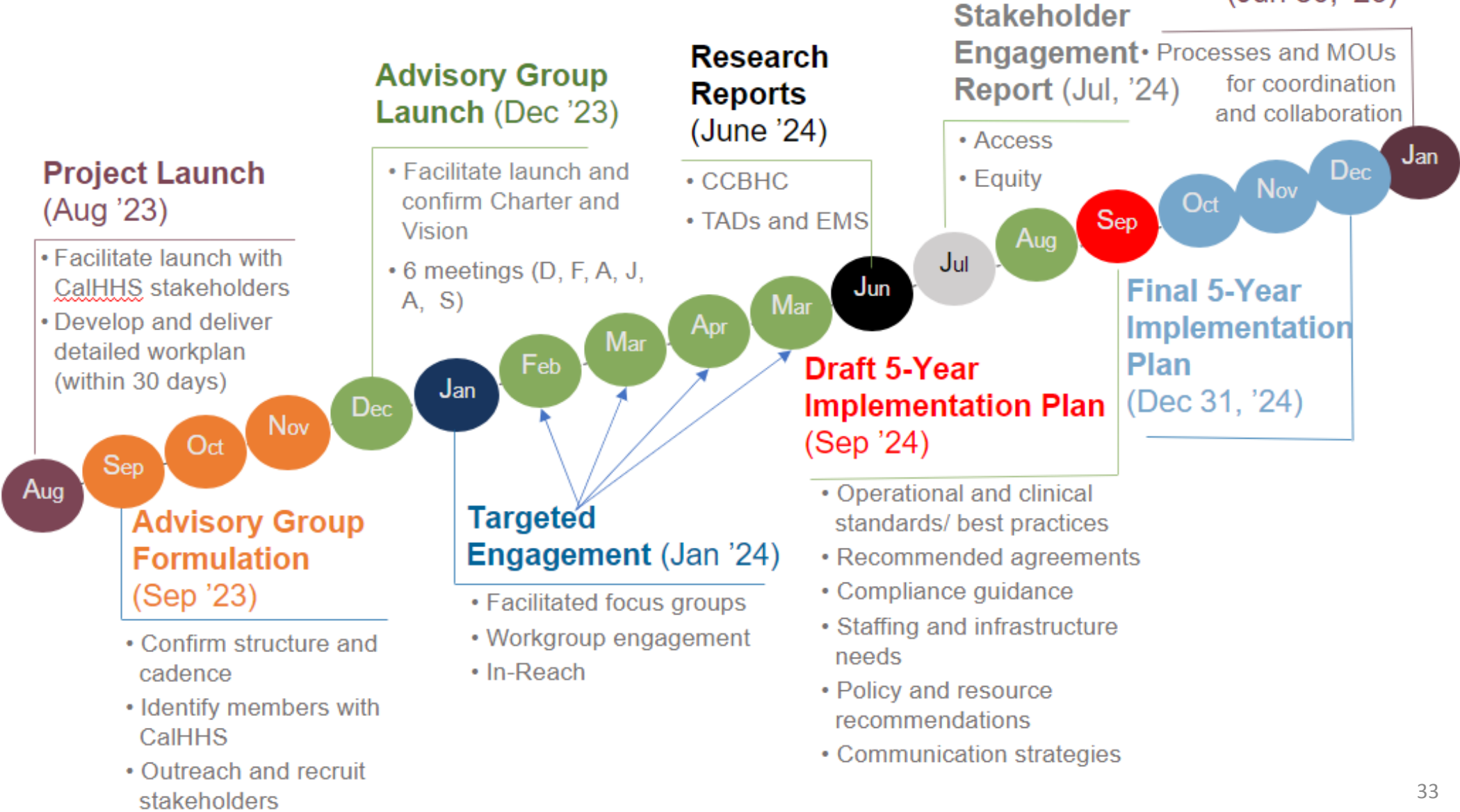
- 988-911 and BH Crisis Care Continuum Integration
- Data and Metrics, such as quantifiable goals for the provision BH crisis services and a process for establishing outcome measures, benchmarks, and improvement targets for 988 centers and the BH crisis services system.
- Communications strategies to support public awareness and consistent messaging of 988 and BH crisis services
- Funding and Sustainability of 988 and the BH crisis service system

