



PUBLIC SAFETY REALIGNMENT IN ORANGE COUNTY

FY 2022-23 ANNUAL REPORT AND FY 2023-24 ANNUAL PLAN

Prepared by:

Orange County Community Corrections Partnership



**Orange County
Community Corrections Partnership
Executive Committee**

Daniel Hernandez, Chief Probation Officer (Chair)

Don Barnes, Sheriff-Coroner

Todd Spitzer, District Attorney

Martin Schwarz, Public Defender

Veronica Kelley, Health Care Agency

Amir El-Farra, Chief, Garden Grove Police
Department

The seal of Orange County, California, is a large, faint watermark in the background. It features a central figure of a woman holding a scale, surrounded by agricultural symbols like wheat and oranges. The words "COUNTY OF ORANGE" are written in a circle around the top, and "CALIFORNIA" is written at the bottom.

VISION STATEMENT

“Enhancing the quality of life of Orange County residents by promoting public safety, reducing recidivism and creating safer communities.”

MISSION STATEMENT

The Mission of the Orange County Community Corrections Partnership is to enhance public safety by holding offenders accountable and reducing recidivism by utilizing fiscally responsible, quantifiable, evidence-based and promising practices that support victims and community restoration.

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EXECUTIVE SUMMARY

The County of Orange (County) presents the Fiscal Year (FY) 2022-23 Public Safety Realignment Report, which serves as an update to the Community Corrections Partnership (CCP) Plan. The purpose of this report is to highlight the programs and collaborative investments made across County departments, courts, and local law enforcement entities implemented to address the additional responsibilities under Realignment and review the statistical data and trends further impacting public safety.

The statistical information included in this report was obtained from the County's Sheriff-Coroner's Department, District Attorney's Office, Public Defender's Office, Probation Department, Health Care Agency, as well as the Courts and local law enforcement entities.

A major component of the data collection and analysis centers on recidivism. Recidivism data is a central metric to measuring the impacts of Realignment, effectiveness in programming, and efficiency in funding utilization. The County has collected recidivism data per the Board of State and Community Corrections (BSCC) definition as follows:

Recidivism is defined as a conviction of a new crime committed within three years of release from custody or committed within three years of placement on supervision for a previous criminal conviction.

In February 2019, the Orange County Board of Supervisors (Board) revised their adopted definition for recidivism to include sustained parole or probation violations or a lawful arrest based on a new criminal offense and expanded the time frame to include three years after the end of the individual's supervision.

Currently, the County has the infrastructure to report recidivism data based on the BSCC definition of recidivism. The County stakeholders continue to refine the Board-adopted definition and work to put systems and processes in place that will allow for the collection of data based on the Board-adopted definition and facilitate metrics to meet both definitions of recidivism.

The information and data in this report covers the fiscal year period of July 1, 2022, to June 30, 2023. During this fiscal period, the County received a Base allocation of \$121.5M in 2011 Public Safety Realignment funds from the State of California. Funds were distributed to the Sheriff-Coroner's Department, Probation Department, Health Care Agency, District Attorney's Office, Public Defender's Office, and Local Law Enforcement entities based on the amount available and the impact to operational costs from the increased responsibilities resulting from the Public Safety Realignment. Collectively, the County continues to work collaboratively across departments and partner agencies to address public safety concerns to create or expand programming to meet the needs of the supervised and incarcerated populations.

2011 Public Safety Realignment Summary

In 2011, Assembly Bill (AB) 109 was enacted to address the overcrowding in California's 33 prisons and alleviate the State's financial crisis. The law, effective October 1, 2011, also known as the 2011 Public Safety Realignment (Realignment), mandates that individuals sentenced to non-serious, non-violent or non-sex offenses serve their sentences in county jails instead of state prison. Realignment made some of the largest and most pivotal changes to the criminal justice system in California. In short, Realignment transferred the responsibility for supervision of felons (excluding high-risk sex offenders) released from prison whose commitment offenses are statutorily defined as non-serious and non-violent to the 58 counties. Offenders convicted after October 1, 2011, who have no current or prior statutorily defined serious, violent or sex-offense convictions serve time locally (regardless of length of sentence) with the possibility of community supervision in place of time spent in custody.

Realignment established the Postrelease Community Supervision (PCS) classification of supervision; altered the parole revocation process placing more responsibility in local jurisdictions; gave local law enforcement the freedom to manage offenders in a more cost-effective manner; and, as of July 1, 2013, parole violations are housed, prosecuted, and tried locally. Realignment created an unprecedented opportunity for all 58 California counties to determine an appropriate level of supervision and services to address both the needs and risks of individuals released from prison and local jails into the community.

The following summarizes the key components of the 2011 Public Safety Realignment Legislation:

- **Redefined Felony Sentencing**

Individuals convicted of certain felonies on or after October 1, 2011, may be sentenced to the county jail for more than 12 months. Individuals sentenced under Penal Code (PC) 1170(h) can receive a sentence that falls within a low, middle or upper term of incarceration based on their specific offense. Some felony offenses (i.e., serious, violent and sex offenses) are excluded from sentencing under PC 1170(h) and will be sentenced to state prison time. Pursuant to PC 1170(h), an individual convicted of a non-serious, non-violent or non-sex offense may be sentenced to serve that entire time in county jail or may be sentenced to serve that time split between county jail and Mandatory Supervision (MS). Offenders sentenced to MS are supervised by Probation.

- **Postrelease Community Supervision**

Those released from state prison on or after October 1, 2011, who had been incarcerated for a non-serious offense (pursuant to PC 1192.7(c)), a non-violent offense (pursuant to PC 667.5(c)) or a sex offense deemed not high-risk (as defined by California Department of Corrections and Rehabilitation) are released to a local jurisdiction based on their county of residence at time of conviction for supervision

under PCS. These individuals may have prior violent or serious offenses or be registered sex offenders. PCS supervision cannot exceed three years.

- **Custody Credits**

PC 4019 was amended to allow for those sentenced to county jail to receive pre- and post-sentence conduct credit of two days for every four days actually spent in custody, resulting in sentences being served more quickly. This is the same conduct credit offenders receive when serving time in state prison.

- **Alternative Custody Program**

Senate Bill (SB) 1266 allows for non-serious, non-violent and non-sex offenders to serve part of their sentence in a non-custodial facility, such as a residential home, non-profit drug-treatment program or transitional-care facility recognizing that alternative custody is an integral part in reintegrating these individuals back into their community.

- **2016 Legislation**

SB 266 - Probation and Mandatory Supervision: Flash Incarceration. This Bill amended several Penal Codes, including Section 1203; amended and added to Section 4019; and added Section 1203.35. SB 266 allows a court to authorize the use of flash incarceration, as defined, to detain the offender in county jail for no more than 10 days for a violation of his or her conditions of probation or mandatory supervision, as specified. These provisions would not apply to persons convicted of certain drug possession offenses. Prior to January 1, 2021, the bill will allow a person to receive credits earned for a period of flash incarceration pursuant to these provisions if his or her probation or mandatory supervision is revoked.

- **Implementation Plans**

The 2011 Public Safety Realignment legislation required each county to submit a comprehensive implementation plan to the BSCC along with any revisions, thereafter. In addition, the responsibility for the development and implementation of such plan was charged to each county's established Community Corrections Partnership.

Community Corrections Partnership

The Orange County Community Corrections Partnership (OCCCP) was established with the enactment of the California Community Corrections Performance Incentives Act of 2009 (SB 678) and serves as a collaborative group charged with advising on the implementation of SB 678 funded initiatives and Realignment programs.

Chaired by the Chief Probation Officer, the OCCCP oversees the 2011 Public Safety Realignment process and advises the Board in determining funding and programming for the various components of the plan. The OCCCP includes an Executive Committee which, pursuant to bylaws adopted by the OCCCP, consists of the following voting members: the

Chief Probation Officer, the County Sheriff, the District Attorney, a Chief of Police, the Public Defender, and the Director of County Social Services or Mental Health or Alcohol and Drug Services (as determined by the Board). The original 2011 Public Safety Realignment Plan and subsequent updates are developed by the OCCCP members, their designees, and other key partners.

For FY 2022-23, the OCCCP consisted of the following voting members:

Daniel Hernandez, Chief Probation Officer (Chair)

Don Barnes, Sheriff-Coroner

Todd Spitzer, District Attorney

Martin Schwarz, Public Defender

Veronica Kelley, Health Care Agency

Amir El-Farra, Chief of Police, Garden Grove

The 2011 Public Safety Realignment legislation tasked the OCCCP to develop and recommend an implementation plan for consideration and adoption by the Board. The plan outlined multifaceted strategies to meet Realignment implementation and developed system goals to guide implementation and ongoing efforts in Orange County and was adopted by the Board on October 18, 2011. This report is intended to serve as an update to the implementation plan.

Implementation Plans of all 58 California counties are available through the BSCC at the following website:

http://www.bscc.ca.gov/s_communitycorrectionspartnershipplans/

Since implementation, the goals and objectives established by the OCCCP have remained consistent and aligned with the vision and mission of the OCCCP by maintaining a:

- Streamlined and efficient system to manage additional responsibilities under Realignment.
- System that protects public safety and utilizes best practices in recidivism reduction.
- System that effectively utilizes alternatives to pre-trial and post-conviction incarceration where appropriate.

2011 Public Safety Realignment Funding

The 2011 Public Safety Realignment provides a dedicated and permanent revenue stream through a portion of Vehicle License Fees (\$12) and State sales tax (1.0625%). This is outlined in trailer bills AB 118 and SB 89. Funding became constitutionally guaranteed by California voters with the passage of Proposition 30 in 2012.

The funding formula adopted by the State has changed dramatically from the initial

implementation. The Realignment Allocation Committee formed by the California State Association of Counties, established the allocation methodology framework for Base Allocation and Growth Funding with both formulas containing factors weighted as follows:

Base Allocation

- Caseload (45%) recognizes the quantifiable impacts 2011 Realignment has had on public safety services. Factors consist of PC 1170(h) jail inmates, the MS and PCS population, and felony probation caseloads.
- Crime and Population (45%) recognizes the general county costs and the costs of diversion programs not otherwise captured in caseload data. Factors include the adult population and the number of serious crimes.
- Special Factors (10%) recognizes the socioeconomic and other unique factors that affect a county's ability to implement Realignment. Factors consist of poverty and the impact of state prisons on the counties.

Growth Funding

Distributed based on the following performance factors:

- SB 678 Success Rates (80%): Based on data indicating the success and improvement in probation outcomes. Factors include the number of non-failed probationers (60%) and year-over-year improvement in the success rate (20%).
- Incarceration rates (20%): Focus is on reducing prison incarcerations. Factors include the year-over-year reduction in the number of felons admitted to state prison (10%), success measured by the per capita rate of prison admissions (10%), and a year-over-year reduction in the number of felons admitted to prison as a 2nd strikers (fixed dollar amount).

