


Community Assistance, Recovery, and Empowerment Act

Behavioral Health & Social Service Provider Roles in the CARE Act



The Community Assistance, Recovery, and Empowerment (CARE) Act established a civil court process to support eligible people with psychotic disorders who meet health and safety criteria (see [The CARE Act At a Glance](#) brief). The CARE Act is more than just a process: it is a way to connect individuals to services in their communities. Behavioral health and social service providers can initiate this connection to services (see [The CARE Process Flow](#)) by filing a petition or making a referral, as outlined below.

♥ Behavioral Health and Social Service 👉 Providers & Petitions

Can behavioral health and social service providers serve as petitioners?

Among other eligible petitioners, a CARE petition can be filed by (1) the director of a public or charitable organization, agency, or home where the individual resides and receives, or has within the previous 30 days has received, behavioral health services or (2) a licensed behavioral health professional that has treated (or supervised the treatment of) an individual in the last 30 days. This includes a designee of either. A "designee" of the director of a charitable organization or home could include a social worker, case manager, community health worker, or others staff who works with the individual. Behavioral health and social service providers that could serve as petitioners may include behavioral health, adult protective services, and housing providers.

See the [Overview of the Role of System Partners in the Petition Process](#) video that reviews how system partners can file a petition.

After the petition is filed, the original petitioner must be present and can make a statement at the initial appearance, which is usually quite brief. Remote appearances are common across courts. At the initial appearance, the county behavioral health (BH) agency will then take the place of the original petitioner.

Behavioral Health and Social Service Providers & Petitions



Can behavioral health and social service providers make referrals to others to act as the petitioner?

Behavioral health and social service providers may refer to county BH or other eligible petitioners who may be in a better position to petition. Other eligible petitioners could include non-county behavioral health providers or first responders. Some county BH agencies have established a referral relationship with health and social service providers to support an efficient referral and petitioning process. Please note that a county BH agency is not obligated to file a petition, but will determine what they see as the appropriate next steps with the individual. If a county BH agency does not file, other eligible petitioner types may still decide to file a petition.

If a behavioral health or social service provider is associated with a designated facility, they may refer the individual to the county BH agency. A designated facility is defined as one that offers assessment, evaluation, and crisis intervention services pursuant to [California Welfare and Institutions Code \(W&I Code\) section 5150, subdivision \(a\)](#), or a designated facility as defined in [W&I Code section 5008, subdivision \(n\)](#). The county BH agency must then assess the individual within 14 business days and file a petition if the person is likely to meet the eligibility criteria and the individual does not engage in voluntary treatment.

For more information specific to behavioral health and social service providers, see [this training](#). For more information on referrals and other information specific to hospitals and emergency departments, see the training and brief for [hospitals and emergency departments](#).

What information should be included in a petition?

The petition helps a judge determine an individual's possible [eligibility for CARE](#). In our training for behavioral health and social service providers, we include information about what you might include in the petition.

Key points to include:

- Confirmed or provisional diagnosis of an
- Observed symptoms and behaviors (e.g., delusions, paranoia, hallucinations, disorganized speech/behavior, blunted affect, seclusive behavior).
- Declining mental/physical state affecting basic needs.
- Challenges with self-care tasks (e.g., personal hygiene, dressing).
- Issues with housing, transportation, and finances.
- Difficulty forming and maintaining social relationships.
- Treatment nonadherence or ineffective treatment.

For more tips on what to include, see the [Petitioning at a Glance](#) video.

Additional Resources

Information for petitioners is consolidated on the [CARE Act Resources for Petitioners](#) landing page, including resources for completing a petition, resources for specific petitioner types (including [how-to videos](#)), and CARE basics.

