

Title

Sacramento County

by **Laura Foster** in **Community Corrections Partnership (CCP) Survey 2023-2024**

12/15/2023

id. 44962224

Original Submission

12/15/2023

Score	n/a
PART A	Part A of the Fiscal Year (FY) 2023-24 Community Corrections Partnership (CCP) Survey collects information about CCP Membership and implementation of the county’s CCP plan. For detailed guidance on how to complete Part A of the CCP Survey, please refer to the CCP Survey Data Reporting Guide at: https://www.bscc.ca.gov/m_realignment/ Part A is divided into five (5) sections: · Section 1: Respondent Information · Section 2: CCP Membership · Section 3: Goals, Objectives, and Outcome Measures · Section 4: Types of Programming and Services · Section 5: Optional Questions When applicable, use person-first language and terminology that eliminates potential generalizations, assumptions, and stereotypes. Responses to the CCP Survey shall represent the collective views of the CCP and not a single agency or individual.
SECTION 1: RESPONDENT INFORMATION	Section 1 asks questions related to the county for which survey responses are provided, the individual who is completing the survey, and who BSCC may contact for follow-up questions. There are three (3) questions in this section.
1. Identify the county name for which this survey is being submitted.	Sacramento County
2. Provide the contact information for the individual completing this survey.	
Name of Survey Respondent	Laura Foster
Survey Respondent's Organization	Sacramento County
Email Address of Survey Respondent	

Phone Number of
Survey Respondent

3. Identify the individual who may be contacted for follow-up questions. Check the appropriate box to the left of the list.

Same as above

Contact Information
for Survey Follow-up

Survey Contact's
Organization

Email Address for
Survey Follow-up

Phone Number for
Survey Follow-up

SECTION 2: CCP
MEMBERSHIP

Section 2 asks questions related to the CCP composition and meeting frequency. There are four (4) questions in this section.

4. CCP Membership
Roles

Provide the first and last name (and organization if not provided) of each individual fulfilling a CCP membership role as of October 1, 2023 in the spaces below each membership role. · If a public membership role does not exist in the county, respond by indicating “not applicable.” This should only be used if the county does not have the specific position listed. · If a position exists in the county but the membership role is not filled in the CCP, respond by indicating “vacant.” · For county positions, one person may fill multiple roles.

Name of the Chief
Probation Officer:
County Probation
Department

Marlon Yarber

Name of the
Presiding Judge of
the Superior Court or
Designee: Superior
Court of California

Hon. Michael Bowman, Presiding Judge; Kelly Sullivan, Chief Deputy
Executive Officer (Designee)

Name of the County
Supervisor or Chief
Administrative Officer
or Designee of the
Board of
Supervisors: Include
their organization

Eric Jones, Deputy County Executive, Sacramento County, Office of the
County Executive, Public Safety and Justice Agency

Name of the District Attorney Role: County District Attorney's Office	Thien Ho, District Attorney; Scott Triplett, Chief Deputy District Attorney (Designee)
Name of the Public Defender Role: Include their organization	Amanda Benson, Sacramento County Office of the Public Defender
Name of the Sheriff: County Sheriff's Office	Jim Cooper, Sheriff; Dan Donelli, Chief Deputy (Designee); Mike Ziegler, Undersheriff (2nd Designee)
Name of the Chief of Police: Include the city location	Kathy Lester, Sacramento Police Department
Name of the Head of the County Department of Social Services: Include their organization	Chevon Kothari, Deputy County Executive, Sacramento County, Office of the County Executive, Social Services Agency
Name of the Head of the County Department of Mental Health: Include their organization	Tim Lutz, Director, Sacramento County Department of Health Services
Name of the Head of the County Department of Employment: Include their organization	William Walker, Director of Workforce Development, Sacramento Employment and Training Agency
Name of the Head of the County Alcohol and Substance Abuse Programs: Include their organization	Tim Lutz, Director, Sacramento County Department of Health Services
Name of the Head of the County Office of Education: County Office of Education	Dave Gordon, Superintendent; Jacqueline White, Assistant Superintendent (Designee)

Name of the representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense: Include their organization	Mervin Brookins, Brother 2 Brother Mentoring
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Name of the individual who represents the interests of victims: Include their organization	Darby Geller, Victim Witness Program Manager, Sacramento County District Attorney's Office
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5. How often does the CCP meet? Check the appropriate answer to the left of the list. Select the one/single option that best describes the CCP's regular meeting schedule.	Bi-monthly (every other month)
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Other:	
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6. How often does the Executive Committee of the CCP meet? Check the appropriate answer to the left of the list. Select the one/single option that best describes the Executive Committee's regular meeting schedule.	Bi-monthly (every other month)
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Other:	
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7. Does the CCP have subcommittees or working groups? Check the appropriate answer to the left of the list.

Yes

If "Yes," list the subcommittees and/or working groups, and their purpose.

The Community Corrections Partnership Advisory Board (CCPAB) was established to provide ongoing data collection, evaluation and analysis that includes input from local agency and community stakeholders, including formerly incarcerated individuals, to meet needs for annual AB 109 Plan updates due to the Board of State and Community Corrections (BSCC) each December. The CCPAB advises the CCP about data findings and provides recommendations regarding AB 109 Plan updates, which includes public safety realignment funding priorities for the County. The CCPAB also assists the CCP with ensuring the community is informed about progress on implementation of the AB 109 Plan for Sacramento County.

SECTION 3: GOALS, OBJECTIVES, AND OUTCOME MEASURES

Section 3 asks questions related to the CCP's goals, objectives, and outcome measures. Please refer to the CCP Survey Data Reporting Guide at: https://www.bscc.ca.gov/m_realignment/ for detailed information about goal and objective statements, and outcome measures.

Updated Information on FY 2022-23 Goals, Objectives, and Outcome Measures

Questions 8, 9, and 10, ask the CCP to provide updated progress information about the goals, objectives, and outcome measures previously reported for FY 2022-23 in the 2022-23 CCP Survey. For each question, provide the goals, objectives, and outcome measures as reported in the FY 2022-23 survey. The progress information should be updated to reflect the progress achieved over the full fiscal year.

8. Describe a goal and the associated objectives as reported in the FY 2022-23 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2022-23. If no goal, objective, or outcome measure was identified in FY 2022-23 respond by indicating "Not Applicable."

Goal A:

Maintain Community Safety

Was this Goal part of the FY 22-23 CCP plan? Yes

Goal A Objective:	Expand coordinated reentry after incarceration
Goal A Objective:	Increase resources for programs that have been shown to reduce recidivism and increase prosocial support
Goal A Objective:	Continue support for programs that track, measure, and show positive outcomes in connecting and/or providing services to defendants/offenders
Goal A Outcome Measure:	Reported Crime
Goal A Outcome Measure:	Crime Rate
Goal A Outcome Measure:	Crime Clearance Rates
Briefly describe progress toward the goal.	See Justice System Trends attachment. Reported crime in Sacramento County declined 23% from 2011 to 2022. Crime rate in Sacramento County declined 21% from 2011 to 2022. Prior to submission of the next Plan Update in December 2024, the CCP will be updating its Objectives for this goal and developing a definition of Community Safety that all partners can support.
Rated progress toward the goal.	Partially achieved
9. Describe a goal and the associated objectives as reported in the FY 2022-23 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2022-23. If no goal, objective, or outcome measure was identified in FY 2022-23, respond by indicating "Not Applicable."	
Goal B:	Reduce Recidivism

Was this Goal part of Yes
the FY 22-23 CCP
plan?

Goal B Objective:	Expand use of evidence based practices such as Level of Service/Case Management Inventory (LS/CMI) risk and needs assessment tool to support programming in custody
Goal B Objective:	Support offender accountability through the use of graduated sanctions and incentives/rewards
Goal B Objective:	Support programs that expand Risk/Need/Responsivity measures
Goal #2 Outcome Measure:	Parolee Bookings
Goal B Outcome Measure:	PRCS Bookings
Goal B Outcome Measure:	County Recidivism Rate (In Development); Recidivism Rates for Specific Programs
Briefly describe progress toward the goal.	See Justice System Trends attachment. Although the County is not responsible for Parolees in the community, because they cannot return to prison for parole violations, County services are provided in custody whey they are booked into jail. Parolees booked with new charges are down 43%. PRCS booked with new charges are up 26% (2012 to 2022). Prior to submission of the next Plan Update in December 2024, the CCP will be updating its Objectives for this goal.
Rated progress toward the goal.	Partially achieved

10. Describe a goal and the associated objectives as reported in the FY 2022-23 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2022-23. If no goal, objective, or outcome measure was identified in FY 2022-23 respond by indicating "Not Applicable."

Goal C:	Decrease use of jail housing
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Was this Goal part of Yes
the FY 22-23 CCP
plan?

Goal C Objective:	Reserve jail beds for those who have been identified as posing the greatest risk to public safety and have the most serious and violent offenses
Goal C Objective:	Expand Pretrial, Collaborative Court, and Diversion programs that link defendants/offenders to services in the community and support transition back into the community
Goal C Objective:	Further develop and support diversion programs for defendants who can be safely placed in the community in alternative programs
Goal C Outcome Measure:	Jail Average Daily Population
Goal C Outcome Measure:	Jail Incarceration Rate
Goal C Outcome Measure:	
Briefly describe progress toward the Goal.	See Justice System Trends attachment. Annual jail bookings decreased 48% since 2011. Average daily population in Sacramento County Jails is down 18% since 2011. Prior to submission of the next Plan Update in December 2024, the CCP will be updating its Objectives for this goal. This work is further supported by the County's Jail Population Reduction Plans (attached), which intend to reduce Jail ADP by 600 over several years.
Rated progress toward the Goal.	Partially achieved
If the CCP has identified more than 3 goals, upload additional CCP goal sheet(s) here.	
	Additional CCP goal sheets are located at: https://www.bscc.ca.gov/m_realignment/
Information on FY 2023-24 Goals, Objectives, and Outcome Measures	

11. For FY 2023-24, Yes (Skip to Section 4)
will the CCP use the
same goals,
objectives, and
outcome measures
identified above from
FY 2022-23? Check
the appropriate
answer to the left of
the list.

Questions 12, 13, and 14, the CCP is asked to describe a goal and its associated objectives and outcomes for FY 2023-24. For the goal, also provide information about the current progress toward the stated goal. As survey responses are due mid-year, progress information for these goals over the full fiscal year will be requested as part of the FY 2024-25 CCP Survey.

12. Describe a goal
for FY 2023-24 and
one (1) or more of its
associated
objectives and
outcome measures.
Please provide any
information about
progress toward the
goal thus far in the
fiscal year. If no
goal, objective, or
outcome measure
was identified in FY
2023-24, respond by
indicating "Not
Applicable."