AB 988 Request for Proposal (RFP)

- CalHHS issued an RFP to support 988 services including but not limited to:
 - ✓ Meaningful collaboration with a wide variety of technical and subject matter experts/stakeholders
 - ✓ Facilitation and convening of the 988/Crisis Policy Advisory Group
 - ✓ Research and analysis on all aspects of crisis systems to support the development or amendment of policies (e.g., legislative, state agency, practices, technology, etc.)
- **Health Management Associates (HMA) was chosen through a competitive process to support the work**

AB 988 Tasks and Timeline

988 California Interoperability Plan (Jun 30, '25)



Project Structure

HMA
Facilitated
Project
Management
and Support

Recommendations
and Guidance on
an Implementation
Roadmap

Stakeholder
Outreach and In-
Reach to Feed
Workgroups

Legislatively Required
Recommendations for 5-
Year Implementation Plan

Alignment and
Oversight + Final
Recommendations



988-Crisis Policy Advisory
Group

Comprehensive Assessment of BH Crisis
Services Workgroup
Statewide 988 Standards and Guidance Workgroup
988-911 BH Crisis Care Continuum Integration
Workgroup

Data and Metrics Workgroup
Communications Workgroup
Funding and Sustainability Workgroup

Technical Advisory Board

Ad Hoc Meetings:
CalHHS
Departments and
Other CA Agencies

Alignment and
information gathering

Interviews

Surveys

Focus Groups

Research/Data

Statewide Collaboration



Additional Research on Comprehensive BH Crisis Response System:

In addition to the 14 requirements in AB 988, HMA will:

- Conduct an analysis and present recommendations on the potential for **CCBHCs to expand statewide** to effectively respond to a range of BH needs.
- Research and develop strategies to **support the integration of local emergency medical services with BH crisis resources**, including expansion of Triage to Alternate Destination (TAD) programs.
- Conduct analysis and present recommendations on existing and potential strategies for **expanding integration of local emergency medical services with BH crisis resources**.

AB 988 Update: 988-Crisis Policy Advisory Group Selection

- CalHHS has selected members of the 988-Crisis Policy Advisory Group
- Selection was based on AB 988 criteria previously mentioned *and other factors* that will contribute to the development of recommendations and related policies.
- At minimum, members selected:
 1. Provide professional expertise and/or community perspectives important to the crisis system
 2. Bring a collaborative mindset to the planning, and an ability to listen to, consider other perspectives, and find consensus where possible
 3. Represent diversity in race, ethnicity, gender/sexuality, disability status, geographic representation (urban and rural), and representation from historically disenfranchised communities
 4. Representation from persons with lived experience (Note: potential members may hold multiple identities at once. For example, some members may bring professional expertise also may have personal experience with the crisis system)

What's Next?

The inaugural 988-Crisis Policy Advisory Group will convene on December 13, 2023 at the California Endowment in Sacramento

- The agenda has been posted on the [CalHHS website](#)
- The meeting is open to the public and will be recorded and posted online

For more information:

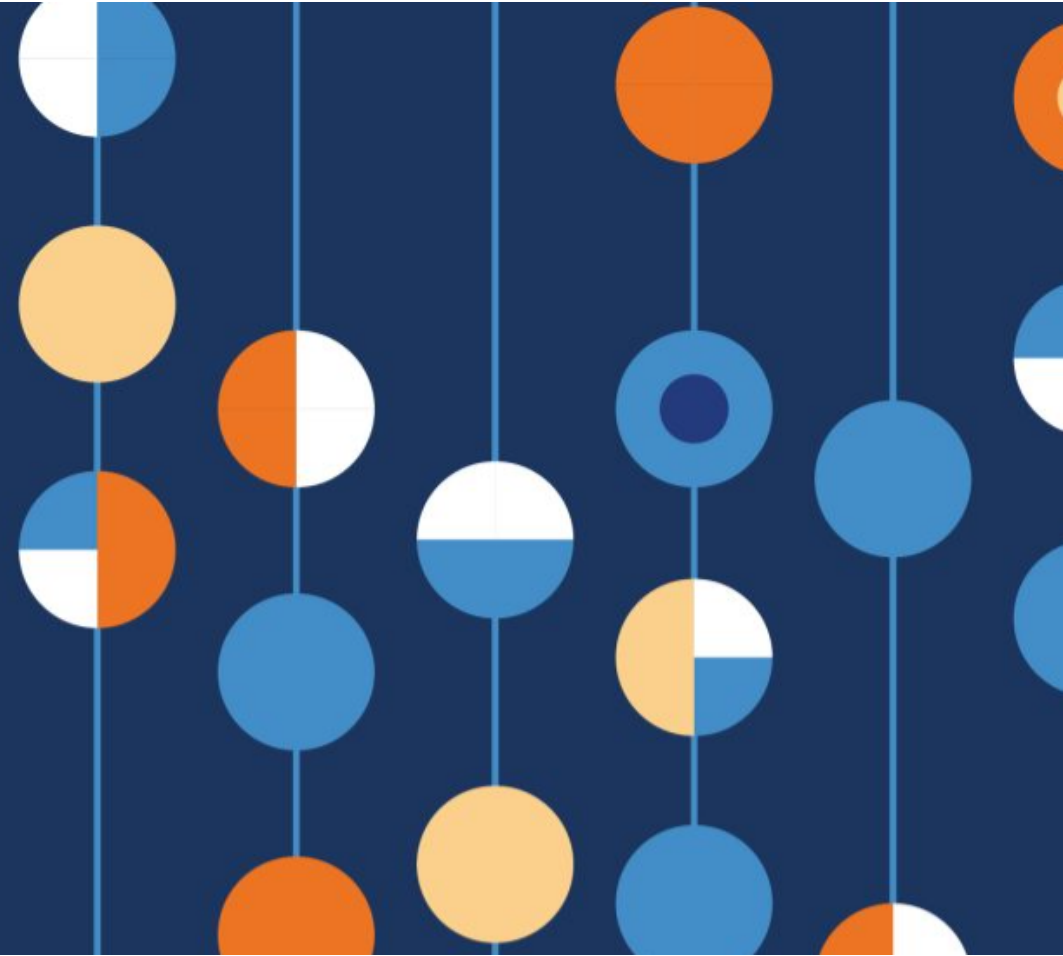
988 Suicide & Crisis Lifeline

The 988 Lifeline is an easy to remember three-digit number that anyone can call to receive support when experiencing a suicidal, mental health and/or substance use-related crisis. To reach the Lifeline, people can call or text 988 or chat at Lifeline (988lifeline.org). People who are worried about a loved one who may need crisis support may also use 988 to receive guidance and support. This number is in addition to existing national, state-wide, and local call lines for emergency and non-emergency support.

 Text/Chat 988

There are additional national, state-wide, and local call lines for emergency and non-emergency support.

- [988 Suicide and Crisis Lifeline FAQ](#)
- [Relationship between 988 and 911 FAQ](#)
- Additional information regarding 988 can be found on [SAMHSA's 988 Website](#), including answers to [Frequently Asked Questions](#).



Visit CalHHS's [988 Suicide and Crisis Lifeline Webpage](#)

Infrastructure: Workforce and Capital

Behavioral Health Workforce

Current:

Psychiatry and Social Worker Educational Capacity

- Both programs are anticipated to launch on January 9th.
- In October 2022, HCAI awarded \$18.6M grants to 8 Psychiatry Residency programs and over \$19M to 7 Psychiatric Mental Health Nurse Practitioner programs (see list [here](#)).

Behavioral Health Workforce Pipeline

- Cycle 1: 20 awards, 30 counties impacted.
- Cycle 2: The Health Professions Pathway Program (HPPP) application closed on October 16th.