In compliance with Government Code (GC) 30029.07 and beginning with the growth funding attributed to FY 2015-16, 10% of the Growth Funds received is used to fund a Local Innovation Account for the County. Additional funding of this account is received from similar growth funding from other realigned public safety programs with the primary funding being AB 109. Funds in this account must be used for activities otherwise allowable per the realigned public safety programs included in the funding with expenditures determined and approved by the Board.

For FY 2022-23, the County received a Base Allocation of \$121.5M. Growth Funding of \$18.5M was received for the fiscal year. Funds were allocated, as approved by the OCCC and Board, to five County agencies (i.e., Sheriff-Coroner's Department, Probation Department, Health Care Agency, District Attorney's Office, and Public Defender's Office) and 21 Local Law Enforcement entities. Each of the agencies that received an allocation utilized Realignment monies for costs associated with local incarceration, PCS oversight, and other Realignment programmatic services, such as, but not limited to:

- Short-term housing/shelter beds
- Sober Living
- Day Reporting Center
- Restorative Justice Services
- Bus Passes
- GPS Electronic Monitoring
- Adult Non-medical Detoxification Services Outpatient and Residential Services

Additionally, pursuant to GC 30027.8(e)(3) with respect to costs associated with revocation proceedings involving persons subject to state parole and the Postrelease Community Supervision Act of 2011, the District Attorney's and Public Defender's Offices received a total of \$5.0M Base Allocation and \$1.2M Growth Funding.

In addition, the OCCCP was eligible and received a one-time grant of \$200,000 through the Corrections and Planning Grant Program. The OCCCP and Board have authorized the use of this money to fund research and training related to Realignment.

FY 2022-23 Allocations

Department	FY 22-23 Base Allocation Received	FY 21-22 Growth Funds Received (1)	Total Allocated for FY 22-23
Community Corrections (AB 109)			
Sheriff-Coroner	66,524,017		66,524,017
Probation	24,931,375		24,931,375
Health Care Agency	21,341,044		21,341,044
District Attorney	3,527,385		3,527,385
Public Defender	2,304,784		2,304,784
Local Law Enforcement (LLE)	2,420,992		2,420,992
CCP Approved - Reentry Services	-	18,488,520	34,426,529
Total Community Corrections (AB 109)	121,049,597	18,488,520	155,476,126
Community Corrections Incentive Funds and CCP Approved Projects	200,000	-	2,163,378
Subtotal	121,249,597	18,488,520	157,639,504
District Attorney & Public Defender Subaccount			
District Attorney	2,507,003	588,691	4,396,197
Public Defender	2,507,003	588,691	7,029,292
Total District Attorney & Public Defender	5,014,006	1,177,382	11,425,489
Total Allocations/Expenditures	126,263,603	19,665,902	169,064,993

GOALS AND OBJECTIVES

FY 2022-23 Realignment Accomplishments

The following goals were identified for the County in FY 2022-23 and are shown along with notable achievements:

Goal #1: Increase linkage to appropriate County behavioral health services. (Health Care Agency)

Status: Fully achieved

During FY 2022-23, 438 individuals received in reach services and 94 individuals successfully enrolled in County behavioral health services upon release.

Goal #2: Increase the utilization of random drug testing (RDT) for adult supervision units newly authorized to use RDT in the Probation Department. (Probation)

Status: Fully achieved

The Probation Department's goal for FY 22-23 was to increase utilization by 20% for units newly authorized to use RDT compared with the first six months of 2022 (January – June 2022). The baseline average utilization rate for the first half of 2022 was 19.1%. In order to increase utilization by 20% Probation had to show an average utilization rate of 22.9% or better for the last six months of 2022. Probation met this goal in the second half of 2022 with an average utilization rate of 29.9%.

Goal #3: Improve public safety, reduce recidivism by working together with local, county, state, and federal law enforcement partners. (District Attorney)

Status: Fully achieved

During FY 22-23, the AB109 Task Force arrested 70 PCRS Offenders, 48 of those were arrested with new law violations. Four of the arrests were new law violation arrested as a result of collaboration with Santa Ana PD specialized units.

During FY 22-23, the AB109 Task Force collaborated with law enforcement partners and assisted local agency operations. During these various operations, 30 firearms were seized by local agency partners.

December 2022, the AB109 Task Force assigned one AB109 Task Force member to assist ATF Orange County Violent Crime Task Force operations. From December 2022-July 2023, four PCRS offenders were arrested and one firearm was seized.

During FY 22-23, the DPO assigned to the AB109 Task Force provides AB109 participants with various orange county resources/assistance.

Goal #4: Work with Probation and law enforcement partners to identify and prosecute AB 109 participants responsible for major crime trends. (District Attorney)

Status: Fully achieved

During FY 22-23, the AB109 Task Force has arrested/assisted with arrests of 307 offenders. 70 of the arrests were subjects participating in the AB109, 53 on formal/informal probation, 20 of the subjects were on Parole and 164 not on any supervision. In addition, the AB109 Task Force was responsible for seizing over 55 pounds of narcotics (heroin, methamphetamine, fentanyl and other various narcotics).

The AB109 Task Force assisted various local OC law enforcement agencies during search warrants and operations. Four AB109 participants were arrested during these operations. The prosecutors at OCDA prosecuted the crimes and/or violations in various settings, including violation hearings, and new law violation prosecutions.

December 2022, the AB109 Task Force assigned one AB109 Task Force member to assist ATF Orange County Violent Crime Task Force operations. From December 2022-July 2023, four PRCS offenders were arrested.

FY 2023-24 Realignment Goals

The OCCCP identified the following goals for the County for FY 2023-24. For each goal, the OCCCP will strive to guide every partner in public safety to work together for a safe Orange County through a reduction in recidivism achieved through rehabilitation and other alternatives to incarceration. Following each goal is a description of how each goal may be attained in the next year.

Goal #1: Increase linkage to appropriate County behavioral health services upon release from incarceration. (Health Care Agency)

Objectives:

- a. Increase the number of individuals receiving in-reach services prior to release.
- b. Increase the number of individuals to enroll in County behavioral health services upon release.

Goal #2: Increase the utilization of random drug testing (RDT) for adult supervision units newly authorized to use RDT in the Probation Department. (Probation)

Objectives:

- a. Increase utilization of RDT in the adult supervision units authorized for RDT.

Goal #3: Improve public safety, reduce recidivism by working together with local, county, state, and federal law enforcement partners. (District Attorney)

Objectives:

- a. Hold AB 109 participants accountable when they violate the terms of their supervision or when they commit new crimes.
- b. Utilize data, technology, and investigative techniques to identify and apprehend AB 109 participants committing crimes and/or in violation of their conditions.

Goal #4: Work with Probation and law enforcement partners to identify and prosecute AB 109 participants responsible for crime and major crime trends. (District Attorney)

Objectives:

- a. Continue to communicate and share information with law enforcement partners regarding subjects who are AB109 Participants.
- b. Continue to provide training for the AB109 Task Force.
- c. Utilize real time technology/software to assist AB109 Task Force in daily operations.
- d. Identify and arrest subjects involved in “take-over” robberies, home invasion burglaries, drug sales and gun possession.

The goals and objectives identified above require collaboration and coordination across departments and, in some cases, outside entities. The programs and efforts made by the departments and partner agencies to address the needs of the AB 109 population are highlighted in the following sections.

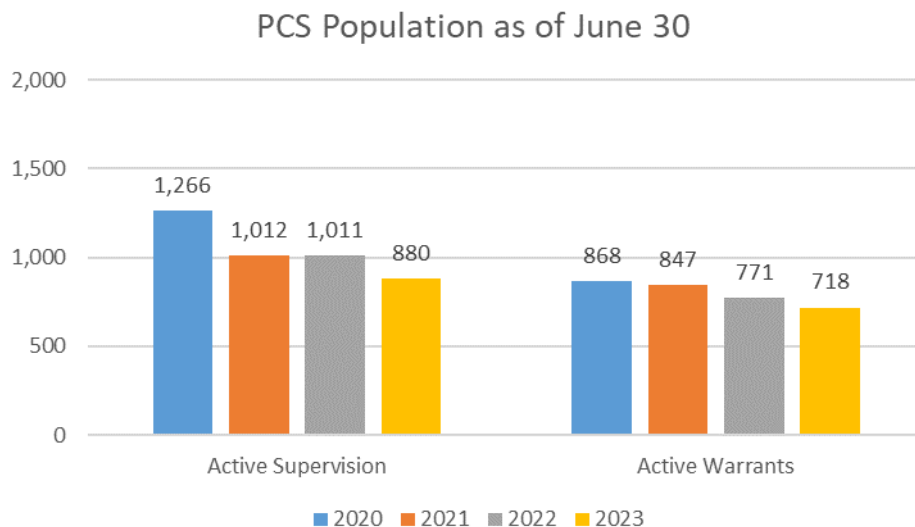
PROBATION DEPARTMENT

The Orange County Probation Department (Probation) provides supervision services for approximately 11,176 adult and juvenile offenders on court-ordered supervision or in diversion programs. Deputy Probation Officers (DPOs) serve an investigative role for the court by producing sentencing reports and recommendations and by working in specialized units alongside local law enforcement entities, the Sheriff-Coroner's Department, and the District Attorney's Office to reduce gang-related crime and to supervise convicted narcotics dealers.

With the 2011 Public Safety Realignment, Probation was tasked with the supervision of the Postrelease Community Supervision (PCS) population and individuals under Mandatory Supervision (MS) who would have been sentenced to state prison but completed their sentence through a combination of local incarceration and a period of community supervision. As with formal probation, each DPO works with these populations to ensure compliance with the court's terms of their probation and assists with their reintegration into society by identifying constructive social outlets, like jobs, school, and community activities to help rehabilitate offenders so that future anti-social behavior does not occur.

As of June 30, 2023, there were 880 actively supervised PCS individuals, which was a decrease of 131 individual (0.13%) from the 1,011 reported for June 2022. There were 718 PCS individuals with a warrant status as of June 30, 2023, which was a decrease of 7% from the 771 reported for the prior year. An estimated 45% of the PCS population reports residency in just two cities, Anaheim (20%) and Santa Ana (25%). PCS individuals are predominantly male (92%), while 8% are female.

For the same reporting period, the number of MS individuals on active supervision totaled 256, which was a decrease of 63 individuals (-20%) from the prior year. Those with MS active warrants totaled 432, which was a decrease of 41 individuals (94%) from the prior year. Similar to the PCS population, approximately 37% reside in the same two cities, Anaheim (14%) and Santa Ana (23%).



Needs and Services Assessments

The responsibility of the PCS and MS populations are primarily those of Probation’s AB 109 Field Services Division and the dedicated Reentry Team. This Division utilizes

evidence-based practices and collaborates with other County and community partners to best address the needs of their clients. An objective risk/needs assessment tool is utilized to determine the appropriate level of supervision that is necessary and to identify the type of evidence-based treatments and services that are needed to be successful on supervision, thereby reducing the risk of reoffending and increasing pro-social functioning and self-sufficiency.