Goal D:

Was this Goal part of
the FY 23-24 CCP
plan?

Goal D Objective:

Goal D Objective:

Goal D Objective:

Goal D Outcome
Measure:

Goal D Outcome
Measure:

Goal D Outcome
Measure:

Briefly describe
current progress
toward the Goal.

Rate the current
progress toward the
Goal.

13. Describe a goal
for FY 2023-24 and
one (1) or more of its
associated
objectives and
outcome measures.
Please provide any
information about
progress toward the
goal thus far in the
fiscal year. If no
goal, objective, or
outcome measure
was identified in FY
2023-24, respond by
indicating "Not
Applicable."

Goal E:

Was this Goal part of
the FY 23-24 CCP
plan?

Goal E Objective:

Goal E Objective:

Goal E Objective:

Goal E Outcome
Measure:

Goal E Outcome
Measure:

Goal E Outcome
Measure:

Briefly describe
current progress
toward the Goal.

Rate the current progress toward the Goal.

14. Describe a goal for FY 2023-24 and one (1) or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2023-24, respond by indicating "Not Applicable."

Goal F:

Was this Goal part of the FY 23-24 CCP plan?

Goal F Objective:

Goal F Objective:

Goal F Objective:

Goal F Outcome Measure:

Goal F Outcome Measure:

Goal F Outcome Measure:

Briefly describe current progress toward the Goal.

Rate the current progress toward the Goal.

If the CCP has identified more than 3 goals, upload additional CCP goal sheet(s) here.

Additional CCP goal sheets are located at:
https://www.bscc.ca.gov/m_realignment/

SECTION 4: TYPES OF PROGRAMMING AND SERVICES

Section 4 asks questions about the types of programs and services provided during FY 2022-23. For each type of program or service provided, identify the agency(ies) that provide the program or service and at what stage(s) the program or service is provided (in-custody, supervision, other). Definitions are provided for each program or service type, however, you may refer to the CCP Survey Data Reporting Guide for more clarity on the definition of each type of program and service listed and the stage(s) of program or service.

>
Programs/Services:
Mental
Health/Behavioral
Health - services
designed to improve
mental health.

Are Mental
Health/Behavioral
Health services
provided? Yes

What is the Providing
Agency? (check all
that apply) Sheriff
Probation
Behavioral Health
A Community-Based Organization
Other

If "Other," describe
below: Correctional Health, Sheriff and Probation utilize County behavioral health and contracted mental health services in custody and in the community.

At what Stage(s) is
Service Provided?
(check all that apply) In-Custody
Supervision
Other

If "Other," describe
below: Individuals released pretrial are also linked to mental health services through Mental Health Diversion or other voluntary assessment and linkage service options.

>

Programs/Services:
Substance Use -
services designed to
assist with
substance use.

Are Substance Use
services provided? Yes

What is the Providing
Agency? (check all
that apply) Sheriff
Probation
Behavioral Health
A Community-Based Organization

If "Other," describe
below:

At what Stage(s) is
Service Provided?
(check all that apply) In-Custody
Supervision

If "Other," describe
below:

>

Programs/Services:
Housing - services
designed to assist
with housing after
release.

Are Housing services
provided? Yes

What is the Providing
Agency? (check all
that apply) Sheriff
Probation
A Community-Based Organization
Other

If "Other," describe
below: Dept. of Human Assistance; Dept. of Homeless Services and Housing

At what Stage(s) is
Service Provided?
(check all that apply) In-Custody
Supervision

If "Other," describe
below:

>

Programs/Services:
Employment -
services designed to
provide clients with a
job and/or to provide
job training to
improve chances of
finding employment
after release.

Are Employment services provided?	Yes
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What is the Providing Agency? (check all that apply)	Sheriff Probation A Community-Based Organization
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If "Other," describe below:	
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At what Stage(s) is Service Provided? (check all that apply)	In-Custody Supervision
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If "Other," describe below:	
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>

Programs/Services:
Education - focuses
on academic
achievement.

Are Education services provided?	Yes
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What is the Providing Agency? (check all that apply)	Sheriff Probation Other
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If "Other," describe below:	County Office of Education
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At what Stage(s) is Service Provided? (check all that apply)	In-Custody Supervision
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If "Other," describe below:	
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>

Programs/Services:
Family - family-
oriented education,
service, and training.

Are Family services
provided? Yes

What is the Providing
Agency? (check all
that apply) Sheriff
Probation
A Community-Based Organization

If "Other," describe
below:

At what Stage(s) is
Service Provided?
(check all that apply) In-Custody
Supervision

If "Other," describe
below:

>

Programs/Services:
Domestic Violence
Prevention - support
and intervention.

Are Domestic
Violence Prevention
services provided? Yes

What is the Providing
Agency? (check all
that apply) Probation

If "Other," describe
below:

At what Stage(s) is
Service Provided?
(check all that apply) Supervision

If "Other," describe
below:

>

Programs/Services:
Physical Health -
services designed to
improve clients'
physical well-being.

Are Physical Health services provided?	Yes
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What is the Providing Agency? (check all that apply)	Sheriff Probation Other
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If "Other," describe below:	Adult Correctional Health
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At what Stage(s) is Service Provided? (check all that apply)	In-Custody Supervision
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If "Other," describe below:	
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>

Programs/Services:

Quality of Life – services that enhance the standard of happiness, comfort, and well-being of an individual to participate in life events (e.g., assistance in getting a driver's license, opening a bank account, etc.).

Are Quality of Life services provided?	Yes
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What is the Providing Agency? (check all that apply)	Sheriff Probation Behavioral Health A Community-Based Organization
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If "Other," describe below:	
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At what Stage(s) is Service Provided? (check all that apply)	In-Custody Supervision
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If "Other," describe below:	
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SECTION 5:
OPTIONAL
QUESTIONS

Section 5 asks optional questions about evaluation, data collection, programs and services, and local best practices. There are 9 questions in this section. Responses will be used by the BSCC and its justice-system partners to better understand the needs of counties. If the CCP chooses not to answer an optional question, please respond "Decline to Respond."

15. Describe the process the CCP uses to determine potential programs and/or services for local implementation using Realignment funds.

The CCP established an Advisory Board to provide ongoing data collection, evaluation and analysis that includes input from local agency and community stakeholders, including formerly incarcerated individuals, to meet needs for annual AB 109 Plan updates due to the Board of State and Community Corrections (BSCC) each December. The CCP Advisory Board advises the CCP about data findings and provides recommendations regarding AB 109 Plan updates, which includes public safety realignment funding priorities for the County. The CCP then considers the Advisory Board's recommendations for inclusion in annual plan updates and CCP member agencies use these recommendations when submitting growth requests for the County's budget process.

16. Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation? Check the appropriate answer to the left of the list.

Yes

If "Yes," explain how.

AB 109 funded agencies typically conduct program and service evaluations internally utilizing the BSCC recidivism definition along with other metrics to determine what adjustments are needed, including program and service expansion when they find successful outcomes as well as termination of programs and contracted services when performance is not satisfactory. Since 2021, the CCP Advisory Board has been directed to begin assisting with this effort through work with AB 109 funded agencies to provide ongoing data collection, monitoring and evaluation needed to advise the CCP regarding findings and recommendations for change to be incorporated in annual updates to the AB 109 Plan. The AB 109 Plan 2023 Update includes measures associated with the overall goals as well as specific program and service goals and introduces a standardized annual evaluation process for any programs funded after July 2024.

17. Does the county consider evaluation results when funding programs and/or services? Check the appropriate answer to the left of the list.

Yes

If "Yes," explain how. AB 109 funded agencies have adjusted programs and services based on evaluation findings, as shared by agency representatives on the CCP and its Advisory Board. The county considers the CCP's AB 109 Plan recommendations when allocating AB 109 funds to agencies for programs and services to be delivered. The AB 109 Plan 2023 Update enhances and expands ongoing data collection and evaluation efforts. Findings will be used to better inform future AB 109 Plan updates, including for changes to programs and services supported by AB 109 funding.

18. Does the county use BSCC definitions (average daily population, conviction, length of stay, recidivism, and/or treatment program completion rates) when collecting data? Check yes or no to the left of each BSCC Definition listed, as applicable. <https://www.bscc.ca.gov/wp-content/uploads/AB-1050-Key-Term-Definitions.pdf>

Average Daily Population Yes

Conviction Yes

Length of Stay Yes

Adult Recidivism Yes

Treatment Program Completion Rates Yes

19. What percentage of the Public Safety Realignment allocation is used for evidence-based programming (as defined locally)? Check the most appropriate answer to the left of the list of percentages. 81% or higher

20. The BSCC would like to better understand the county's capacity to offer mental health, substance use disorder, behavioral health treatment programs, and/or other services. What type and level of services are now available?

Sacramento County offers mental health, substance use disorder, and behavioral health treatment programs in custody and in the community. Sacramento County joined the national Stepping Up Initiative in 2019. Stepping Up toolkit resources are being utilized to support ongoing efforts. The Sequential Intercept Model (SIM), which was most recently updated in September 2023 and attached hereto, identifies behavioral health services accessible at different points along the criminal justice continuum and includes an inventory of services. In addition to the programs and services identified on the SIM, in 2023, the County received a grant to form a stakeholder working group and is contracting with a researcher regarding data on individuals who have been deemed Incompetent to Stand Trial (IST) and those at risk of becoming IST. The County is actively working to reduce the number of individuals deemed IST and are expanding the resources necessary to support Mental Health Diversion program that should contribute to meaningful reductions in the jail population and reduce future justice-system contact.

21. What challenges does the county face in meeting the above program and service needs?

Even with a broad range of services in custody and in the community, Sacramento County's growth in need for behavioral health, housing, and other support services has outpaced the ability to expand service capacities. Staffing shortages for clinicians and providers has created challenges for staffing mental and behavior health programs both in the community and in custodial environments. Efforts are ongoing to further integrate, expand, and enhance multi-disciplinary services that address increasingly complex needs for people involved in the local justice system. Sacramento County continues to develop a more robust and collaborative continuum of correctional and community based services that are integrated across systems at the least restrictive and most cost efficient level for keeping the community safe and reducing recidivism.

Since 2020, Sacramento County has been subject to a consent decree that identifies remediation measures and plans necessary to improve conditions of confinement, including several that relate to the ability to provide behavioral and mental health treatment and services while in custody. All expert reports evaluating the County's progress have identified the space limitations in the jail facilities as a challenge to meeting program and service needs. In 2022, the County Board of Supervisors directed staff to develop a capital improvement project to provide sufficient treatment and housing space for those requiring higher levels of care. This facility will take several years to build and will be paired with jail population reduction plans.

