# TALKING POINTS

## Overview

The following talking points were created to help you expand awareness and share information about the CARE Act in your county. The CARE Act is complex; however, this content is intended to be high level to speak briefly and consistently about the CARE Act with various audiences. You can also use this information to add content to your website, create a localized fact sheet, etc.

**Resources**

We encourage you to use the [CARE Act Communications Toolkit for Counties](https://care-act.org/resource/care-act-communications-toolkit/) for strategic communication recommendations, best practices, and resources to support your efforts.

Materials on the [CARE Act Resource Center](https://care-act.org) can provide support as you answer basic questions:

* [Frequently Asked Questions](https://care-act.org/library/faqs/)(website)
* [The CARE Act At A Glance](https://care-act.org/resource/the-care-act-at-a-glance/) (brief)
* [The CARE Process Flow](https://care-act.org/resource/the-care-process-flow-to-treatment-housing-and-support/) (brief)
* [CARE Act Eligibility Criteria Fact Sheet](https://care-act.org/resource/care-act-eligibility-criteria-fact-sheet/) (brief)
* [The Volunteer Supporter Toolkit](https://care-act.org/resource/volunteer-supporter-toolkit/) (toolkit)

**FAQs**

### WHAT IS THE CARE ACT?

The Community Assistance, Recovery, and Empowerment (CARE) Act is a new civil court process. It provides community-based mental health services to eligible adults with schizophrenia spectrum or other psychotic disorders. The CARE process connects eligible people with services to support their recovery, which may include treatment, housing, and community support.

### WHAT ARE THE GOALS OF THE CARE ACT?

[Note that these are meant to be a menu of goals that can be adapted based on the audience of the communications efforts.]

The CARE Act supports a self-determined path to recovery.

* CARE is intended to be a new process that can be supported and served by existing programs.
* It aims to prioritize behavioral health services for severely ill, vulnerable individuals while preserving self-determination to the greatest extent possible while supporting the person to gain purpose and a sense of belonging.
* CARE is an upstream diversion to prevent more restrictive conservatorships or incarceration.
* CARE holds the behavioral health system accountable to holistically serve those who often have the most complex care needs.
* It provides a way for people to stabilize, begin healing, and exit homelessness.

### WHO IS ELIGIBLE FOR CARE?

Eligibility is determined on a case-by-case basis. Homelessness and mental illness alone are not enough to meet eligibility requirements. Some of the criteria include:

* 18 years or older.
* A diagnosis of schizophrenia spectrum or other psychotic disorders.
* Mental illness must be severe, persistent, and significantly interfering with daily living activities.
* Not clinically stabilized in ongoing voluntary treatment.
* CARE must be the least restrictive alternative to provide recovery and stability.

For more information, see [CARE Act Eligibility Criteria Fact Sheet](https://care-act.org/resource/care-act-eligibility-criteria-fact-sheet/) (brief).

### WHO CAN FILE A PETITION?

A wide range of people can petition the court for someone to get help. Some examples include:

* Family members.
* Health care/social services providers.
* First responders.
* County behavioral health agency.

For a list of eligible petitioners, please visit the [Information for CARE Act Petitioners](https://www.chhs.ca.gov/care-act-petitioners/) section on the California Health and Human Services (CalHHS) website.

### HOW DOES THE CARE PROCESS WORK?

The CARE process begins with the filing of a petition. A court review will then determine eligibility. If eligible, the court will work with the participant and their attorney to create a voluntary CARE agreement or court-ordered CARE plan that connects them with services. There will be status review hearings to review progress and challenges. After 12 months, the participant may graduate from the program, or they may continue for another year.

For more information, see [The CARE Process Flow](https://care-act.org/resource/the-care-process-flow-to-treatment-housing-and-support/) brief.

### HOW DOES CARE ENSURE ACCOUNTABILITY?

Accountability in CARE goes both ways. If a respondent cannot successfully complete a CARE plan, the court may use existing law to ensure their safety. The CARE Act also holds local governments accountable for using the variety of funding streams available to provide care to the people who need it.

**WHAT HAPPENS NEXT?**
After graduating from the CARE process, the participant remains eligible for ongoing treatment, supportive services, and housing in the community to support long-term recovery.