The risk/needs assessment tool assigns weighted scores to each factor on the instrument in order to obtain an overall risk classification. Risk classification is assigned as high, medium, or low. As of June 30, 2023, the majority of individuals were classified as high risk (PCS 94%; MS 79%). There are ten risk factors on the assessment tool. Five of these factors carry the highest correlation of risk with subsequent new law violations. They include prior probation violations, substance use, age at first conviction, number of prior periods of probation supervision, and the number of prior felony convictions.

In practice, the DPO completes a risk/needs assessment on every client on their caseload and develops a comprehensive case management plan addressing criminogenic factors as well as treatment services and basic needs/support services. Approximately every six months, the DPO conducts a reassessment and updates the supervisory case management plan based on any changes in the risk level and/or in the identified needs for services.

In addition, the Reentry Team also assesses the individual's basic needs at the time of reentry into the community and provides clothing, hygiene kits, food vouchers, and bus passes as applicable and appropriate.

Graduated Interventions and Sanctions

The Postrelease Community Supervision Act of 2011 supports the use of evidence-based sanctions and programming, which includes a range of custodial and noncustodial responses to criminal or noncompliant activity to improve community safety. The use of graduated interventions and sanctions for both technical violations of supervision and subsequent new law violations ensure the sanctions are proportionate to the seriousness of the violation and hold the individual accountable; assert sufficient control and properly manage the risk that the individual presents to the community; and facilitate the individual's continued progress in changing behavior to achieve ongoing compliance, successful completion of supervision, and future law-abiding behavior.

DPOs have broad discretion and determine when to properly implement graduated interventions and sanctions and when to effectively utilize secure detention after prior interventions or sanctions have failed and/or when the safety of the individual, others, or the community are at risk. They consider a wide range of supervision options with the understanding that detention for technical violations does not always result in improved

outcomes or reduced recidivism¹. Programming and treatment options are as important to supervision as enforcement activities and it is understood that custodial sanctions manage risk well, but it does nothing to reduce the risk once an offender is released into the community².

Promoting swift, certain, and graduated responses to technical violations of supervision is an evidence-based, research-supported strategy that is both consistent and fair³. The objectives of graduated interventions and sanctions for both technical violations of supervision and subsequent new law violations are: make sanctions proportionate to the seriousness of the violation and to hold the offender accountable; assert sufficient control and properly manage the risk that the offender presents to the community; and facilitate the offender's continued progress in changing behavior to achieve ongoing compliance, successful completion of supervision, and future law-abiding behavior.

Flash incarceration is an intermediate sanction tool utilized by a DPO to arrest individuals for lesser new law violations and/or technical violations, such as positive drug tests, absconding, etc. The detention period of up to 10 days maximum is intended to deliver a swift and certain sanction while minimizing the impact on the individual's success in the community.

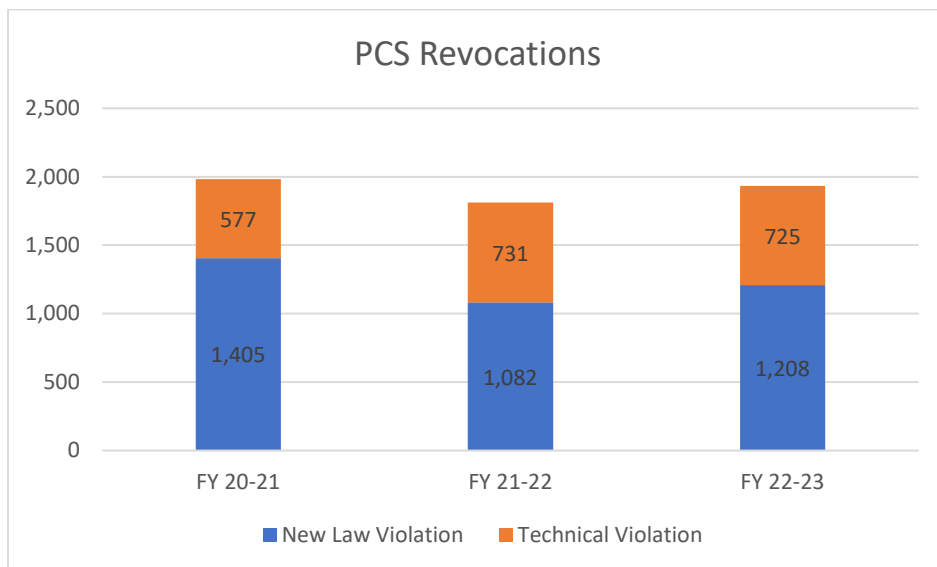
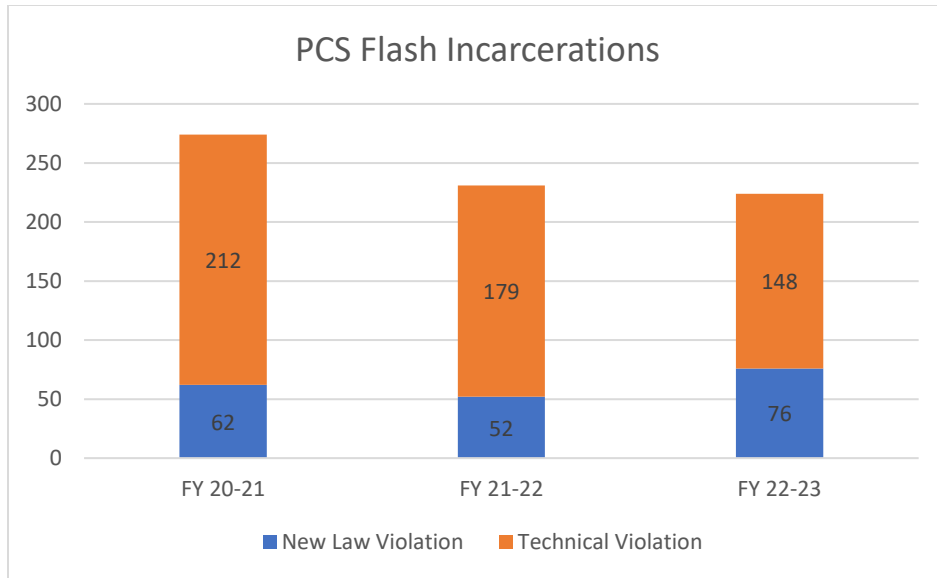
As of January 2017, flash incarceration can be utilized for the MS population if agreed upon at the time of sentencing via a Court Order. During FY 2022-23, there were 14 flash incarceration for the MS population (down from the 19 reported for FY 2021-22) and a total of 224 flash incarcerations for the PCS population, which was down 3% from the prior year's total of 231. Of the 224 flash incarcerations for FY 2022-23, 148 were for technical violations and 76 for new law violations.

PCS revocations increased from 1,813 in FY 2021-22 to 1,933 in FY 2022-23. The charts below summarize PCS flash incarcerations and revocations.

¹ Pew Center on States, Public Safety Performance Project (2012) Time Served: The High Cost, Low Return on Longer Prison Terms.

² Edward Latessa Ph.D. Keynote Address: What Works and What Doesn't Work in Reducing Recidivism at the CA State Association of Counties (CSAC), CA State Sheriffs Association (CSSA), and Chief Probation Officers of CA (CPOC) 4th Annual Conference on Public Safety Realignment, Sacramento, CA. January 22, 2015.

³ Taxman, Fayes et.al. (2004) Tools of the Trade: A Guide to Incorporating Science into Practice National Institute of Corrections US Department of Justice and Maryland department of Public Safety and Correctional Services.



Day Reporting Centers for Adults

Non-residential adult Day Reporting Centers (DRCs) deliver structured reentry services and comprehensive programming for individuals released to the community. The main objective is to increase self-sufficiency and promote behavior changes through the delivery of evidence-based rehabilitation proven to reduce recidivism. By reducing recidivism, DRCs may reduce pressure on jails and prisons while decreasing correctional costs.

The first DRC opened in the city of Santa Ana in July 2012 and provides a combination of intensive treatment and programming, on-site supervision, and immediate reporting of behavior to the assigned DPOs of the AB 109 clients, those on PCS and MS. In June

2015, DRC services became available to the formal probation (FP) supervision population. The Santa Ana DRC is a stand-alone facility and can service up to 140 clients.

The second DRC opened in the city of Westminster in September 2017 and can service up to 75 clients. It is co-located at the Probation Department's West County Field Services Office.

DRC participants go through a multi-phase program that potentially runs six to nine months. The program includes frequent reporting to the center where participants are placed on different treatment levels and training based on a risk and needs assessment tool. DRC staff monitor individuals closely with daily check-ins, ongoing drug and alcohol testing, and intensive case management. DRC programs are rooted in consistent delivery of programming, immediate response for rewards or sanctions, and other evidence-based principles proven to change criminal behavior. DRCs help individuals gain structure, learn stability, modify the way they think and behave, and develop new life skills.

There were 3,649 entrants served by the DRC through June 30, 2023. During FY 2022-23, 355 referrals resulted in 204 enrollments of which, 72% were classified as high risk. There were 209 total exits from the DRCs; 74 were satisfactory and 27 were for other reasons or considered "no fault."

DRC Services

All participants are assessed by a DRC case manager at entry, receive services based on their assessed risk/needs and are held accountable for their behaviors through specific measures in the chart below.

Services	Assessments/Accountability Measures
Development of a Behavior Change Plan	Orientation & Intake Assessment using LSI Risk Assessment
Life skills & Cognitive Behavioral Therapy (Moral Reconation Therapy)	Daily attendance, participation in individual and group counseling, progress reports & communication with assigned DPO
Substance Abuse Counseling	On-site random alcohol & drug testing, individual and group sessions, progress reports & communication with assigned DPO
Anger Management Counseling	Group sessions, attendance, periodic evaluation and communication with assigned DPO
Parenting & Family Skills Training	Group sessions, attendance, periodic evaluation and communication with assigned DPO, and family nights
Job Readiness & Employee Assistance	Assistance with job preparation and placement monitored by Education & Employment Coordinator
Education Services	Access to educational computer lab, assistance and monitoring by Education & Employment Coordinator
Community Connections	Getting Connected computer application, attendance at Community Connections meetings monitored by case manager & communication with assigned DPO
Restorative Justice Honors Group	Participation and attendance monitored by coordinator & certificate of completion
Reintegration & Aftercare	Aftercare case plan, weekly check-ins, and 1:1 meetings

In March 2020, the Santa Ana and Westminster DRCs closed for in-person services. All check-ins, counseling and treatment sessions were delivered to participants by telephone. The DRCs reopened in phases in June 2020 to slowly reintroduce in-person services while keeping clients and staff safe and healthy.

Phase 1 of reopening began in June 2020. Clients only showed up in person for intake and assessment while all other services were delivered by telephone. Phase 2 started in April 2021 where clients were allowed to meet one-on-one with their case manager in-person. In Phase 3 (beginning May 2021), the DRCs opened group sessions to in-person attendance. These groups were smaller in number to comply with social distancing protocols. As of May 2022, both DRCs were in Phase 4 of reopening. In Phase 4, all breathalyzer/urinalysis services and in-person check-ins resumed. Both sites are now fully open for in-person services but still provide virtual services for selected individuals.