In January 2023, legislation expanded eligibility for Mental Health Diversion. This expansion has created substantial impacts to both the Court and the County Departments (Health Services, Indigent Defense, Probation, Sheriff, and more) that support or are affected by this change. Despite investments in FY 23-24 to alleviate some of these challenges, the County is still working to mitigate a backlog among those needing assessments and court proceedings in order to move forward.

22. What programmatic changes and/or course corrections has the CCP made in the implementation of Public Safety Realignment that it believes other counties would find helpful?	Over the past several years, Sacramento County's CCP has worked hard to elevate the voice of the community in developing AB 109 Plan Updates and to reconcile the gaps between Public Safety Realignment planning/programming and the County's established budget development process. The establishment of an Advisory Board in 2021 that reflects the membership of the CCP Executive Committee as well as four community members has led to positive incremental changes for the CCP. Since establishing the Advisory Board and onboarding an analyst devoted to Public Safety Realignment, Sacramento County's CCP has restructured the AB 109 Plan to establish prioritization among eligible programs and services, provided clearer direction for budget planning and reimbursement processes, and identified additional accountability measures for departments receiving AB 109 funding. Despite being submitted as the 2023 Update for FY 23-24, Sacramento County's AB 109 Plan 2023 Update looks to assist in future planning for FY 24-25. Using this timeline for annual Plan Updates allows the Plan to be shared and discussed with relevant departments prior to submitting budget requests for the following year.
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23. Describe a local best practice or promising program that has produced positive results. If data exists to support the results, please share.	Despite the noted challenges associated with the expansion of eligibility for Mental Health Diversion, Sacramento County implemented a working group with all partners to address the challenges of the legislation that changed the presumption process to automatically presume a person is eligible for diversion if they have had a mental health diagnosis in the last 5 years (effective January 1, 2023). The working group looked at the internal process of how clients are assessed and identified where streamlining could be done. The streamlining process for assessments reduced the documentation time from 6-9 hours per assessment to 2-4 hours per assessment. In addition to hiring and training more staff to support these assessments and implementing a new electronic health record system, leadership initiated cross training efforts with staff from the Substance Use Prevention and Treatment Services team to increase the number of staff available to complete assessments and assist with alleviating the extensive backlog. As a result of these efforts, the assessment wait time has reduced from four months to two months. While there is still additional work to accomplish to meet the demands associated with Mental Health Diversion, this working group exemplifies what can be accomplished within a short time when all partners come together to address a critical situation. The focus on Mental Health Diversion within Sacramento County is further seen in the Jail Diversion Treatment and Resource Center (JDTRC), which is a collaboration between Health Services, Probation, the Public Defender's Office, and Human Assistance, among others, that began serving clients in December 2021. JDTRC assists clients participating in Mental Health Diversion and was recently expanded to assist both Misdemeanor and Felony clients. Support for this population is further enhanced by the development of a dedicated Mental Health Unit within the Probation Department.
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Optional Highlight or Success Story	See Redemption Coffee attachment.
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If the CCP would like to provide the BSCC with any supplementary information, you may upload a maximum of five (5) additional files.

[JusticeSystemTrends.pdf](#)

[SacramentoAdultSIM.pdf](#)

[JailPopulationReductionPlans.pdf](#)

[Redemption_Coffee_Highlight-Success_Story_AB_109_Survey.pdf](#)

PART B - CCP
Survey Excel
Workbook

Part B of the CCP Survey collects information about the allocation of Public Safety Realignment dollars. The form to upload is available at: https://www.bscc.ca.gov/m_realignment/ For detailed guidance on how to complete Part B of the CCP Survey package, please refer to the CCP Survey Data Reporting Guide at the link provided above. Part B is divided into two sections: Section 6: FY 2022-23 Public Safety Realignment Funding Allocation Section 7: FY 2023-24 Public Safety Realignment Funding Allocation

Upload the completed CCP Survey, Part B below. (Excel format only)

[FY-23-24-CCP-Survey-Part-B-Final.xlsx](#)

Updated CCP Plan
for 2023-2024.

Counties are eligible to receive funding if they submit an updated Community Corrections Partnership plan and a report (CCP Survey) to the Board of State and Community Corrections by December 15, 2023.

Upload the CCP Plan for 2023-2024 below. (maximum of 3 files)

[AB_109_Plan_2023_Update.pdf](#)

The complete CCP Survey package, including all required attachments, shall be completed and submitted through the BSCC-Submittable online portal by December 15, 2023. Please be aware that a complete CCP Survey package, including an updated CCP plan for 2023-24, MUST be submitted to the BSCC to receive compensation.

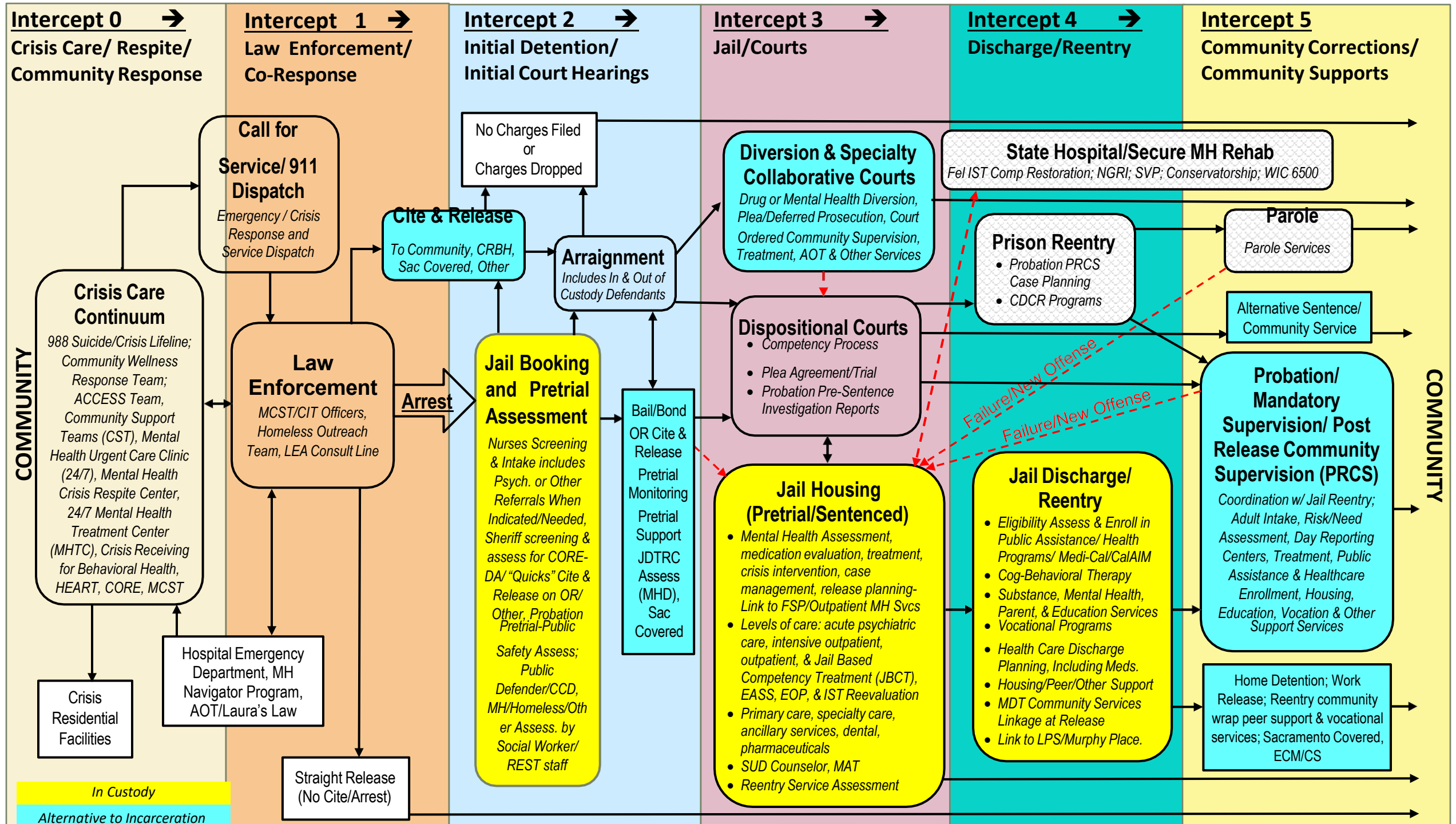
NOTE: The information provided in the CCP Survey package will be made public by the BSCC in the annual report to the Governor's Office and the Legislature on the implementation of Community Corrections Partnership plans on the BSCC website.

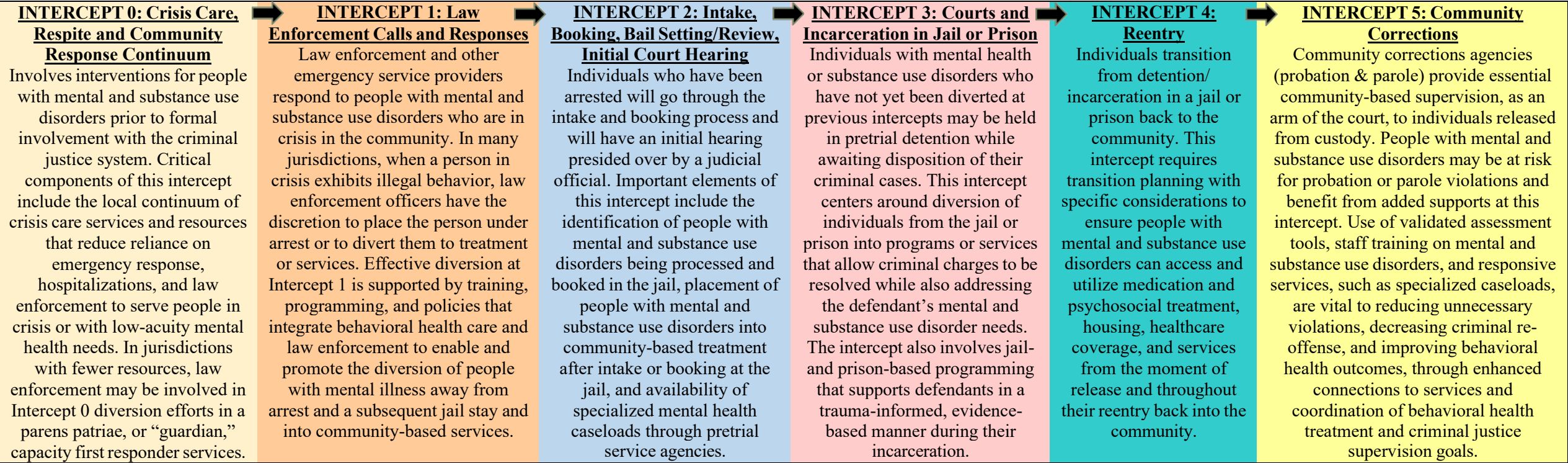
Questions and/or
Technical Assistance

If you have any questions or need assistance on the CCP Survey, attachments, and/or the BSCC-Submittable online portal, please contact: Helene Zentner, Field Representative at helene.zentner@bscc.ca.gov or 916.838.7777. Thank you.