Loan Repayment, Scholarship, and Stipend Augmentation

- Behavioral Health Scholarship (BHSP) Award announcement will be available in the coming weeks.
- The Community-Based Organization Grants (CBO Grants) Central App closed on November 13th.

Behavioral Health Workforce (cont.)

Justice System-Involved Youth Behavioral Health Pipeline

- Application closed October 16th.

Substance Use Disorder (SUD): Earn and Learn program

- Awarded \$23.3 million to six organizations. These programs are designed to increase the supply of Certified SUD counselors.

Peer Personnel Training and Placement

- Application opens on January 2, 2024

New:

California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment Demonstration (BH-CONNECT) (see next slide)

BH-CONNECT

- The **Medi-Cal BH-CONNECT** demonstration project will invest **\$2.4 Billion over 5 years.**
- Focus on investments to support a robust and diverse behavioral health workforce to support Medi-Cal members living with significant mental health and substance use disorder needs.
- SB 326 (now Prop 1) would assist in leveraging federal funding for the \$2.4 billion workforce initiative under the Medi-Cal BH-CONNECT demonstration project.

Community Care Expansion Program (CCE)

- Funds the acquisition, construction, and/or rehabilitation of adult and senior care facilities that serve applicants and recipients of Supplemental Security Income/State Supplementary Payment (SSI/SSP) or Cash Assistance Program for Immigrants (CAPI), who are at risk of or experiencing homelessness.

Impact:

- As of Sept. 2023: **48** entities awarded, total of **\$353.04 Million**, **1,993** Proposed Beds
- **25%** of the total funds will be made available for rehabilitation to preserve settings that currently serve the target populations, including **\$55 million** for a capitalized operating subsidy reserve (COSR) for existing licensed facilities

Behavioral Health Continuum Infrastructure Program (BHCIP)

Behavioral health continuum infrastructure program (BHCIP) was authorized by legislation in 2021.

- \$2.2 billion to construct, acquire, and rehabilitate real estate assets or to invest in needed mobile crisis infrastructure to expand the community continuum of behavioral health treatment resources.
- BHCIP grant funds are being released through six rounds.

Round 1:	Round 2:	Round 3:	Round 4:	Round 5:	Round 6:
Mobile Crisis, \$205M (\$55M Substance Abuse and Mental Health Services Administration grant funding)	County and Tribal Planning Grants, \$16M	Launch Ready, \$518.5M	Children and Youth, \$480.5M	Crisis and BH Continuum, \$430M	Outstanding Needs

Rounds 1-5 complete. Request for Applications (RFA) for BHCIP Round 6, Part I: Unmet Needs to be released soon.

Impact

BHCIP Rounds 3,4 & 5 have funded 85 residential facilities, 132 outpatient facilities, 2,448 residential beds, 289,235 outpatient slots

- 320 acute psychiatric hospital beds and 42 general acute hospital beds
- 1,413 SUD treatment beds
- 13,364 SUD outpatient slots
- 110 Crisis Beds through Children's Crisis Residential Program and Peer Respite
- 117,600 Crisis outpatient slots

Facility Types Funded by BHCIP in Rounds 3, 4, and 5

227 Total Facilities



Residential Facility Types

Outpatient Facility Types

Acute Psychiatric Hospital	9	13	Behavioral Health Integrated Outpatient ⁵
Adolescent Residential SUD Treatment Facility ¹	1	7	Behavioral Health Urgent Care/Mental Health Urgent Care
Adolescent Residential Treatment for SUD	4	11	Community Mental Health Clinic/Outpatient Clinic
Adult Residential SUD Treatment Facility ²	10	24	Community Wellness/Youth Prevention Center
Adult Residential Treatment Facility for SUD	20	20	Crisis Stabilization Unit (CSU)
Children's Crisis Residential Program (CCRP)	11	1	Hospital-Based Outpatient Treatment/Detox
Community Residential Treatment/Social Rehabilitation Program ³	2	11	Intensive Outpatient Treatment (SUD)
General Acute Care Hospital	1	3	Narcotic Treatment Program (NTP)
Mental Rehabilitation Center (MHRC)	4	2	NTP Medication Unit
Mental Rehabilitation Center (MHRC) ⁴	2	19	Office Based Outpatient Treatment
Peer Respite	2	8	Outpatient Treatment for SUD
Perinatal Residential SUD Facility	7	3	Partial Hospitalization Program
Psychiatric Health Facility (PHF)	9	2	School-Linked Health Center
Psychiatric Residential Treatment Facility (PRTF)	2	8	Sobering Center
Recovery Residence/Sober Living Home	2	132	Total Outpatient Facilities
Short-Term Residential Therapeutic Program (STRTP)	5		
Social Rehabilitation Program	4		
Total Residential Facilities	95		