SHERIFF-CORONER DEPARTMENT

The Orange County Sheriff-Coroner’s Department (OCSD) is a large multi-faceted law enforcement agency comprised of five Command areas including the Custody Operations and Court Services. This Command includes the management of the Orange County jail system that processes over 41,000 bookings in FY 2022-23.

OCSD operates four jail facilities in the County with a total bed capacity of 6,030 beds as follows:

- Intake Release Center (IRC) with a capacity of 849 beds.
- Theo Lacy Facility with a capacity of 3,386 beds.
- Central Men's Jail with a capacity of 1,413 beds.
- Central Women's Jail with a capacity of 382 beds.
- Operations at James A. Musick Facility have been suspended pending construction of the facility.

In 2012, the State, by way of AB 900, created a competitive grant source for expansion and/or construction of new jail facilities. OCSD was awarded a \$100 million grant to fund a 512-bed stand-alone expansion project at the James A. Musick Facility. The project will include site improvements to support the construction of inmate housing and spaces for administration, intake and reception, visitation, kitchen services, medical/dental services, employee locker rooms and break rooms, hardscaping, landscaping, security systems, and utilities. OCSD also received an \$80 million grant via SB 1022 to fund for an additional 384 housing and rehabilitation beds and a warehouse/maintenance building. These two projects are scheduled to reach substantial completion by August 2023; however construction delays might push date to January 2024.

County Jail Population

Approximately 30% of the individuals housed in the County jail facilities are serving out their sentence while 70% are awaiting trial or sanctioned. Of those sentenced, an average of 76% were convicted of a felony and 24% of a misdemeanor crime.

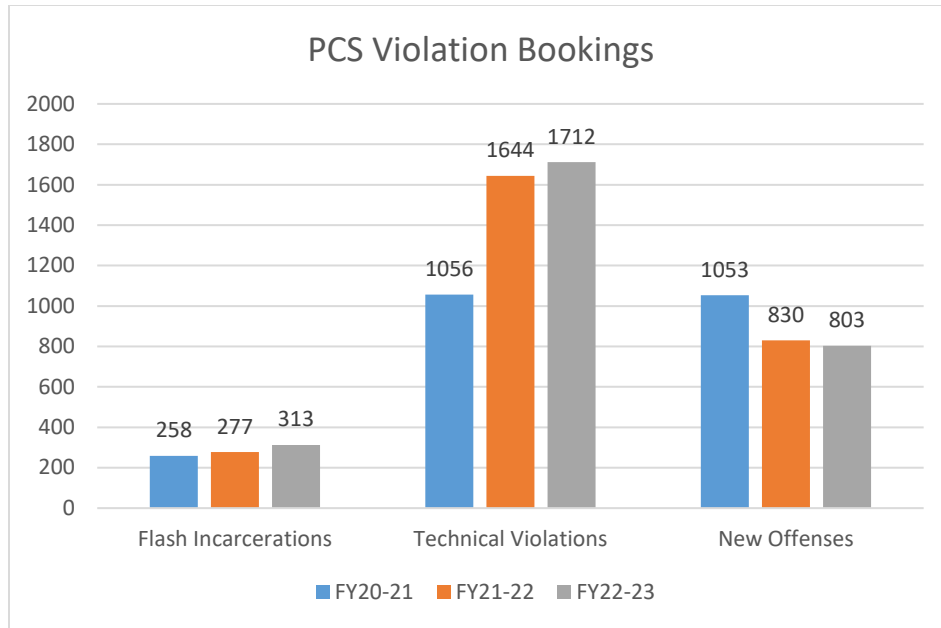
The inmate population in the County's four jails that pertain to the 2011 Public Safety Realignment includes individuals completing their sentence awaiting supervision (local custody/MS) per PC 1170(h), PCS individuals serving less than 180 days, parole violators serving less than 180 days, and individuals sanctioned with a flash incarceration serving 10 days or less.

Local Custody: MS Population

During FY 2022-23, there were approximately 1,801 MS individuals booked with an average stay of 178 days and an additional 1,100 new commitments sentenced to serve their sentences in the Orange County Jail system. This represents the largest portion of OCSD's realigned population and has remained consistent.

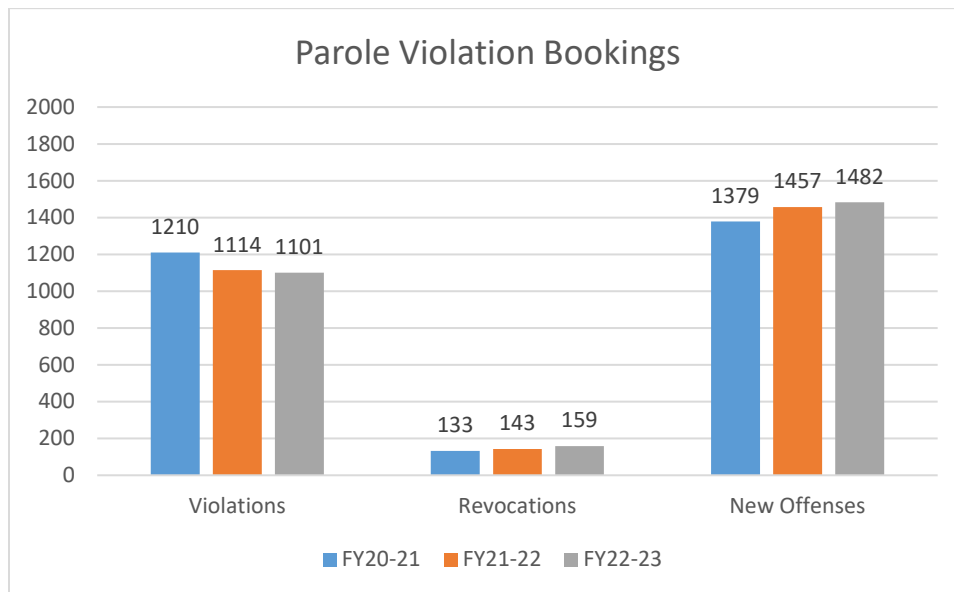
PCS Population

During the same reporting period, an estimated 2,828 PCS violators were booked with an average length of stay of 59 days, a 3% increase (77 violators) from FY 2021-22. Of this amount, 313 were flash incarcerations, 1,712 were revocations for technical violations, and 803 were revocations for a new charge.



Parole Violations

There were 2,742 bookings related to parole violations reported in FY 2022-23, a increase of 28 (1%) from prior year. Of this amount, 1,101 were for violations, 159 were for revocations, and another 1,482 were for new offenses.



In-Custody Programs

Inmate Classes

OCSD offers a host of classes and programs for inmates taught by Inmate Services staff, other County agencies, community and religious organizations, and educational and vocational partners.

Educational	Vocational	Substance Abuse	Life Skills	Reentry
<ul style="list-style-type: none"> •Academic Skills •Attitudes for Success •GED/HiSet •Money Matters •WIN Tutoring •High School Diploma Program •English as a Second Language 	<ul style="list-style-type: none"> •Introduction to Software Applications •Institutional Food Preparation •Virtual Reality Headset 	<ul style="list-style-type: none"> •AA Study Group •Alcoholics Anonymous Panels •Narcotics Anonymous Panels •Substance Abuse Class 	<ul style="list-style-type: none"> •Anger Management •Back on Track •Bible Study Discipling •Faith Based Parenting •Finding the Way •Healthy Families •Kinship 101 •Malachi Men •Personal Empowerment Program •Positive Parenting •Seeking Safety •TUMI •Women of Purpose •Workforce Preparation 	<ul style="list-style-type: none"> •College Counseling •Great Escape •Probation 101 •Assessments •Discharge Planning •Mentoring Programs •Medi-Cal Enrollment

In addition, inmates have access to religious services, counseling, and bible study as well as mentoring for reentry.

Intensive Therapeutic Programming:

All-In Program

This is an intensive program for 15 selected male or female inmates for an 8-week course that addresses all aspects of the person from parenting and coping skills to workforce preparation. This is a multi-partner collaboration led by OCSD that also includes Probation, the Public Defender's Office, and a community provider.

Transitional Age Youth (TAY) Program

TAY is an intensive open-ended program where participants meet Monday through Friday, twice a day to engage in groups aimed at increasing social skills, problem-solving skills, and safe and healthy coping skills. The target population for this program is high risk to reoffend inmates who are between the ages of 18-25.

Housing Unit for Military Veterans HUMV

Open ended cognitive based curriculum designed specifically for veterans housed in the jail. Individual case management, guest speakers and post release services are also key components to this program.

Pride Program

Provides in-custody programming toGBTQI+ population including substance abuse classes, group therapy, educational services, discharge planning, linkage to community providers, and other services specific to theGBTQI+ population.

Fire Camp Program

OCSD has an established Memorandum of Understanding (MOU) with the California Department of Corrections and Rehabilitation (CDCR) to utilize PC 1170(h) sentenced inmates for state fire crews. Inmates who volunteer for the program undergo extensive training and screening. Successful candidates are subsequently selected to serve their sentence at a designated fire camp and may be considered for hire by the state as employees afterward. OCSD uses this option sparingly, primarily due to cost; however, it continues to be an option.

Community Work Program

OCSD has used a combination of methods to manage the increase in the inmate population. One notable change has been the expansion of inmates assigned to the Community Work Program (CWP) to include PC 1170(h) offenders. The CWP is an alternative to incarceration that allows sentenced PC 1170(h) offenders to serve their time by working on municipal work crews often providing janitorial or landscaping services at County buildings and parks. The offender is allowed to live at home but must report to a predetermined worksite location as part of a crew. Every workday completed is considered one day of service towards the offender's sentence. Failure to follow the stringent rules (curfew, avoiding substance abuse, etc.) results in a return to custody where he/she will serve the remainder of his/her sentence.