September 2023 Update

Sacramento County Adult Sequential Intercept: Criminal Justice-Behavioral Health Partnerships





INVENTORY OF SERVICES

988 Suicide & Crisis Lifeline - Operated by [WellSpace Health Crisis Center](#) 24 hours a day, 7 days a week, with support from County Behavioral Health, receives calls from people of all ages in our region who are feeling depressed, hopeless, alone, desperate, and sometimes considering suicide as a way to end their pain. Crisis response referrals to CWRT and 911 as needed.

Community Wellness Response Team (CWRT), formerly Wellness Crisis Call Center and Response Team, aims to safely de-escalate crises, provide service linkage in a community-based model to decrease criminalization of mental health and homelessness. CWRT includes services to address mental health and/or substance use challenges and meet wellness, healing, prevention, resilience, support and treatment needs. CWRT mental health counselor and a peer with lived experience, receives Mobile Response Requests from 988 that may benefit from in-person de-escalation services, assess needs and risks, and create safety plans. This includes identifying and leveraging individual strengths and natural supports; coordinating with existing Mental Health Plan (MHP) and Substance Use Prevention and Treatment (SUPT) providers as appropriate; linking to ongoing services; voluntary transport to urgent/emergency resources and accessing Mobile Crisis Support Teams or other emergency responders when necessary.

Homeless Engagement and Response Team (HEART) Staffed with Counselors and Peers, uses phased approach to help encampment and shelter residents consent to and obtain behavioral services needed. Outreach and engagement with mental health and substance use screening, linkage and assessments in homeless shelters and encampments. [Call \(916\) 875-1720](#) or securely submit referrals to BHS-HEARTReferrals@saccounty.gov

Mental Health Access Team – The entry point for County mental health services, a Behavioral Health Services (BHS) team of licensed mental health professionals provide Sacramento County residents referrals and/or linkage to authorized specialty mental health services. Eligibility for services is based on referral information and a brief phone screening in the individual’s primary language. Individuals, caregivers, schools, medical providers, and other concerned adults can refer to the Access Team via phone, fax or US mail.

- MH Access Team determines eligibility for specialty mental health service needed and links the individual with a culturally and linguistically appropriate provider. In accordance with confidentiality regulations, the MH Access Team will inform the referring party the individual has been linked with a provider agency. The Contracted provider will contact the individual and/or caregiver to set up an appointment after the Access Team has authorized services. Services include: • Crisis intervention • Mental health assessments • Therapy and/or rehabilitation services • Intensive Home Based Services •

Skills building and support groups • Case management • Intensive Care coordination • Linkage to housing services • Linkage to community resources • Medication support • Early Childhood Mental Health • Services for Youth with coexisting Mental Health and Alcohol/Substance Use Disorders. Adult and Child Provider Walk-in Access and linkage to adult and child providers can be found [here](#).

Substance Use Prevention & Treatment (SUPT) Services for youth and adults struggling with substance misuse or a substance use disorder. Clinical staff conduct a preliminary assessment to determine treatment needs and level of care for recovery. In person or over-the-phone assessment and referral to an appropriate treatment provider available M-F, 8:00am–5:00pm at (916) 874-9754 or (888) 881-4881, after hours at (888) 881-4881.

Forensic Full Service Partnership (FSP) – El Hogar’s [Community Justice Support Program](#) FSP will apply a Multi System Team (MST) model for interagency and community collaboration in mental health service to justice involved individuals experiencing Serious Mental Illness (SMI). Currently a Multi-disciplinary Team (MDT) model is used. Services include peer support, medication support, employment support, intensive case coordination, support with benefits acquisitions, housing support, therapy, skill building sessions and groups.

Laura’s Law/Assisted Outpatient Treatment (AOT) is a court ordered outpatient service for adults, ages 18 years and older, who have a serious mental illness and a history of (a) psychiatric hospitalizations, (b) jailings, or (c) acts, threats or attempts of serious violent behavior towards themselves or others. Consumers must first be offered voluntary treatment within the past 10 days. AOT uses the court and behavioral health systems, including substance use prevention and treatment (SUPT), to address the needs of individuals who have been unable to or have not engaged with community mental health treatment programs through a “whatever it takes” model to connect referred persons to the least restrictive, high intensity, community based FSP program. If you have any questions or need assistance completing a referral, Phone: 916-875-6508 or Email: DHS-MH-AOT@Saccounty.gov

Community Support Team (CST) is operated by Behavioral Health Services, Monday through Friday, 8:00 am – 5:00 pm. The collaborative team includes, licensed mental health counselors, peer and family support specialists, and other professional staff providing community-based flexible services to serve all age groups experiencing mental health distress, including those at risk for suicide, and the individual’s family members and/or caregivers. Services can include assessment, crisis intervention, safety planning, and linkage to ongoing services and supports. The goal of CST is to provide services in a culturally and linguistically competent manner while promoting recovery, resiliency and wellbeing resulting in decreased use of crisis services and/or acute care hospitalization services; decreased risk for suicide; increased knowledge of available resources and supports; and increased personal connection and active involvement within the community.

Mental Health Urgent Care Clinic (MHUCC) operating 24 hours a day, 7 days a week, the MHUCC is a walk-in clinic for individuals all ages experiencing a mental health and/or co-occurring substance use crisis. This client-centered program focuses on providing immediate relief to individuals and families in distress, averting psychiatric emergency room visits and involuntary hospitalizations. Goal is to foster recovery for individuals and families through promotion of hope and wellness, welcoming anyone experiencing mental health-distress regardless of age and ability to pay (*MHUCC is funded by the Sacramento County Behavioral Health Services through Proposition 63, Mental Health Services Act*) Services: • Safe space for individuals and families, peer support and on-the-spot counseling • Integrated co-occurring mental health and substance use crisis assessment • Crisis interventions, psychiatric evaluations and clinical assessments • Psych. medication evaluation and management services (excluding controlled substances) • Referral and linkage to on-going services and community supports

Mental Health Crisis Respite Center – Operated by [Hope Cooperative/TLCS](#), provides 24/7 mental health crisis respite care in a warm and supportive community based setting to eligible adults who are experiencing overwhelming stress due to life circumstance resulting in a mental health crisis. Services include screening, resource linkage, crisis response and care management up to twenty-three (23)-hours. The program has the capacity to serve up to ten (10) individuals at any given time.

Crisis Residential Facilities – Short-term residential treatment programs that operate in a structured home-like setting twenty-four hours a day, seven days a week. Eligible consumers may be served through the program for up to 90 days. These programs embrace peer facilitated activities that are culturally responsive and are designed for individuals, age 18 and up, who meet psychiatric inpatient admission criteria or are at risk of admission due to an acute psychiatric crisis, but can instead be served appropriately and voluntarily in a community setting. Beginning with an in-depth clinical assessment and development of an individual service plan, crisis residential program staff will work with consumers to identify achievable goals including a crisis plan and a Wellness Recovery Action Plan (WRAP).

Crisis Receiving for Behavioral Health (CRBH) Program – Operated by [WellSpace Health](#) 24 hours a day 7 days a week at 631 H St., behind the Main Jail. CRBH provides short-term (4 to 23 hour max.) recovery, detox, and recuperation from effects of acute alcohol/drug intoxication or behavioral health crisis. Staffed by healthcare professionals to provide medical monitoring, SUD counseling, connection to supportive services/treatment, and transportation to service partners or home after completion of short-term recovery. Clients are referred by partner agencies, no walk-ins. Capacity currently 20, planned expansion to 40.

Community Outreach Recovery Empowerment (CORE) Program, Sacramento County, BHS contracts with the following community-based organizations to operate CORE: Bay Area Community Services (BACS), El Hogar, Hope Cooperative, and Turning Point. BHS has 11 CORE sites throughout Sacramento County. Each CORE site provides Community Wellness Centers co-located with a specialty mental health outpatient treatment program. Peer run community wellness centers are open to any Sacramento County adult seeking safe space to engage with peer support staff, and participate in variety of meaningful

wellness focused activities, the outpatient programs provides flexible, client-driven, recovery-oriented, strength-based, trauma-informed, culturally and linguistically responsive, comprehensive community-based specialty mental health (MH) services and supports to adults age 18 years and older. Individuals can self-refer to a CORE program by reaching out to Sacramento Access Team for a screening or by walking into a CORE provider site during the designated walk-in hours for an assessment. Hours are subject to change, please reference the [Adult & Child Provider Walk-in Hours List](#) for latest updates.

Sacramento County Mental Health Treatment Center (MHTC) – Provides short term comprehensive acute inpatient mental health services, 24/7, for adults 18 and older experiencing a mental health crisis and/or condition. The County's Intake Stabilization Unit (ISU), adjacent to the MHTC campus' 50 inpatient psychiatric beds, provides up to 23-hour crisis stabilization and intensive services in a safe environment. The ISU responds to hospital ED staff and law enforcement calls 24/7, provides direct access from the MCSTs and SB82 triage navigator program, and receives adults and minors that have been medically cleared for 24/7 crisis stabilization services.

Law Enforcement Consult Line (LECL) – Available for officers responding to 911 calls in the community on clients experiencing a mental health crisis. They are encouraged to call the Mental Health Treatment Center's Intake Stabilization Unit (ISU) to consult on clients for resource assistance to work with the client. Officers may bring clients directly from the community for mental health services and crisis stabilization to the ISU if the client meets WIC 5150 criteria of Danger to Self (DTS), Danger to Others (DTO) or Gravely Disabled (GD). LEA telephone line (875-1170) in the ISU for these purposes.

911 Dispatch – Different 911 call centers serve different jurisdictions within the county. They include one operated by the California Highway Patrol and 6 by local LEA's, with the Sheriff's Office and Sacramento Police Department operating the two largest. Computer aided dispatch is utilized for deployment of appropriate responders, including dispatch of Mobile Crisis Support Teams/Co-Responders, where available.

