

▶▶ Enriched Residential Services (ERS)

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▶▶ Program Description

ENRICHED RESIDENTIAL SERVICES (ERS)

- ERS programs are designed to provide comprehensive mental health and rehabilitative services in a non-institutional residential setting for individuals who would be at risk of hospitalization, re-hospitalization or other institutional placement if they were not in the ERS program.
- ERS programs provide a supportive residential transition for persons discharged from locked subacute facilities, acute psychiatric inpatient units, jails, or intensive residential facilities.
- Stays typically last 9-12 months.

▶▶ ERS: Details

Item	Response
Level of Service	Residential Treatment
Will the program be funded by the Behavioral Health Services Act (BHSA)?	Yes
Will the program grow, shrink or stay the same?	Grow to create flow.

▶▶ Priority Goal #1: Access to Care Goal for Improvement

The timely and appropriate use of health services to achieve the best possible health outcomes, inclusive of all modalities. Improving Californians' access to care is necessary for improving outcomes.

- ERS is a critical component of the mental healthcare continuum when providing residential care helps maintain engagement in MH services and stability in the community.
- ERS as a step-down destination creates capacity in longer term residential treatment settings for those that need it.

▶▶ Priority Goal #2: Homelessness Goal for Reduction

People who are homeless or at risk of homelessness. Addressing the increase in statewide homelessness is crucial to ensuring unhoused individuals living with significant behavioral health needs receive regular access to behavioral health treatment and safe and stable housing where they can recover.

- Safety and stability of ERS can provide a crucial intervention point to break the cycle of homelessness, crises, and re-institutionalization.

▶▶ Priority Goal #3: Institutionalization

Goal for Reduction

People who are homeless or at risk of homelessness. Addressing the increase in statewide homelessness is crucial to ensuring unhoused individuals living with significant behavioral health needs receive regular access to behavioral health treatment and safe and stable housing where they can recover.

- ERS serves individuals who are at high risk of institutionalization and those being discharged from locked subacute facilities, acute psychiatric inpatient units, and State Hospitals.
- ERS provides on-site mental health and supportive services that provide stability, life skills training and a smooth transition to community living.

▶▶ Priority Goal #4: Justice Involvement

Goal for Reduction

Reducing adults and youth living with behavioral health needs who are involved in the justice system - including those who have been arrested, are living in, who are under community supervision, or who have transitioned from a state prison, county jail, youth correctional facility, or other state, local, or federal carcel settings where they have been in custody of law enforcement authorities.

- By addressing the root causes of their justice-involvement—such as untreated mental illness and housing instability—the program reduces the likelihood of future arrests.
- For individuals with behavioral health needs who are deemed incompetent to stand trial or are charged with low-level, non-violent offenses, ERS provides a community-based alternative to jail. This allows them to receive intensive treatment and support in a therapeutic setting rather than a correctional facility.

▶▶ Priority Goal #6: Untreated Behavioral Health Conditions

Goal for Reduction

An individual's behavioral health condition that has not been diagnosed or attended to with appropriate and timely care.

- ERS is effective at reducing untreated behavioral health conditions because it provides immediate, integrated, and continuous on-site mental health care in a supportive and structured residential environment.
- Reduces impact of missed appointments.
- For individuals with both mental health and substance use disorders, ERS provides a structured, sober environment with staff trained to support dual-diagnosis recovery, ensuring both conditions are treated concurrently.