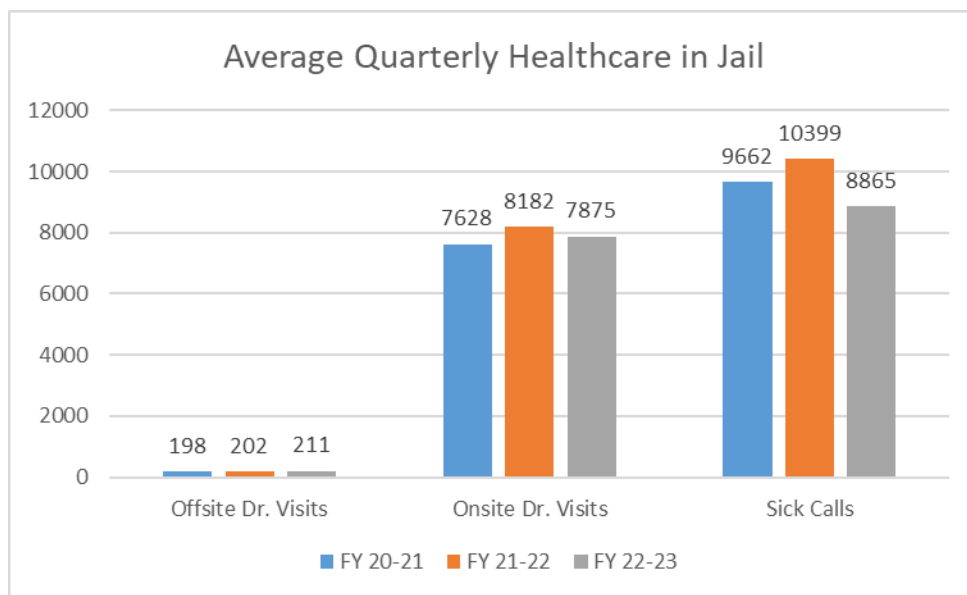
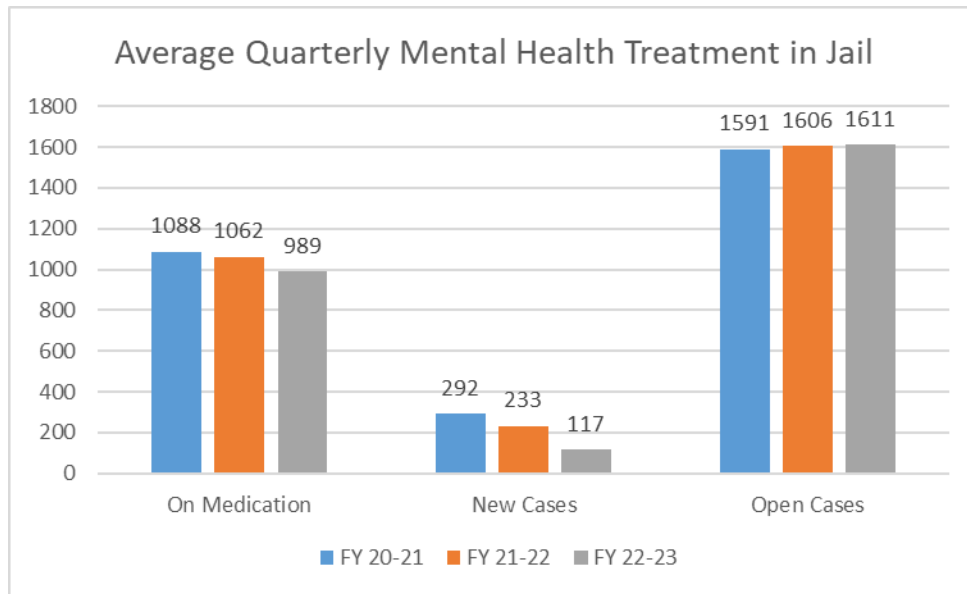
OCSD screens inmates for suitability and has the discretion to add or remove the offender from the program at any time. OCSD has dedicated resources to conduct welfare and compliance checks on PC 1170(h) inmates serving time on the CWP. This includes work site and home inspection checks. Since the inception of Prop 47, the number of eligible offenders has declined dramatically. Nevertheless, the program is still relevant and continues to be a successful population management tool as well as an opportunity for offenders to assimilate into the community while under strict supervision.

CORRECTIONAL HEALTH SERVICES

The Orange County Health Care Agency's (HCA) Correctional Health Services (CHS) Division provides the medical, dental, mental health and substance use treatments to

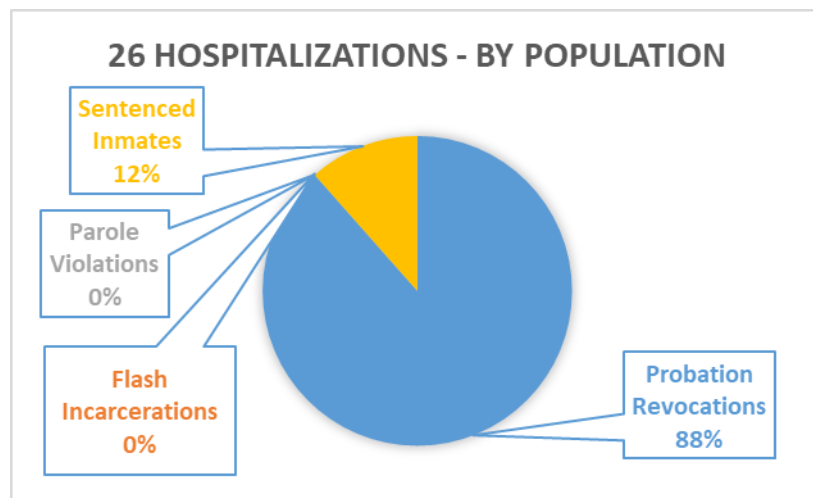
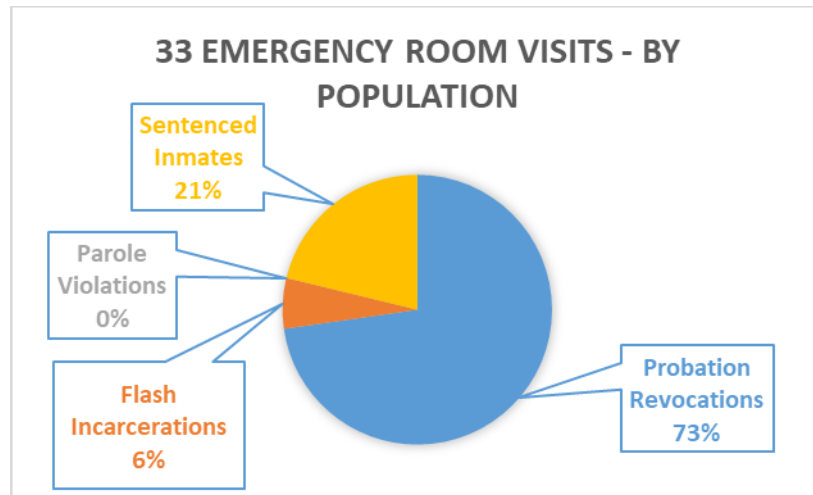
those individuals incarcerated at a County jail facility. Services are performed at a community standard of care on a 24-hour, 7-days a week basis.

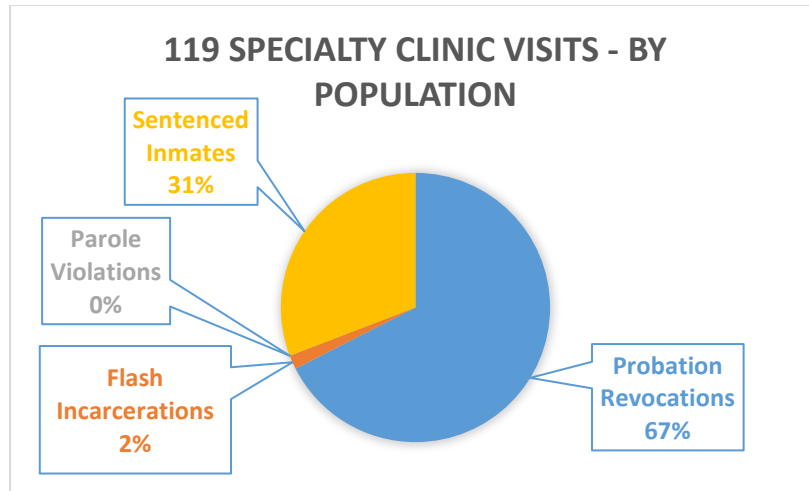
Upon intake into the County jail facility, CHS triages and screens the individuals to determine their medical, mental health, and dental needs and identify subsequent treatment and medication plans. In FY 2022-23, for all in-custody patients there was an average of 1,611 open cases for mental health treatments and an average of 351 new cases added each quarter. In addition, there were approximately 106,379 sick calls, 94,496 doctor visits in-custody, and just under 2,535 offsite doctor visits for the year.



All primary care physician services are provided within the jail; however, when an inmate needs specialty services, they are transported to specialty medical clinics off-site. Currently, there are over 30 specialty clinic services available.

For the population in the County jails per the AB 109 legislation, during the same reporting period, there were 33 emergency room visits, 26 hospitalizations, and 119 visits to specialty clinics, such as for orthopedics, radiology, dialysis, or cardiology.





ORANGE COUNTY DISTRICT ATTORNEY'S OFFICE

The Orange County District Attorney's (OCDA) Office is the chief prosecutor for the County and has the responsibility to enhance public safety and welfare and create a sense of security in the community through the vigorous enforcement of criminal and civil law. OCDA is responsible for the prosecution of PCS and MS violators as well as parole violators.

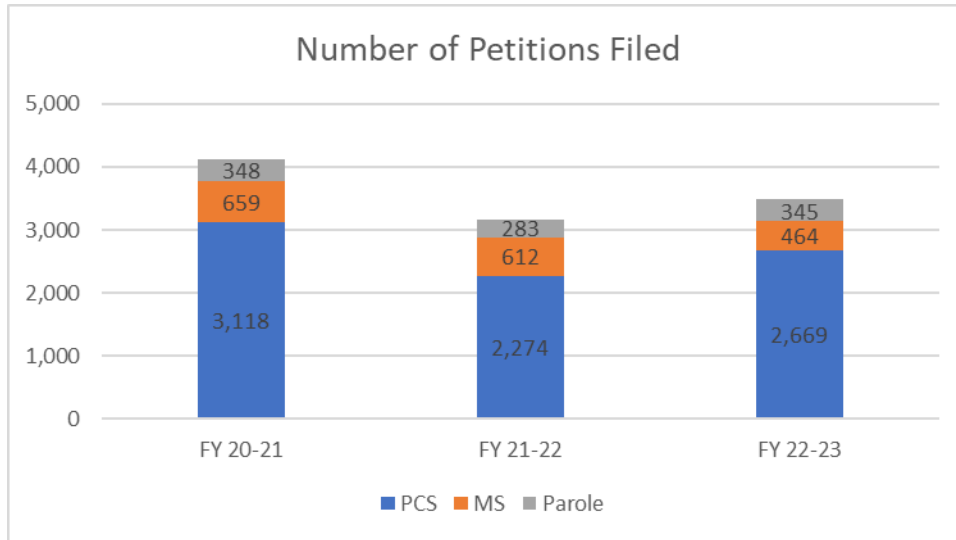
Within the department, there are two dedicated attorney units that review new cases, PCS, MS and Parole violations and make assessments in terms of program eligibility and/or case dispositions. The AB109 court attorneys and the Recidivism Reduction Unit of the OCDA's office are fully engaged in to represent the interests of the public in court. The attorneys are highly trained in working with the AB109 population and understand the needs and challenges presented in these cases. They strive to strike a proper balance between treatment/rehabilitation and accountability in terms of the ultimate disposition in a case. When cases do not resolve with an agreed upon disposition, prosecutors on these teams will participate in live hearings, often presenting witnesses and documentary evidence to prove the new law or other PCS, MS or parole violation. OCDA works with all stakeholders, including Probation, CDCR and local law enforcement entities to ensure that the laws of this state are being enforced, offenders are complying with the terms and conditions of their release and ultimately, that the community is protected. OCDA also works collaboratively with the Orange County Public Defender's Office to ensure that our collaborative courts are successful and those admitted into those programs and supported to the fullest extent.