Mobile Crisis Support Teams (MCSTs) – licensed clinicians embedded with law enforcement to respond to mental health crisis related calls for service (7 of 11 teams currently operating). Behavioral Health Service (BHS) has partnerships with the Sacramento Sheriff's Office, Citrus Heights, Folsom, Elk Grove, Rancho Cordova, Galt, and Los Rios Police Department's. Officers/Deputies trained in Crisis Intervention Training (CIT) respond with clinicians to persons experiencing mental health crisis. Teams responding to mental health crisis aim to reduce risks and threats to self or others, building on individual, family, community, and self-identified strengths and skills to divert from unnecessary incarceration or hospitalization and provide connection for navigating service systems and access to ongoing support. Authorized mental health providers support de-escalation, safety planning and ongoing care. MCSTs also educate key individuals, family members or natural supports on how to improve health and wellness.

Homeless Outreach Team (HOT) – The mission of the Sacramento County Sheriff's Homeless Outreach Team (HOT) is to engage homeless individuals with services, along with enforcement when necessary, in order to make a positive impact in the community. The men and women of the Homeless Outreach Team utilize unique and innovative "outside the box" approaches to connect homeless individuals and families with critical services. HOT has formed and fostered partnerships with State and County agencies, as well as faith-based and private organizations, to provide services to homeless people in need.

Sheriff's Jail Intake – Staff provide screening during booking to identify detainees who qualify for and can be safely released on their "own recognizance" (OR) without being placed in housing units, typically within 24 hours of booking. This type of pretrial release is known as a "Quick" release. Sheriff's intake staff also identify defendants eligible for the Chronic Offender Rehabilitation Effort Collaborative Court Program. Eligible defendants are referred to the District Attorney's Office for participation in this specialty court program that provides housing, treatment and other services as an alternative to jail.

Adult Correctional Health (ACH) – Physical and mental health services for incarcerated adults in the jail system. County Primary Care operated services work in partnership with the Sacramento Sheriff's Office (SSO). ACH has several contracted providers, including UC Davis to provide onsite mental health services. Other healthcare contracts include specialty and ancillary care services. Registered nurses (RNs) complete intake screening and assessment on arrestees who are booked. Dependent on patient needs, there is a range of medical services provided both onsite and offsite (primary care, specialty care, dental, pharmacy, & ancillary services). RNs refer individuals to onsite mental health staff and can request urgent assessments when needed. Psychiatric consultation is available 24/7 at both jail facilities. Psychiatric services include evaluations, medication management, crisis intervention, treatment, case management and discharge planning. Services include acute psychiatric care, intensive outpatient, enhanced outpatient, outpatient, and jail based competency treatment (JBCT). ACH contracts WellSpace Health for onsite Substance Use Disorder (SUD) Counselors to provide SUD assessments, education, counseling, and community-based service linkage. ACH also collaborates with Behavioral Health, Collaborative Courts, Probation, and other partners. Medication Assisted Treatment (MAT) services are provided when clinically indicated. A discharge planning team provides health care linkage for patients post-release, including those with chronic health conditions, SMI, and SUD, and provide a 30-day supply of prescribed medication. Prescriptions go to the Primary Care Clinic post-release for those receiving psychotropic medication. ACH contracts [Sacramento Covered](#) for additional jail release service connection for health plan enrollment, medical/dental care connections, nutritious food, MH services, transportation arrangements, mobile phone, ID and other documentation, housing support, legal services, etc. In FY 2023-24, ACH added Early Access and Stabilization Services (EASS), a combination of medication management, individual and group-based restoration services before the IST client is admitted into a JBCT or DSH bed.

Probation Pretrial Assessment, Monitoring and Community-Based Services for detainees who can be safely released to the community pending trial, without regard to ability to post bail. Probation Officers apply the [Public Safety Assessment](#), a validated risk assessment tool, and provide pretrial reports to Superior Court that include risk for new offense and failure to appear. Those released for pretrial monitoring may be provided further assessment and linkage to health and support services, court reminders, office visits, community visits and GPS monitoring.

Public Defender/CCD Pretrial Support - Social workers/CCD staff conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, SUD, housing and other support services, and provide ongoing case management support after release ([CSG Justice Center Article Aug 2023](#)).

Public Defender, Conflict Criminal Defender and the District Attorney Review – Working together along with the Court and Behavioral Health experts, they identify defendants who are eligible and appropriate for diversion or collaborative court programs that provide community-based treatment and other services. Additionally, specialized attorneys work to ensure appropriate actions and services for LPS/Murphy’s Conservatorship and WIC 6500 (defendant subject to a pending indictment or information for a serious and violent felony and found to present a substantial danger of physical harm to others), mentally disordered offenders, sexually violent predators, and for mental incompetence/insanity extensions.

Jail Diversion Treatment and Resource Center (JDTRC) – Opened December 2021 for Misdemeanor Mental Health Diversion Court applicants and participants 18 years and older who are living with mental illness and/or co-occurring substance use disorder, and/or suffering from trauma. Located in close proximity to the Main Jail and Sacramento Superior Court, services include mental health evaluations and linkage to services, onsite therapeutic classes, referrals to community-based service providers, contact with a probation office, and onsite meetings with legal representation.

Mental Health Diversion (Terms differ for [Misdemeanor](#) & [Felony](#) Defendants) – Superior Court may grant Mental Health Diversion to defendants eligible pursuant [to Penal Code Section 1001.36](#)

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Misdemeanor Mental Health Diversion	Defendants facing misdemeanor charges or found IST and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36.	Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender’s Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed.	6-12 months	No Cap	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance
Felony Mental Health Diversion	Defendants facing felony charges or found IST and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36 (eligibility expanded Jan. 1, 2023).	Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender’s Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed.	12-24 months	No Cap	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance, Probation

Drug Diversion (PC 1000) – Under Penal Code Section 1000, defendants who meet criteria: (1) Within 5 prior years, defendant has not been convicted for controlled substance offense other than listed under PC 1000. (2) Offense charged did not involve a crime of violence or threatened violence. (3) There is no evidence of a contemporaneous violation relating to narcotics or restricted dangerous drugs other than a violation under PC 1000. (4) Defendant has no prior felony conviction within five years prior. Drug diversion program clients enter a plea of not guilty and waives the right to a trial by jury and proceedings are suspended during participation in a drug treatment program for up to 18 months. Court may terminate diversion and reinstate criminal proceedings for failure or dismiss charges for successful completion.

[Sheriff’s Alternative Sentencing Program \(ASP\)](#), [Work Project](#), & [Home Detention](#) – provides an opportunity for people to work community service hours in lieu of paying fines, allows certain sentenced individuals the ability to work in their community in lieu of serving time in jail, and provides home detention alternative to jail for sentenced individuals to support their family, employment and education goals.

Incompetent to Stand Trial (IST) Reevaluation - DSH evaluators work with Sheriff’s jail staff to conduct reevaluations via video conference for IST inmates currently on the DSH waitlist for restoration services. Those on the waitlist for 30 days or more are prioritized for IST Reevaluation. If the reevaluation finds the felony defendant has stabilized in custody, the Court is notified criminal case proceedings can resume.

Jail Based Competency Restoration (JBCT) – Up to 44 beds (32 male, 12 female) at the Rio Cosumnes Correctional Center (RCCC) for restoration of local Felony IST defendants who have been committed to the Dept. of State Hospitals (DSH) for restoration. DSH funding to SSO for JBCT with UC Davis contracted by Adult Correctional Health to provide the restoration treatment.

Public Guardian LPS/Murphy’s Conservatorship Placement – Felony IST defendants returned from the Dept. of State Hospitals to jail unrestored are evaluated for conservatorship. If the defendants is diagnosed with a mental health disorder, there is an active complaint, indictment, or information charging a felony involving death, great bodily harm, or a serious threat to the physical well-being of another, a probable cause finding, and a medical finding of current substantial danger of physical harm to others, the Court can make a referral to the Public Guardian (PG) for Murphy conservatorship. The PG will complete an investigation, if all legal criteria are met, the PG will petition the probate court for Murphy conservatorship. If Murphy conservatorship is granted, the PG will make a referral to

Behavioral Health Services (BHS) for placement in a secured setting. If the defendant does not meet Murphy criteria, and as a result of a mental health disorder they are unable to provide for their basic personal needs for food, clothing or shelter and they are placed on a hold and certified as gravely disabled, the inpatient psychiatrist can make a referral to the PG for LPS conservatorship. If legal criteria is met, the PG will petition Probate Court for LPS conservatorship. If the LPS conservatorship is granted the PG will make a referral to BHS for services and/or placement. Types of placements include: **Community** – Independent Living, Room and Boards, Crisis Residential Facilities, Residential Care for the Elderly, Adult Residential Facilities, Assisted Living Facilities, Straight Skilled Nursing Facilities (SNF), Transitional Residential licensed board and care homes with in house case management and psychiatric services (requires BHS approval); **Sub-acute** - county contracted secured settings, includes Neuro-Behavioral Programs, Institute for Mental Disease (IMD) long term care SNF with special program to treat mental illness, 60 plus years and older (medical needs plus MH diagnosis), and Mental Health Rehabilitation Centers (MHRC) for 3 to 6 month stay focused on community re-entry for ages 18 -59 (must be on a legal hold to stay at sub-acute, unless signing in voluntarily), State Hospital facility that is County contracted for subacute long term care (highest level of care); **Acute** - MHTC for acute inpatient psychiatric stays 4 to 7 days, other Psychiatric Health Facilities (PHF) or private acute inpatient psychiatric hospitals. Note: The Public Guardian has a policy, based on County Counsel opinion, that Murphy conservatees must be placed in secured settings. The purpose of Murphy conservatorship is protection of the public and treatment, these individuals currently represent a substantial danger to others. All conservatees shall be placed in the least restrictive environment to meet their needs. Only in rare circumstances, where it is clinically indicated shall LPS conservatees who are gravely disabled and unwilling/ incapable of accepting treatment, be placed in independent living or room and board. This requires Manager approval as well as high intensity BHS outpatient services, CARE+, medication management and other supports to meet the needs of the conservatee.

[Sheriff's Reentry Services](#) – Rehabilitative vocational, educational, and treatment services that aim to reduce recidivism and prepare offenders for successful community reintegration. Evidence based assessment tools are utilized to determine program placement. Upon release from custody, ongoing program services are available in the community for up to a year.

Medi-Cal/CalAIM Justice Involved Initiatives include [Providing Access and Transforming Health](#) (PATH), Population Health Management (PHM), and the County Behavioral Health Delivery System to serve individuals transitioning to the community from jail where the Medi-Cal/CalAIM application process, Behavioral Health (BH) assessments for Collaborative Courts, BH linkage, Re-entry planning, and 90 day pre-release services are all done in custody. At full implementation in 2024, case management, clinical consultation (physical & BH), lab/radiology, community health worker, MAT, medication and medication administration services will all be available through CalAIM. Enrollment in CalAIM and other safety net services is done through the Department of Human Assistance ([DHA](#)) staff embedded within jail facilities.