¹ Adolescent Residential SUD Treatment Facility with a DHCS/ASAM Level of Care 3.5 Designation and Withdrawal Management (WM) Designation.

² Adult Residential SUD Treatment Facility with a DHCS/ASAM Level of Care 3.5 Designation and Withdrawal Management (WM) Designation.

³ Community Residential Treatment/Social Rehabilitation Program with the category of Short-Term Crisis Residential only.

⁴ Mental Rehabilitation Center (MHRC) only with Lanterman-Petris-Short (LPS) Designation.

⁵ These are mental health and/or SUD outpatient services integrated with community wellness/prevention centers.

*Point in time data, June 2023. Ongoing updates are available in the BHCIP data dashboard at <http://dashboard.buildingcalhhs.com/>

Beds and Annual Outpatient Slots Funded by BHCIP in Rounds 3, 4, and 5



	Residential Beds	2,448	289,235	Outpatient Slots
Acute Psychiatric Hospital	320	<div style="width: 13.1%;"><div style="width: 13.1%;"></div></div>	24,585	Behavioral Health Integrated Outpatient
Adolescent Residential SUD Treatment Facility ¹	8	<div style="width: 0.33%;"><div style="width: 0.33%;"></div></div>	20,658	Behavioral Health Urgent Care/Mental Health Urgent Care
Adolescent Residential Treatment for SUD	80	<div style="width: 3.27%;"><div style="width: 3.27%;"></div></div>	19,752	Community Mental Health Clinic/Outpatient Clinic
Adult Residential SUD Treatment Facility ²	405	<div style="width: 16.55%;"><div style="width: 16.55%;"></div></div>	80,585	Community Wellness/Youth Prevention Center
Adult Residential Treatment Facility for SUD	760	<div style="width: 31.05%;"><div style="width: 31.05%;"></div></div>	72,253	Crisis Stabilization Unit (CSU)
Children's Crisis Residential Program (CCRP)	88	<div style="width: 3.59%;"><div style="width: 3.59%;"></div></div>	600	Hospital-Based Outpatient Treatment/ Detox
Community Residential Treatment/Social Rehabilitation Program ³	30	<div style="width: 1.23%;"><div style="width: 1.23%;"></div></div>	10,300	Intensive Outpatient Treatment (SUD)
General Acute Care Hospital	42	<div style="width: 1.72%;"><div style="width: 1.72%;"></div></div>	2,464	Narcotic Treatment Program (NTP)
Mental Rehabilitation Center (MHRC)	230	<div style="width: 9.4%;"><div style="width: 9.4%;"></div></div>	600	NTP Medication Unit
Mental Rehabilitation Center (MHRC) ⁴	43	<div style="width: 1.76%;"><div style="width: 1.76%;"></div></div>	29,645	Office-based Outpatient Treatment
Peer Respite	22	<div style="width: 0.9%;"><div style="width: 0.9%;"></div></div>	1,653	Outpatient Treatment for SUD
Perinatal Residential SUD Facility	132	<div style="width: 5.39%;"><div style="width: 5.39%;"></div></div>	1,305	Partial Hospitalization Program
Psychiatric Health Facility (PHF)	135	<div style="width: 5.52%;"><div style="width: 5.52%;"></div></div>	146	School-Linked Health Center
Psychiatric Residential Treatment Facility (PRTF)	20	<div style="width: 0.82%;"><div style="width: 0.82%;"></div></div>	24,689	Sobering Center
Recovery Residence/Sober Living Home	28	<div style="width: 1.14%;"><div style="width: 1.14%;"></div></div>		
Short-Term Residential Therapeutic Program (STRTP)	41	<div style="width: 1.68%;"><div style="width: 1.68%;"></div></div>		
Social Rehabilitation Program	64	<div style="width: 2.61%;"><div style="width: 2.61%;"></div></div>		