The OCDA Mental Health and Recidivism Reduction Unit (MH/RRU) is responsible for prosecuting select cases impacted by some of the most pressing issues in society, such as mental illness, homelessness, addiction and trauma stemming from military service. Through its participation in various collaborative or "problem solving" courts, MH/RRU seeks to facilitate an individual's chance for success through coordinated services and

support, all while prioritizing public safety. Participants are served through a collaborative effort between the court, the offices of the District Attorney and Public Defender, Probation, the Health Care Agency and its contracted treatment providers, and Veteran's Affairs. Collaborative Courts are typically 18-month to 2-year programs that involve frequent court appearances, regular drug and alcohol testing, meetings with the support teams and direct access to specialized services. Such services include mental health and psychiatric care, drug and alcohol abuse counseling, family counseling, residential treatment if appropriate, medical care, employment counseling, job skills and training, and assistance with obtaining disability benefits and housing. An individual on a current grant of AB 109 supervision who is charged with a new criminal offense may be considered for a collaborative court for the new violation if appropriate. Collaborative Courts include:

- "Whatever it Takes" Court is for criminal offenders who are high risk for criminal re-offense with higher needs, and are unhoused or at risk for homelessness. Participants have been diagnosed with a chronic or persistent illness and substance use disorder.
- Opportunity Court and Recovery Court are similar in that they are designed for criminal offenders who are medium to high risk for re-offense, and who typically have housing. Participants have been diagnosed with a chronic or persistent illness. They may also have co-occurring substance abuse issues.
- Assisted Intervention Court is a program for criminal offenders who suffer from a chronic or persistent mental health disorder but who are at lower risk for criminal re-offense. The program was created to meet the mental health needs of individuals who, without intervention, traditionally would remain in custody for weeks or months without receiving any treatment.
- Drug Court provides an alternative to traditional criminal justice prosecution for drug-related offenses. Participants include severely addicted offenders who are at high risk for re-offending and most in need of intensive treatment and supportive services.
- Modeled after Drug Court, DUI Court seeks to address crimes where addiction is at the foundation. DUI Court admits repeat DUI offenders who are ready for change with the goal of helping them achieve sobriety while simultaneously reducing the risk of danger to the public.
- Veterans Treatment Court provides support services and therapeutic alternatives to jail or prison for military veterans convicted of a criminal offense who can show that they are struggling with addiction, sexual trauma, Post Traumatic Stress Disorder ("PTSD") or other serious mental illness or psychological problem.

In FY 2022-23, OCDA prosecuted over 2,669 petitions for PCS population, 464 for MS population and another 345 for parole violations.



The 3,478 petitions filed in FY 2022-23 pertained to a total of 1,408 different defendants. Of the 1,408 defendants, 1,159 (82%) were repeat offenders, having received at least one prior petition: 600 defendants (42%) had at least five prior petitions and 279 (20%) had 10 or more prior petition.

# of Prior Petitions	0	1	2	3	4	5	6-10	11-15	15+
# Defendants the Year	249	155	130	109	94	71	321	143	136

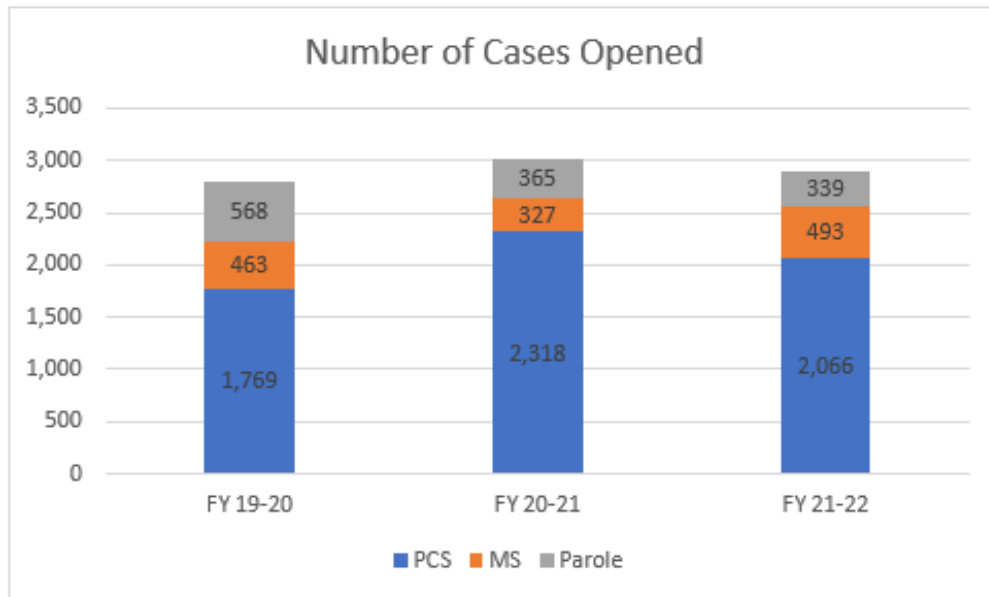
Additionally, in FY 2022-23, OCDA filed 6,288 new criminal cases against a total of 3,050 different defendants who are currently or previously on AB 109 supervision. Narcotic sales, auto theft, and weapon charges remain the most common felony charges by an AB 109 defendant.

ORANGE COUNTY PUBLIC DEFENDER'S OFFICE

The Orange County Public Defender's (OCPD) Office provides high-quality representation to individuals who are unable to afford a private attorney and who are in need of legal representation in criminal or mental health cases. OCPD provides legal services to indigent adults accused of felony or misdemeanor criminal violations. These legal services include keeping clients informed of the status of their cases, providing legal representation at contested and non-contested hearings, and providing reentry services to incarcerated and recently released clients to assist them in their successful completion of probation and reintegration back into the community.

The 2011 Public Safety Realignment has steadily increased OCPD's workload. While the pandemic did cause a slight decrease in the number of cases filed in previous years, in FY 2022-2023, the number of cases has remained steady. OCPD had nearly 2,700 cases

opened between the MS, PCS, and parole populations and made over 5,000 court appearances.



In response to the increased workload presented by the 2011 Realignment legislation, OCPD has expanded and diversified the types of services provided to clients. OCPD continues to emphasize the development and presentation of individualized, alternative sentencing plans to the court as potential options to incarceration. For incarcerated clients OCPD is actively involved in ensuring the client's successful reintegration back into the community and collaborates with other County partners on a weekly basis at Probation's Day Reporting Centers. OCPD assists in the coordination of services with the Probation Department, Health Care Agency, California's Employment Development Department, and other community-based partners on behalf of the clients.

In addition, OCPD also continues to maximize relief for clients by making the most of the September 2017 Legislation, AB 1115, which expanded expungement relief for OCPD's clients. The statute permits clients previously sentenced to state prison to receive an expungement if their felony would have qualified for sentencing to county jail pursuant to subdivision (h) of Penal Code Section 1170 under the 2011 Realignment Legislation. The expungement process permits these individuals to have their guilty convictions withdrawn and dismissed, which releases them from penalties and disabilities that would otherwise prevent them from acquiring employment.

OCPD attorneys and paralegals collaborate with community organizations and community supervision to provide on-site legal advice on how to take advantage of motions and petitions offered within our New Leaf Program. These petitions include: Penal Code 1203.4 motions requesting felony and misdemeanor convictions be set aside and dismissed from the client's record; petitions for Certification of Rehabilitation requesting a full pardon from the Governor; petitions to dismiss and seal convictions related to

loitering with the intent to commit prostitution, pursuant to Senate Bill 357; and petitions to terminate sex offender registration, pursuant to Senate Bill 384.

OCPD attorneys and paralegals provide weekly on-site assistance at Project Kinship, and paralegals provide assistance three times a month at different parole and probation day reporting centers within the county. OCPD expects the number of expungement petitions filed to continue to increase while also continuing efforts to obtain post-conviction relief for clients. OCPD has filed thousands of petitions for resentencing or applications for reclassification, allowing low-level, non-violent offenders to get a second chance, and saving taxpayers millions of dollars.

Reentry Services for Clients

OCPD collaborates with the County's public protection partners, Probation Department, Sheriff-Coroner's Department, the California Department of Corrections and Rehabilitation, Health Care Agency, and the District Attorney's Office, to provide coordinated reentry services for OCPD's clients.

OCPD employs in-house Recidivism Reduction Advisors (RRA) trained in social work to support clients. RRAs work with clients who may need more intensive case management in order to successfully navigate reentry services. Since the commencement of the pandemic, the need for more intensive case management has increased. In response, RRAs have increased services to meet the needs of clients. RRAs collaborate with other county partners to meet the specific needs of individual clients increasing their opportunity for success.

OCPD has staff dedicated to assist client reentry into the community by assisting with the following:

- Completing a comprehensive interview to obtain a life history and ensuring client's needs are accurately assessed.
- Helping obtain government documents, including birth certificates, driver's licenses, consular documents for immigration purposes, reduced-fee identity cards, passports, social security cards, and more.
- Conducting daily visits to the jail, helping in-custody client's transition into the community by discussing housing needs, employment opportunities, as well as substance abuse and mental health needs. Staff also visit drug treatment programs to provide monthly on-site services.
- Ensuring clients have proper medical care via SSI/SSDI applications.
- Working with "Project Kinship," a non-profit organization helping to ensure Medi-Cal, General Relief, and food stamp benefits for in-custody clients. Project Kinship representatives accompany staff on client visits and provide guidance in submitting Medi-Cal applications and other forms of assistance to clients prior to their release from custody.

- Obtaining food stamps, Cash Aid, Cal-Works, Medi-Cal, and bus passes for clients.
- Coordinating drug treatment and rehabilitation programs, mental health resources, and dental and vision benefits.
- Referring clients to specialized services such as Legal Aid, Child Support, and Family Law.
- Helping clients enroll in programs for family reunification services.
- Collaborating with the Division of Adult Parole Operations of the California Department of Corrections and Rehabilitation. Dedicated staff also attend monthly meetings held by Parole for recently released parolees.
- Locating and assisting OCPD's clients with housing.
- Helping clients locate educational opportunities, professional licensing or vocational schools.
- Locating transitional housing, treatment, and military records for veteran clients.
- Providing clothing and hygiene kits.
- Attending resource fairs and networking with other providers to ensure that clients have the most current, up-to-date program and resource access.