Adult Day Reporting Centers (ADRC's) – Probation operates three ADRC locations with intensive on-site and community supervision for individuals 18 and over who have been assessed as having a moderate to high-risk to reoffend and high criminogenic needs. Depending on client needs, the phased program lasts 9 to 12 months. ADRC includes cognitive-behavioral treatment classes; referrals to community-based organizations; job skill assessments; vocational training; group, individual or family counseling; educational services including assessment, GED preparation, and testing; emergency housing; family support services; pro-social activities; and participation in the Community Outreach Program to provide restitution to victims. Adult Correctional Health nurse navigators and Behavioral Health mental health clinicians are onsite for screening and referral services.

Expungement/Record Modification – [Superior Court](#) and [Probation](#) have resources to assist individuals who would like to seek criminal record expungement or modification.

NEW SERVICES 2023: Enhanced Care Management (ECM) and Community Supports (CS) are foundational components under the State's new California Advancing and Innovating Medi-Cal (CalAIM) initiative. ECM is a whole-person, interdisciplinary approach to comprehensive care management that addresses clinical and non-clinical needs of high-cost, high-need managed care members across multiple delivery systems. CS are non-traditional support services provided “in-lieu” of more costly services, including hospitalizations and nursing facility stays covered by Medi-Cal. Sacramento County is working to implement ECM and CS expansion for justice involved individuals being released from jail, starting in January 2024. Additional health service resource information is available [here](#).

NOTE: The ongoing staffing crisis for health professional positions has impacted go-live/start-up, current and expansion plans and operations for many of the [behavioral health services available](#).

Sacramento County Collaborative and Specialized Courts

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Recovery Treatment Court (formerly Drug Court)	Defendants charged with non-violent drug possession, violations of probation, and certain drug-related and property crimes.	Residential and outpatient services including detoxification, substance misuse, mental health treatment, relapse prevention, and reentry services; drug testing, case management, housing, and therapeutic (yoga, nutrition, mind-body) services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated or the case may be dismissed.	10 - 18 months	80 - 125	Court, Probation, Attorneys, Dept. of Health Services, Dept. of Human Assistance, and Service Providers
Mental Health Treatment Court (MHTC)	Non-violent defendants diagnosed with specified mental health disorders or co-occurring mental and substance use disorders, approved for participation by the DA's Office.	Residential and outpatient services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Full Service Partnership supports such as housing, employment, education and transportation. Random drug/alcohol testing. Upon completion, suspended jail time is lifted, probation may be terminated, and the case may be dismissed.	12 - 18 months	150 - 200	Court, Attorneys, Dept. of Health Services, Probation, and Mental Health and Substance Use Treatment Service Providers
Prop 36 Court	Defendants charged with non-violent drug possession and transportation for personal use.	Report to Probation for drug/alcohol/mental health screening and treatment referral. Four "fee for service" multi-disciplinary sites are available for detoxification, residential, outpatient, methadone, sober living, vocation, family counseling, literacy, and communication skills services. 12 weeks intensive outpatient services, 12 weeks aftercare, and proof of completion required. Upon completion, plea is withdrawn and case dismissed, terminating probation.	6 months	100	Court, Attorneys, Substance Use Prevention and Treatment, and Service Providers
DUI Treatment Court (DUTC)	Defendants charged with a 3 rd , 4 th , or 5 th VC 23152 (DUI) within a 10-year period.	Residential and outpatient services including detoxification, substance misuse, relapse prevention, drug testing, and case management services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated early.	12 - 18 months	50	Court, Attorneys, Dept. of Health Services, Probation, and Service Providers
Veterans Treatment Court (VTC)	Veterans charged with offenses related to issues from US Military service. No sex, arson or gang offenses.	Any combination of residential and/or outpatient treatment including case management, Veteran mentoring, substance abuse and mental health services, and random drug/alcohol testing by VA and Probation. Upon completion, case is dismissed and sealed, unless other agreement specified.	12 - 18 months	30	Court, Probation. Attorneys, and Veterans Affairs
Reentry Court	Defendants charged with non-violent drug and property offenses eligible for County Jail Prison (CJP) or State Prison.	Program services may begin in custody and upon release include participation in Probation's Adult Day Reporting Center (ADRC), housing, education, vocation/employment, individual and group counseling, and connection to county medical, general and CalFresh services. Upon completion, term of probation is reduced and the jail sentence is vacated or permanently suspended.	12 - 18 months	50	Court, Probation, Sheriff's Office, Attorneys, and Substance Use Prevention & Treatment
ReSET Court (Reducing Sexual Exploitation & Trafficking)	Defendants charged with prostitution or prostitution related offenses; may have other misdemeanor charges.	Prostitution diversion program services include health and wellness education, HIV testing, group and individual counseling, trauma based therapy, wraparound, life skills and peer mentoring services. Upon completion, the initial plea is withdrawn and the case is dismissed.	3 - 6 months	100 - 120	Court, Attorneys, Community Against Sexual Harm (CASH), and Substance Use Prevention & Treatment

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Chronic Offender Rehabilitation Effort (CORE, previously CNO) Program	Misdemeanor offenders within District Attorney Community Prosecution areas with at least 10 arrests, citations, and/or bench warrants within 12 months.	Residential placement is offered in lieu of jail time, which is stayed pending successful completion of program services. Substance abuse and mental health assessment and treatment services provided by County and community-based providers. Homeless and related social, health and fiscal services also available. Upon completion, sentence is modified per terms of an original plea agreement.	90 days	20 - 40	Court, Attorneys, County Substance Use Prevention and Treatment, Sac Steps Forward, and Service Providers
City Alcohol Related Treatment (CART)	Individuals with 5 alcohol-related City Code citations and/or arrests in the past 18 months, need housing, and are in-custody for a violation of probation.	As a term of probation, 30 days of residential alcohol treatment services at Volunteers of America (VOA) in lieu of a 30 day jail sentence. Upon completion, the 30 day jail sentence is permanently stayed.	30 days	80	Sac City Attorney, Sacramento Police Dept., VOA, Sac Housing and Redevelopment Agency
Loaves and Fishes Court (for Homeless)	Homeless low level traffic and misdemeanor offenders (trespassing, drinking in public, etc.) who cannot afford to pay court fines and fees.	On-site consultation at Loaves and Fishes Legal Clinic, with the Public Defender's Office. Legal remedies through the Court include resolving infraction cases through participation in community-based services, such as clean and sober living facilities and/or mental health treatment. In addition it allows individuals to work off debt from tickets and fines by doing community service hours. Completion of community services hours may result in the case being dismissed.	3 - 6 months	<i>800 cases processed annually</i>	Court, District Attorney, Public Defender, Loaves and Fishes

Limited Term Grant Programs

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Public Defender Pretrial Support Program *Launched 4/2020 (Partially funded by Fed & State Grants)	Adults in custody and/or released pretrial pending criminal charges and suffering from mental illness. Support services also available to assist Probation's Pretrial Monitoring Clients, as needed.	Social workers embedded in the Public Defender's Office conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, housing and other support services, and provide ongoing case management support after release. Discharge support from the Exodus Project for individuals released from jail and linked to a Public Defender Social Worker includes transportation, cell phones, access to charging stations, food, clothing, and peer mentorship.	0-6 months	No Cap	Courts, District Attorney, Public Defender, Health Services, Probation, Exodus Project (Contracted CBO)
DSH Felony Mental Health Diversion *Launched March 2021 (Grant funding through June 2024)	Defendants facing felony charges who are likely to become Incompetent to Stand Trial (IST) or found IST; and approved for participation by the Court under PC 1001.36.	Telecare's EMPOWER program includes clinical forensic and housing assessments, outpatient and/or residential services with case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, ongoing specialized mental health services, transportation, employment and education support. Housing provided to 50% of the clients. Social Worker Services provided through the Public Defender's Office. Each participant will have psychiatrist, MD, nurse practitioner, case manager, peer recovery coach, attorney, and social worker. Upon completion, case dismissed.	12-24 months	100	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance, Probation, Telecare (Contracted Provider)



Justice System Data Trends Annual Update



Criminal Justice Cabinet
August 2023

Examining Data Trends – Part of the Criminal Justice Cabinet Mission

- Principal mission: **Study the juvenile and criminal justice system**, identify strengths and deficiencies, and formulate policy, plans and programs for changes that will enhance public safety, reduce crime, advance fair and timely disposition of cases, and maximize the efficient use of resources
 - The Cabinet serves as a vehicle for discussion and coordination to accomplish mutual goals.
 - The Cabinet is committed to providing the coordinated leadership necessary to establish cohesive public policies based on research, evaluation and monitoring of policy decisions and programs implemented.

Factors To Consider For Data Needed To Study And Inform Decisions

- Historical trends for points from initial justice system contact (Intercept 1), through deflection, arrest, booking, pretrial and diversion services, prosecution, sentencing and post-conviction services Intercept 5), and case closure can indicate areas efforts are working well and areas that may need to be further examined to identify and address deficiencies



- Aggregate data presents volume at specific points and can provide insight into how many people are encountered at each intercept and illuminate service gaps
- Identifiers to track individuals as they move through the justice system intercepts allows more precise understanding of service need and frequency of engagement with different systems, but requires identifiers to be linked from different systems and databases



Data - What We Have

Presenter Notes
2023-08-23 21:53:33

<https://openjustice.doj.ca.gov/data>
<http://www.cityofsacramento.org/Police/Crime/Crime-Statistics>
<https://data.cityofsacramento.org/search?collection=Dataset&tags=polic>
https://www.sacsheriff.com/pages/crime_report_log.php
<https://www.folsom.ca.us/government/police/crime-information/police-log>
<https://www.elkgrovepd.org/transparency/crime>
<http://cityheights.net/347/Incident->