¹ Defined as the addition of new behavioral health slot capacity. It does not include relocation/ rebuilding/re-purposing existing behavioral health slot capacity

² Adolescent Residential SUD Treatment Facility with a DHCS/ASAM Level of Care 3.5 Designation and Withdrawal Management (WM) Designation

³ Adult Residential SUD Treatment Facility with a DHCS/ASAM Level of Care 3.5 Designation and Withdrawal Management (WM) Designation

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*Point in time data, June 2023. Ongoing updates are available in the BHCIP data dashboard at <http://dashboard.buildingcalhhs.com/>

AB 531 – Now Part of Prop 1

AB 531 (Irwin, Chapter 789, Statute of 2023): Infrastructure

- Funding behavioral health treatment beds across the lifespan, supportive housing, and community sites
- Directing funding for housing for veterans with behavioral health needs
- \$6.38 billion general obligation bond, used to construct, acquire, and rehabilitate permanent supportive housing units, treatment beds and outpatient treatment slots
 - **\$4.4 Billion** for grants to public or private entities for BH treatment and residential settings.
 - **\$1.065 billion** in housing investments for veterans experiencing or at risk of homelessness who have behavioral health challenges.
 - **\$922 million** in housing investments for persons experiencing or at risk of homelessness who have behavioral health challenges.

Resources

CalHHS [Policy Brief](#)

CalHHS [CARE Act Website](#)

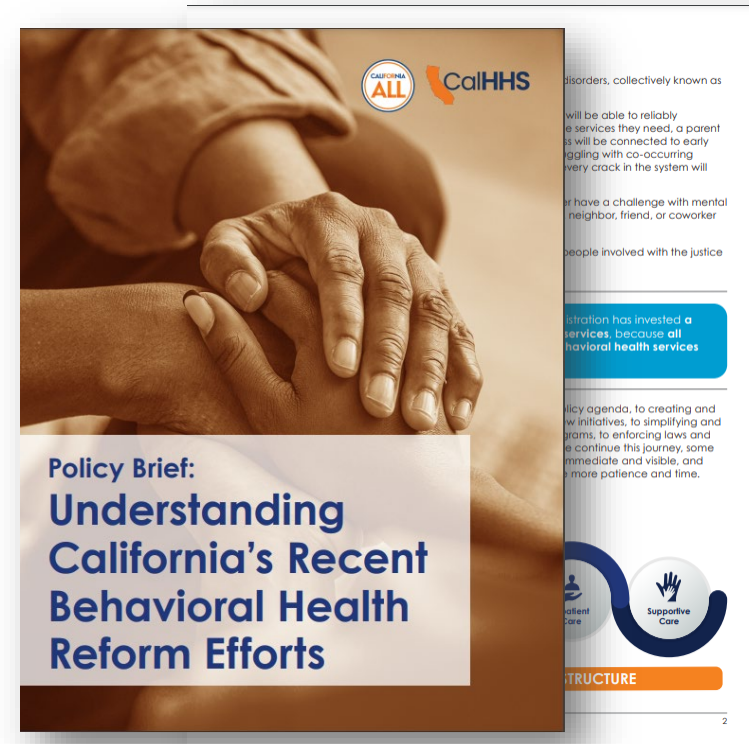
CalHHS [Crisis Care Continuum Plan](#)

CalHHS [988 Suicide and Crisis Lifeline Webpage](#)

HCAI [Behavioral Health Programs](#)

CalHHS [Modernizing our BH System \(BHSA\)](#)

[BHCIP Website](#)



Q & A

[Behavioral Health Task Force Website](#)

To join the task force listserv, contact
BehavioralHealthTaskForce@chhs.ca.gov.

Thank You

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