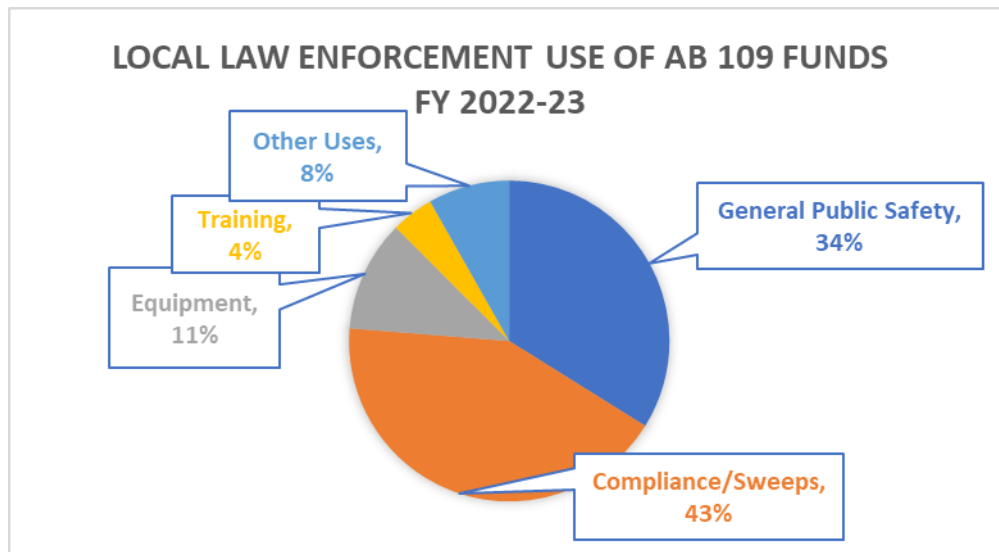
OCPD provides referrals to various resources that enable clients to obtain assistance for their basic needs including food, clothing, and shelter. Housing, particularly transitional housing, and employment, continue to be the biggest obstacles for client success on supervision.

LOCAL LAW ENFORCEMENT AGENCIES

Local Law Enforcement (LLE) agencies continue to progress to meet the public safety needs of the community. As each city's needs vary, the funding for the LLE's is allocated per direction of the OCCCP and used to maintain public safety. The following highlights the investments made in the local communities:

- Staffing costs for PCS-related operations, such as compliance checks, sweeps, warrant services, and surveillance operations. (42%)
- Front line law enforcement costs, including staffing, operational costs, and general overtime expenses involved with public safety enforcement and investigations. (34%)
- Purchases of equipment to enhance or maintain public safety, such as an armored rescue vehicle, surveillance equipment, or protective gear and entry tools. (11%)
- Training for peace officers on advanced criminal activities, such as gang activity, and for public safety officials, including law enforcement personnel, specific for the Homeless Liaison Officer program. (4%)
- Costs associated with specialized programs such as: (8%)

- Mapping/crime analysis software to systematically monitor activities of potential offenders and dangers or hazards posed by AB 109 early-released individuals.
- Automated License Plate Reader (ALPR) program.
- Dedicated staff for crime analysis or monitoring AB 109 offenders.
- Services to prevent harm to self or others, homelessness, and preventable incarceration or institutionalization.



MENTAL HEALTH AND RECOVERY SERVICES

The Orange County Health Care Agency (HCA) Mental Health and Recovery Services (MHRS) division provides mental health (MH) and substance use disorder (SUD) services for the County and strives to provide the right type of treatment, at the right place, by the right person(s)/program(s), to help individuals achieve and maintain the highest quality of health and wellness.

As such, MHRS developed a continuum of treatment services comprised of many programs, both County-operated and contracted. These programs are available to residents in Orange County, including AB 109 individuals identified with untreated MH and/or SUD. Access to services is facilitated by the use of AB 109 Screeners located in Anaheim, Santa Ana, Laguna Hills, and Westminster Probation offices.

Upon release, individuals meeting criteria for AB 109 meet with a DPO. Individuals with behavioral health issues are referred to a BHS AB 109 Screener who assesses and identifies the most appropriate level of care required and facilitates linkage. Behavioral health programs are voluntary and designed to provide community services and support to address behavioral health issues and reduce recidivism. AB 109 clients have a wide variety of services available to them, based on their individual needs. Services include behavioral health assessments, outpatient treatment (e.g., medications, individual/group

therapy), case management, crisis intervention, clinically managed withdrawal management, narcotic replacement therapy, residential treatment, recovery residences, medication assisted treatment, referral, and linkage to community resources and Full-Service Partnership (FSP). AB 109 clients with serious mental illness are primarily treated at the AB 109 Adult and Older Adult Mental Health Santa Ana Clinic but can be seen at other mental health clinic locations. AB 109 clients with mild/moderate mental health issues needing bridge psychiatric services are referred to a psychiatrist at the AB 109 Santa Ana Clinic for medication evaluation and treatment.

Current Services Provided

During FY 2022-23, there were 1,048 referrals received from the Probation Department. Of this total, HCA AB 109 Screeners were able to complete 541 assessments. The table below summarizes the number of behavioral health referrals that AB 109 Screeners made and the number of admissions during same reporting period.

Behavioral Health Referral and Admission FY 2022-23			
Services	Referral	Admission	Percentage Admitted⁴
Outpatient SUD Treatment	271	187	69%
Residential SUD Treatment	107	39	36%
Outpatient Mental Health	11	0	11%
Recovery Residences	43	28	65%
Clinically Managed Withdrawal Management	38	27	71%
Full-Service Partnership	31	20	65%
Narcotic Treatment Program/ Medication-Assisted Treatment	67	24	36%
Bridge Psychiatric Services	0	0	0%

During FY 2022-23, AB 109 Screeners remained available onsite at Probation offices to follow up with referrals and coordinate services. Outreach and screening services were provided both telephonically and in person as needed. Staffing remained a challenge during this fiscal year due to a number of AB 109 Screener vacancies. MHRS actively worked to fill the positions as quickly as possible. To date, all four AB 109 Screener positions have been filled.

⁴ Percentages admitted are based on number of referrals made and admissions during the specified timeframe.

SUD Program: Updates and Outcomes

During FY 2022-23, HCA continued to utilize Drug Medi-Cal Organized Delivery System (DMC-ODS) to provide a continuum of care approach for clients needing SUD treatment services. This approach allows clients with Medi-Cal to access services within the plan in various levels of care as determined in their current assessment based on the American Society of Addition Medicine (ASAM). This includes SUD residential, withdrawal management and outpatient treatment services. With DMC-ODS, clients are able to move through the system of care with coordination to achieve sustainable recovery.

Under DMC-ODS, clients with insurance or ability to pay are referred to programs that accept those types of payments. All clients with Medi-Cal are referred to Medi-Cal approved providers. HCA recognizes that there are AB 109 clients who do not qualify for Medi-Cal. Those individuals are referred to one of the three County-operated SUD outpatient clinics.

During FY 2022-23, HCA contracted with several new contract providers, expanding to a total of six SUD outpatient contracted providers, with a total of 10 locations within Orange County. These providers were Genesis New Beginning, Phoenix House, Pacific Educational Services (PES), The Teen Project, Twin Town (three locations), and Wel-Mor Psychology Group (three locations), providing outpatient treatment and recovery services to AB 109 clients with Medi-Cal. In combination with their current outpatient services, PES also began providing Medication-Assisted Treatment (MAT) services in 2021. Additionally, there were Narcotic Treatment Programs (NTPs) that provided MAT services for clients with an opioid disorder. The two NTP providers were Western Pacific with locations in Costa Mesa, Mission Viejo, Stanton and Fullerton, and Recovery Solutions with one location in Santa Ana.

Since DMC-ODS implementation, HCA has been able to identify gaps in SUD services. These gaps have been addressed by developing new programs to ensure clients are linked to services without interruptions and ensuring that providers are co-occurring capable. The SUD Peer Mentoring Program continued to be available and accessible to adult and adolescent clients receiving SUD services from SUD County Clinics or SUD Contract Providers. Since implementation, peers have provided additional support to clients with system navigation (e.g., moving through levels of care), referral and linkage to supportive services, and community reintegration. The In-Custody SUD Treatment program, implemented in July 2020, provides SUD services to eligible clients while incarcerated. Clients referred to this program are provided with in-custody SUD treatment (i.e., assessment, individual and group counseling, treatment planning, etc.), a post-release continuing care component and case management services. This program assists in getting clients linked to appropriate treatment (i.e., SUD outpatient and residential services and/or mental health services) upon discharge from jail in hopes to increase overall linkage and improve continuity of care. During FY2022-23, these services were

expanded to serve women who are incarcerated, in addition to the men already receiving services.

HCA continued to collaborate with Hazelden Betty Ford Foundation this fiscal year for Project Vista, which is a SUD Training Curriculum offered to both SUD County and Contract Providers. The training curriculum will provide federally recognized, evidence-based best practice trainings and "Train-the-Trainer" curriculum and resources. The contract will provide a series of trainings, consultations, workforce development, community engagement and activation events designed to prepare the workforce for actively engaging in and supporting opioid interventions and prevention. This contract also has an overall goal in the development, planning and preparation for community education, outreach, and distribution of Naloxone.

HCA continued to maintain a centralized process for assessment and authorization of residential treatment through the Authorization for Residential Treatment (ART) Team. This team is responsible for providing assessment, authorization, and referral to residential treatment. The team works in collaboration with SUD outpatient and residential providers to ensure that clients are placed in a timely manner when residential beds are available and placed on a placement list when there are no beds available. This team is able to provide services and place clients in residential treatment for Medi-Cal and uninsured clients. Clients requesting outpatient SUD services, such as Intensive Outpatient (IOT), Outpatient Drug Free (ODF), Recovery Services (RS), etc., can be directed to contact OC Links, Beneficiary Access Line (BAL) or walk into any of the County SUD and MH Clinics for an appointment for assessment. This process allows the County to be able to manage the residential placement list, when applicable, and refer clients to the first available residential provider timely.

During FY 2022-23, HCA has continued to solicit providers to provide withdrawal management and residential treatment. There are currently 7 providers that provide residential treatment to adults. There are 3 providers that provide clinically managed withdrawal management services. An occupancy of up to 182 residential treatment beds were available. For withdrawal management, up to 38 beds were available.

During FY 2022-23, HCA contracted with six providers to provide recovery residence services, including Clean Path Recovery, Roque Center, Step House Recovery, The Villa, and Grandma's House of Hope. The Teen Project has become the newest recovery residence provider to offer housing to women and women with children. HCA now has two providers, Teen Project and Clean Path, that offer perinatal recovery residence housing. Recovery residences provide excellent opportunities for clients to continue their recovery through outpatient services, develop healthy socialization, secure employment, and save money to move out.

The table below shows the treatment completion rates for SUD residential treatment, detox/withdrawal management and outpatient (County and contracted) treatment during FY 2022-23.

SUD Treatment Completion Rates⁵			
FY 2022-23			
	Discharges	Completed Treatment Goals	Completion Rate
Residential Treatment	23	15	65%
Withdrawal Management	26	3	12%
Outpatient Treatment	112	10	9%

Life Functioning Improvements

The table below summarizes the responses received from AB 109 clients (n=178) when asked about their engagement in several life functioning outcomes during FY 2022-23. Overall, AB 109 SUD showed a 55% reduction in number of client arrests, 57% reduction in number of days incarcerated, and 52% reduction in serious family conflict. There was an overall increase of 87% in the use of recovery networks.