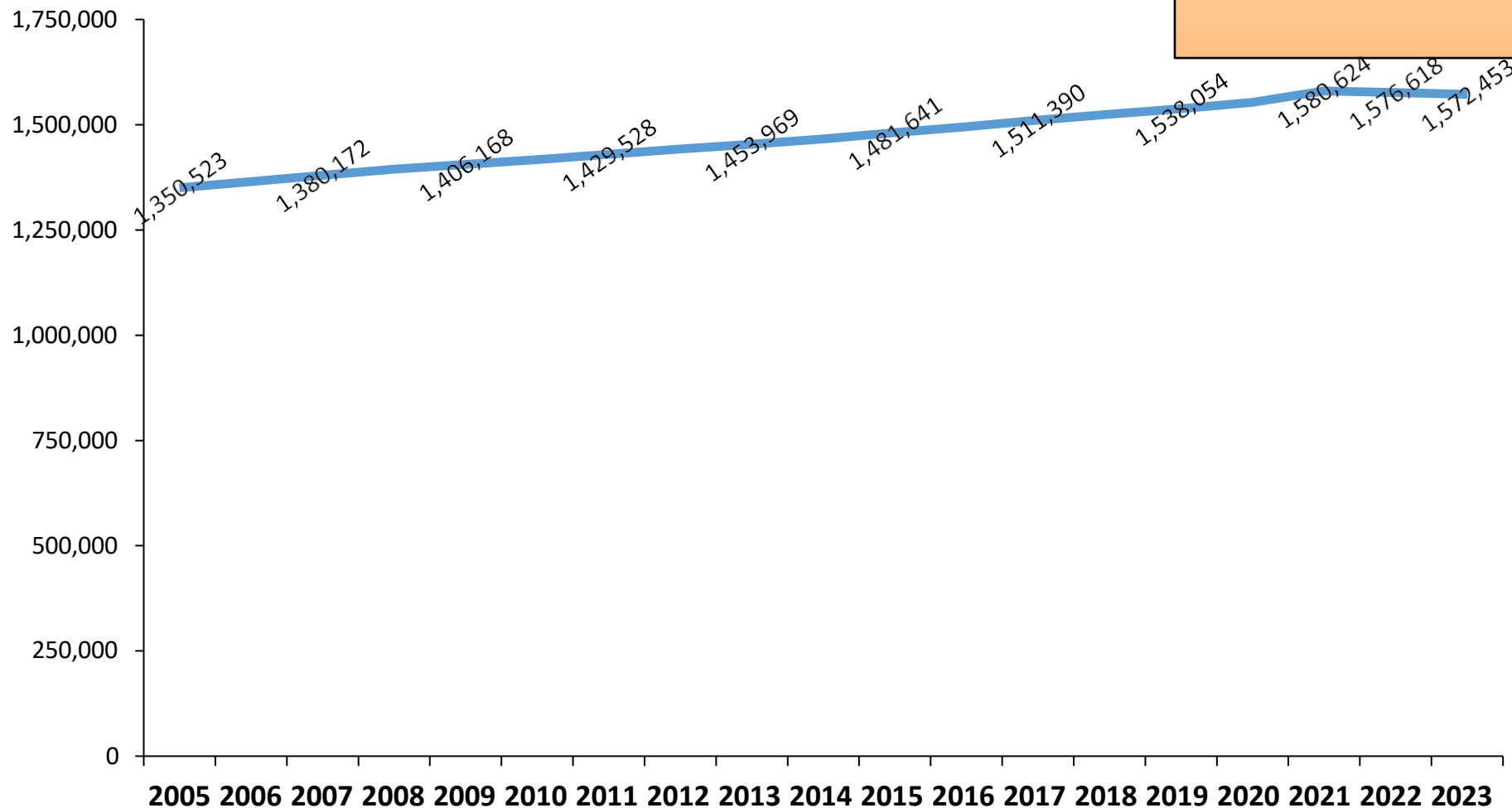
PUBLIC DATA

- CA Dept. of Justice - Criminal Justice Data by County on Adult Probation, A Dispositions (Referral to DA for Filing, etc.), Reported Crime and Clearance & Arrest-Related, DV Related Calls for Assistance, Juvenile Court & Probation and CJ Personnel, LE Officers Killed or Assaulted, Use of Force Incident Reporting
 - Primarily annual totals, but some monthly and race stats
- Monthly Crime Report Data Posted by Sac PD, Sac Sheriff, and other local LEA'
- BSCC Monthly & Quarterly Jail Profile Reports - Bookings, Releases (by timeframe), ADP (broken out & overall), Medical & MH Services, AB 109 Stats (PRCS, Parole & PC 1170(h))
- BSCC also has Juvenile Detention Profile Reports and Data in Annual Reports to the Legislature
- Sheriff's Office Transparency Website - Adult Correctional Health Stats (Mays Consent Decree),
- Probation Website – Juvenile & Adult Populations, Some Program and Service Stats
- Judicial Council of CA – Annual Reports to Legislature, Felony Sentencing, Straight vs. Split Sentences, Petitions for Mod/Revocation of Supervision, FTA Warrants in Felony Cases, Pre-Trial Mental Health Diversion
- MHSA Annual Report – FY Stats on Programs Funded
- Homeless Point in Time (PIT) Count – Every Two Years
- County Population – Demographics from CA Dept. of Finance (US Census)
 - *What does your agency track? Do you track data that will help others understand what your agency is doing? Should it be posted publicly and/or further shared with partners?*



Sacramento County's Population Increased 16.7% from 2005 to 2022 (16.4% increase 2005 to 2023)

Presenter Notes
2023-08-23 21:53:33
Source:
<https://dof.ca.gov/Forecasting/Demographics/Estimates/>