Life Functioning Outcomes of AB 109 SUD Clients⁶				
FY 2022-23				
		Outpatient Treatment % Change	Residential Treatment % Change	Overall % Change
Arrested (Once or More)	# Clients	-72%	-38%	-55%
	Average # arrests	-12%	-31%	-24%
Incarcerated	# Clients	-73%	-48%	-57%
	Average # days	-27%	-13%	-13%
Employed (Full or Part Time)	# Clients	-67%	-1%	-58%
Alcohol Abstinent	# Clients	-57%	13%	-30%
Drug Use Abstinent	# Clients	-57%	-11%	-38%
Serious Family Conflict	# Clients	-68%	-29%	-52%
Participated in Recovery Network	# Clients	-70%	131%	87%

⁵ Source: CalOMS and the HCA IRIS for AB 109 Special Cohort FY 2021-22.

⁶ Source: CalOMS database from the HCA.

During FY 2022-23, 48% of clients who were homeless at intake gained independent or dependent living upon discharge from treatment.



50 people were homeless at intake

Of those, at discharge...
18.0% independent living
30.0% dependent living
42.0% homeless
10.0% unable to locate



26 people were in dependent living at intake

Of those, at discharge...
15.4% independent living
46.2% dependent living
0.0% homeless
38.5% unable to locate



102 people were in independent living at intake

Of those, at discharge...
41.2% independent living
9.8% dependent living
2.0% homeless
47.1% unable to locate

Mental Health Program: Updates and Outcomes

County-Operated Adult and Older Adult Clinic

AB 109 clients with serious mental illness who need outpatient services are linked to the County-operated AB 109 outpatient clinic in Santa Ana for mental health services, including assessment, case management, crisis services, counseling and therapy, and medication support. The AB 109 Santa Ana treatment team continued to explore and implement different clinical tools to improve engagement and client care. Treatment team meetings have continued to ensure consistent communication and care coordination for AB 109 clients.

The data listed below are life functioning outcomes for 20 AB 109 clients who received mental health services at the AB 109 Santa Ana clinic during FY 2022-23. There were significant reductions in incarceration days (98% decrease) and psychiatric hospitalization days (100% decrease). Fewer AB 109 MH clients experienced homelessness while enrolled in the program with fewer number of days spent in homelessness (87% decrease). Engagement in a structured role improved with treatment, with a 166% increase in days spent in a vocational or educational activity.

Life Functioning Outcomes of MH Clients – AB 109 Santa Ana Clinic ⁷				
Outcomes		12 Months Prior to Enrollment	FY 2022-23	% Change
Psychiatric Hospitalizations	# Clients	1	0	-100%
	# Days	1	0	-100%
Incarcerations	# Clients	13	1	-92%

⁷ Source: HCA IRIS.

	# Days	2,288	52	-98%
Homelessness	# Clients	5	2	-60%
	# Days	894	115	-87%
Structured Role (Vocational or Educational)	# Clients	3	6	100%
	# Days	418	1,113	166%

County-Contracted Full Service Partnership Program: Opportunity Knocks

Opportunity Knocks is a Full-Service Partnership (FSP) program that services AB 109 clients who need intensive services by working with the Orange County jails, community outreach team and Probation to provide a wide range of recovery and rehabilitation-focused services to adults who have a serious mental illness and are homeless or at risk of homelessness, and who are involved in the criminal justice system. The program provides intensive outpatient services including assessments; rehabilitation services; case management; counseling and therapy; substance use counseling and groups; 24/7 on-call response; medication support; medication education groups; skill-developing groups; educational and vocational support; housing support; benefits acquisition; linkage and support to meet with primary care providers, dentists and medical specialists as needed; and linkage to other community-based resources as necessary. These services are provided in an effort to help reduce the severity of their mental illness, increase management of their symptoms, and work towards recovery and successful reintegration into society.

The program has a multi-disciplinary team which includes a psychiatrist, a psychiatric nurse practitioner, licensed psychiatric technician/licensed vocational nurse, therapists, substance use counselor, personal service coordinators, outreach & engagement specialists, education & employment specialist, benefits specialist, housing specialist, and peer support staff. Opportunity Knocks FSP follows the Assertive Community Treatment (ACT) model of providing comprehensive, community-based interventions and linguistically and culturally competent services that promote well-being and resilience in those living with serious mental illness.

This fiscal year, in addition to continuing to coordinate with HCA AB 109 screeners, probation officers, and jail and case managers to increase enrollment in the program, Opportunity Knocks focused on supporting members in completing AB 109 probation and sustaining the progress that they have made while enrolled in AB 109. The program coordinated with and worked conjointly with residential treatment services, outpatient substance use disorder treatment programs, and other service providers (e.g., sober living facilities, 12-step programs, detox centers) in order to address additional co-occurring needs of our AB 109 clients.

The data listed below are life functioning outcomes for 26 AB 109 clients who participated in the Opportunity Knocks FSP program during FY 2021-22. Over the course of treatment, there were significant reductions in psychiatric hospitalization days (78% decrease).

Incarceration days decreased by 21%. Fewer AB 109 FSP clients experienced homelessness while enrolled in the program with significantly less days spent in homelessness (96% decrease). While the number of clients in a structured role decreased, the number of days that clients engaged in a structured role remained similar to the twelve months prior to enrollment. The decrease in clients participating in a structured role is a result of the focus the clients had on their mental health, housing, and reduced recidivism. While most clients were not engaged in a structured role during this FY, they are working to strengthen their mental health recovery and will be utilizing those positive successes and new skills to move into structured roles in the future.

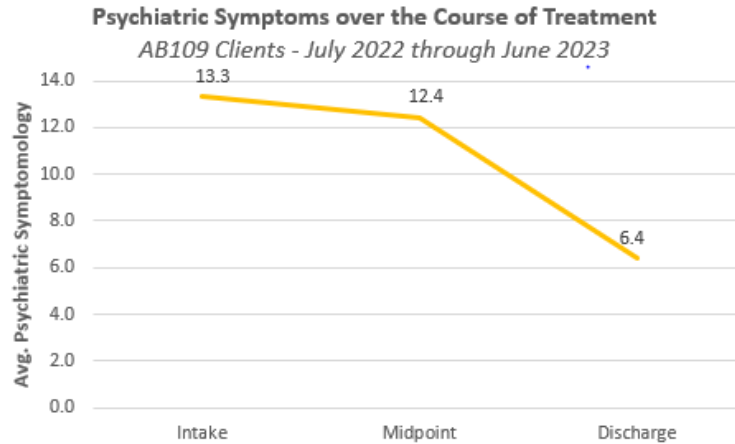
Life Functioning Outcomes of MH Clients – AB 109 Opportunity Knocks FSP ⁸				
Outcomes		12 Months Prior to Enrollment	FY 2022-23	% Change
Psychiatric Hospitalizations	# Clients	6	1	-83%
	# Days	121	54	-55%
Incarcerations	# Clients	21	7	-67%
	# Days	3,313	907	-73%
Homelessness	# Clients	14	8	-43%
	# Days	2,269	584	-74%
Structured Role (Vocational or Educational)	# Clients	3	0	-100%
	# Days	721	0	-100%

Additional Outcomes: Both SUD and MH Clients

AB 109 clients admitted to residential treatment, outpatient SUD and mental health services were also asked a series of questions regarding their psychiatric symptomology (i.e., how often they experienced certain psychological or emotional difficulties) at intake and during treatment.⁹ Overall, AB 109 clients experienced less psychiatric symptoms at discharge compared to intake (see graph below).

⁸ Source: Opportunity Knocks FSP Avatar

⁹ Source: Modified Colorado Symptom Inventory (Conrad, J.J., et al, 2001).

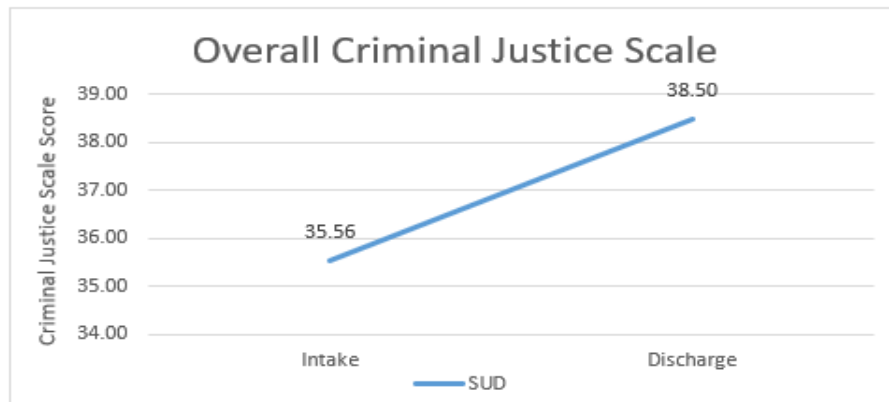


During FY 2022-23, AB 109 SUD clients (n=77) also completed the Self-Harm Inventory (SHI) at intake and during treatment. The SHI examines how frequently clients participate in self-harming behaviors. Overall, there was an 84% reduction in self-harm behaviors for AB 109 SUD clients at discharge.

Self-Harm Inventory July 2022 – June 2023		
		SUD % Change
Overdosed	# Clients	-85%
	# Overdosed	-60%
Caused physical harm to self	# Clients	-83%
	# Harm	-100%
Misused alcohol	# Clients	-87%
	# Alcohol	-67%
Misused prescription drugs	# Clients	-85%
	# Misused Prescription	-75%
Misused illicit drugs	# Clients	-85%
	# Illicit Drugs	-93%
Engaged in emotionally, physically, or sexually abusive relationships	# Clients	-85%
	# Abusive Relationships	-100%
Overall Self-Harm Behavior		-84%

Additionally, AB 109 clients also completed the Criminal Justice Scale (CJS), which examines hostility and risk-taking behaviors. During FY 2022-23, AB 109 SUD clients

(n=77) completed the CJS at intake and during treatment. AB 109 Mental Health clients showed a reduction in hostility and risk-taking behaviors at discharge compared to intake (see graph below). While SUD AB 109 clients showed a slight increase in hostility and risk-taking behaviors at discharge compared to intake, the averages were not statistically significant.



ORANGE COUNTY COURTS

The Court has responsibility for PCS, MS, and Parole Revocation Hearings. Pursuant to California Rules of Court 4.541 and upon receipt of a petition for revocation of supervision from the supervising agency or a request for warrant, the Court accepts and files the matter for action. The Court prescribes the hearing dates and times within the required period, unless time is waived, or the Court finds good cause to continue the matter. The Court provides a hearing officer, courtroom facility, interpreter services and the means to produce a record and complies with reporting requirements to local and state agencies as defined.

COUNTY & COMMUNITY PARTNER ORGANIZATIONS

In addition to the programs and services described, other County and community partners provide supportive services that include housing assistance, workforce preparation, and basic needs and support services.

Orange County Community Resources Department

Within the Orange County Community Resources (OCCR) Department, the OC Community Services and the OC Housing & Homeless Services Divisions focus on linking eligible individuals to safe, affordable housing and shelters and provides comprehensive

employment assistance and development services with the goal to help them achieve self-sufficiency.

Social Services Agency

A significant responsibility of the Social Services Agency (SSA) is to determine the eligibility of individuals for Public Assistance Programs, such as CalFresh and Medi-Cal, to facilitate stability and self-sufficiency. In addition, SSA processes all reinstatements of benefits and continues to foster collaborations between programs and outreach efforts.