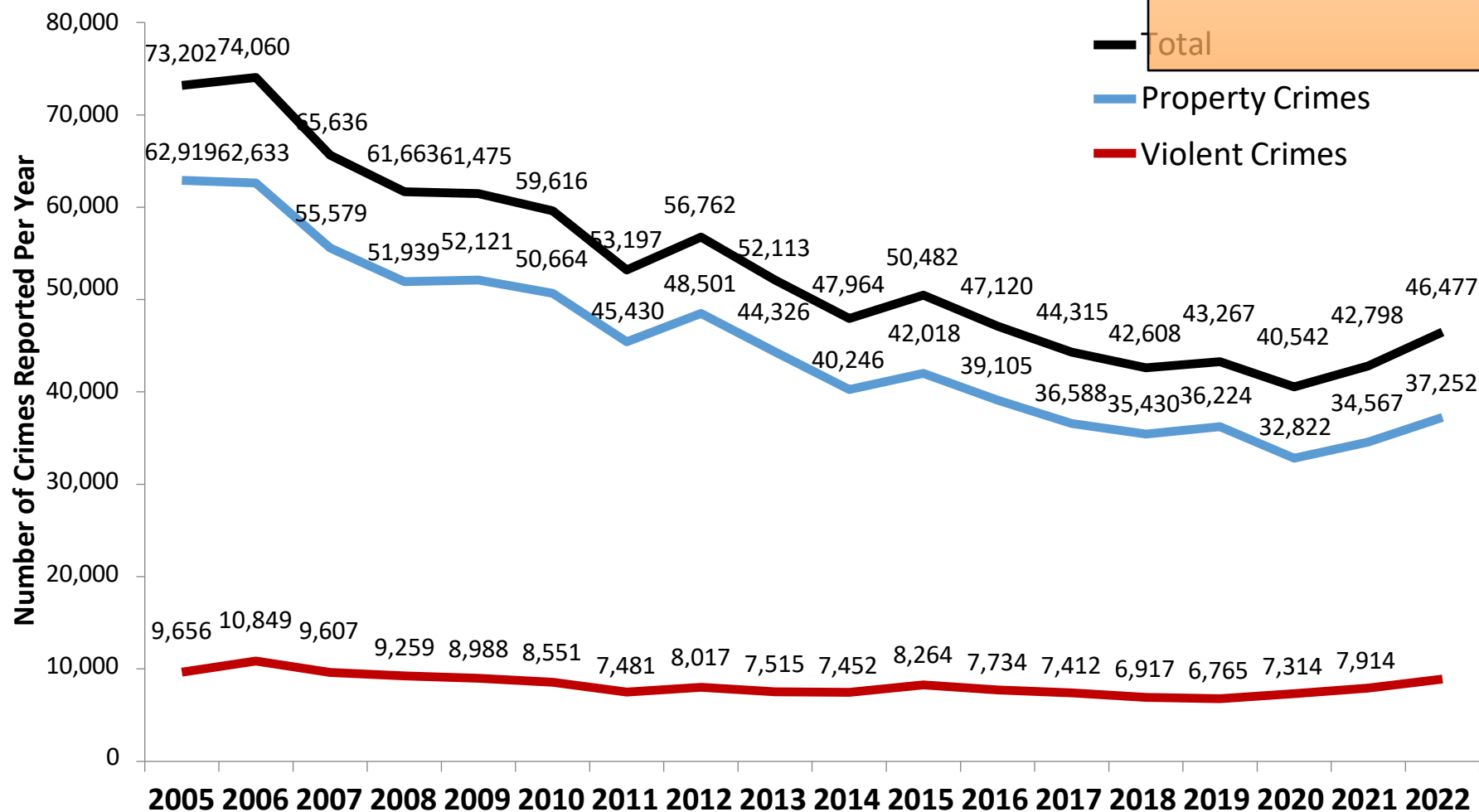


Reported Crime Down 37% from 2005 to 2022

Violent Crime Reported Up 31% from 2005 to 2022

Presenter Notes
2023-08-23 21:53:34

Source: DOJ Open Data webpage -
<http://openjustice.doj.ca.gov/data>



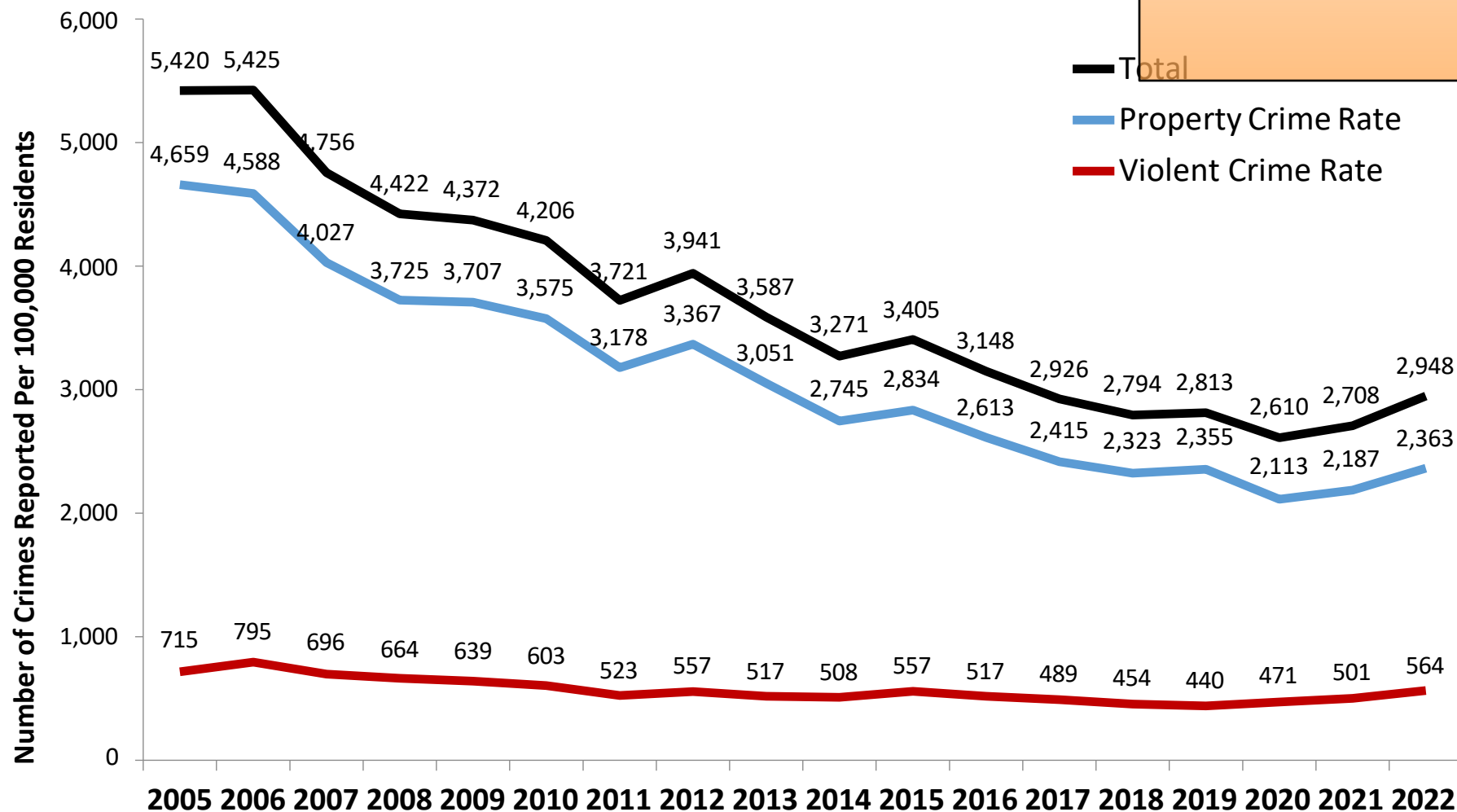


Crime Rate Down 46% Overall 2005 to 2022

Violent Crime Rate Up 28% 2019 to 2022

Presenter Notes
2023-08-23 21:53:35

Source: DOJ Open Data webpage -
<http://openjustice.doj.ca.gov/data>
Rate = Crimes Reported per 100,000 residents

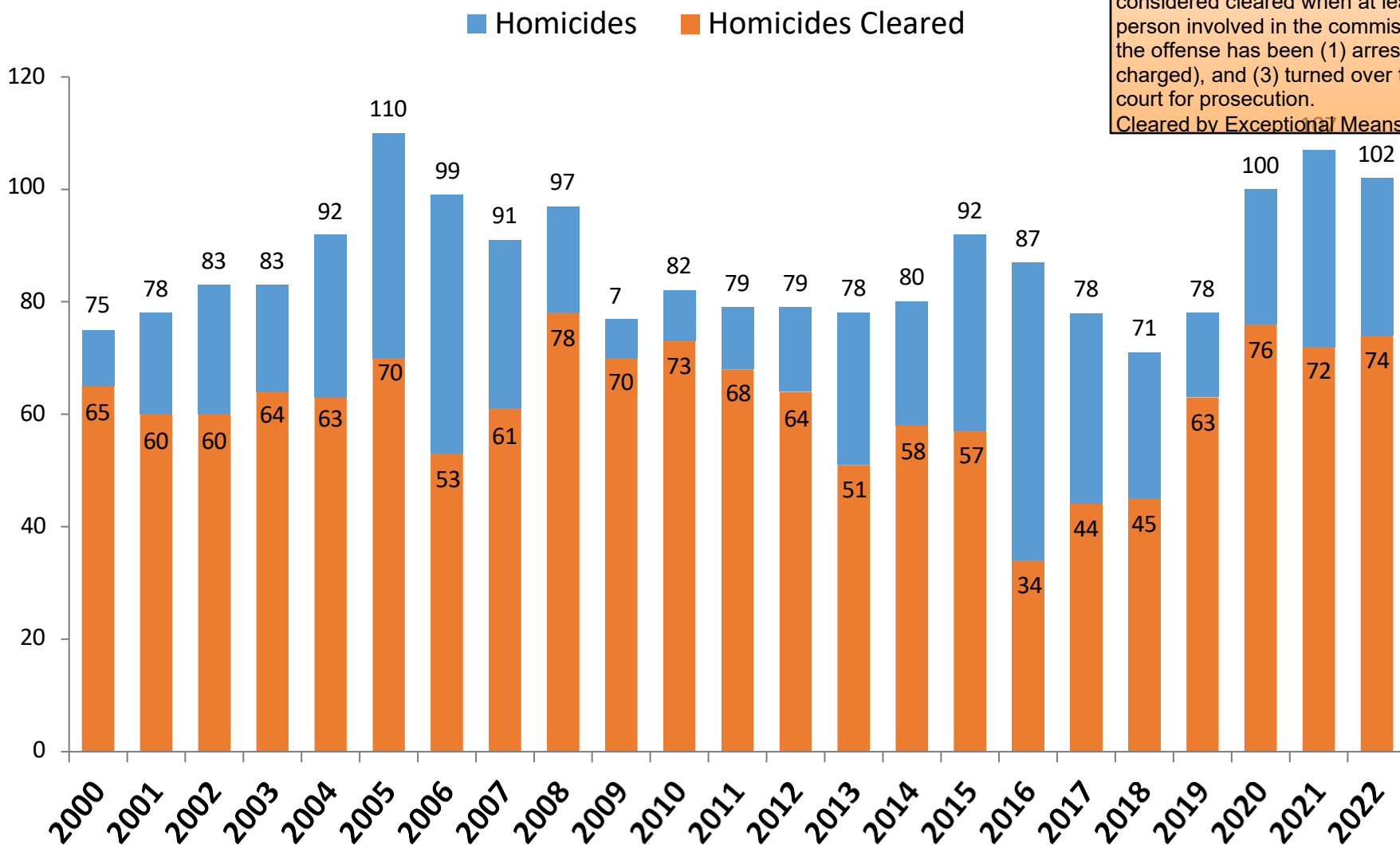




Homicides 2000 to 2022

Presenter Notes
2023-08-23 21:53:36

Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>
Cleared by Arrest: An offense is considered cleared when at least one person involved in the commission of the offense has been (1) arrested, (2) charged), and (3) turned over to the court for prosecution.
Cleared by Exceptional Means: A

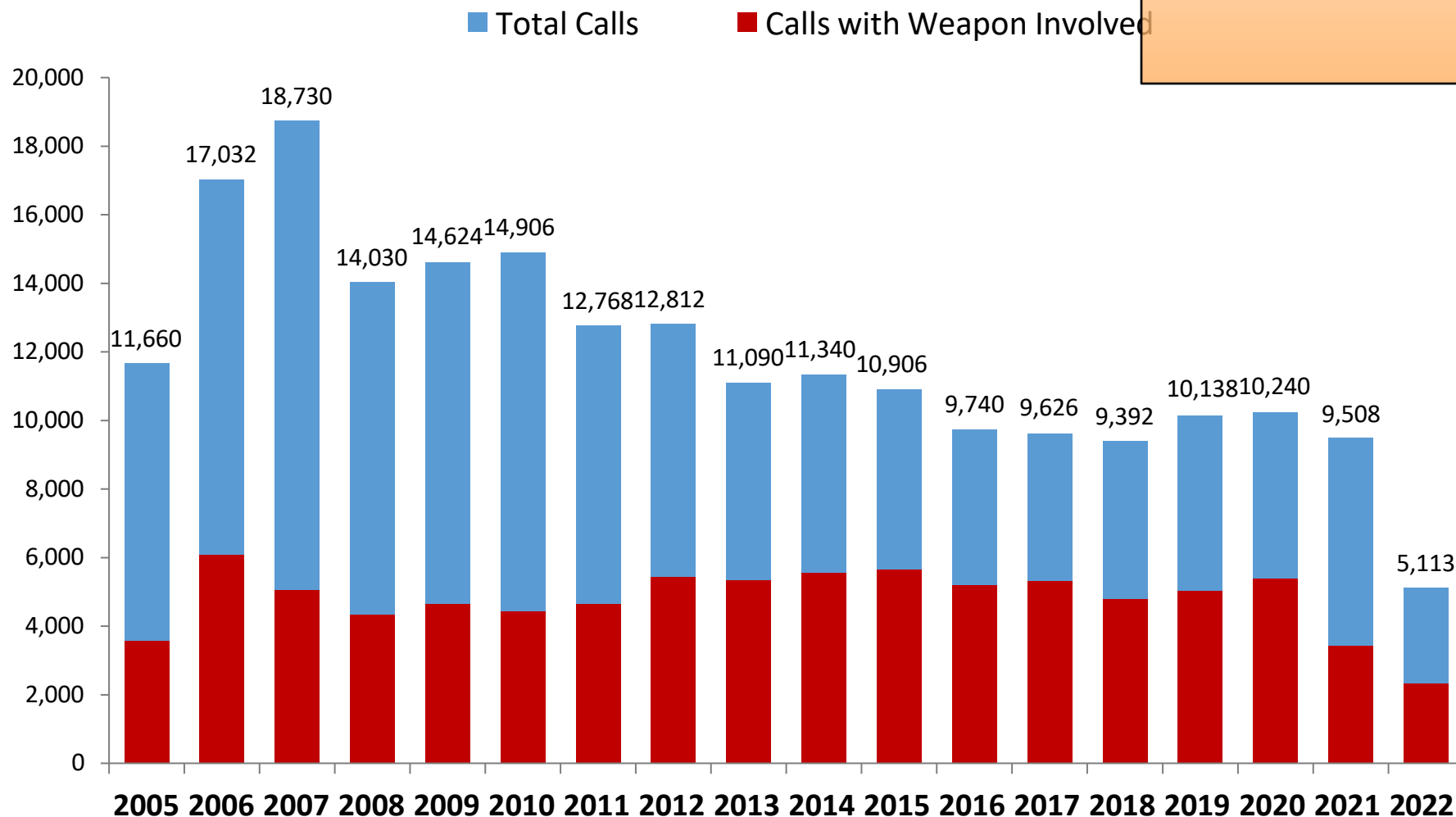




Domestic Violence-Related Calls for Assistance Down 56% from 2005 to 2022

Presenter Notes
2023-08-23 21:53:37

Source: DOJ Open Data webpage -
<http://openjustice.doj.ca.gov/data>
<https://openjustice.doj.ca.gov/exploration/crime-statistics/domestic-violence-related-calls-assistance>



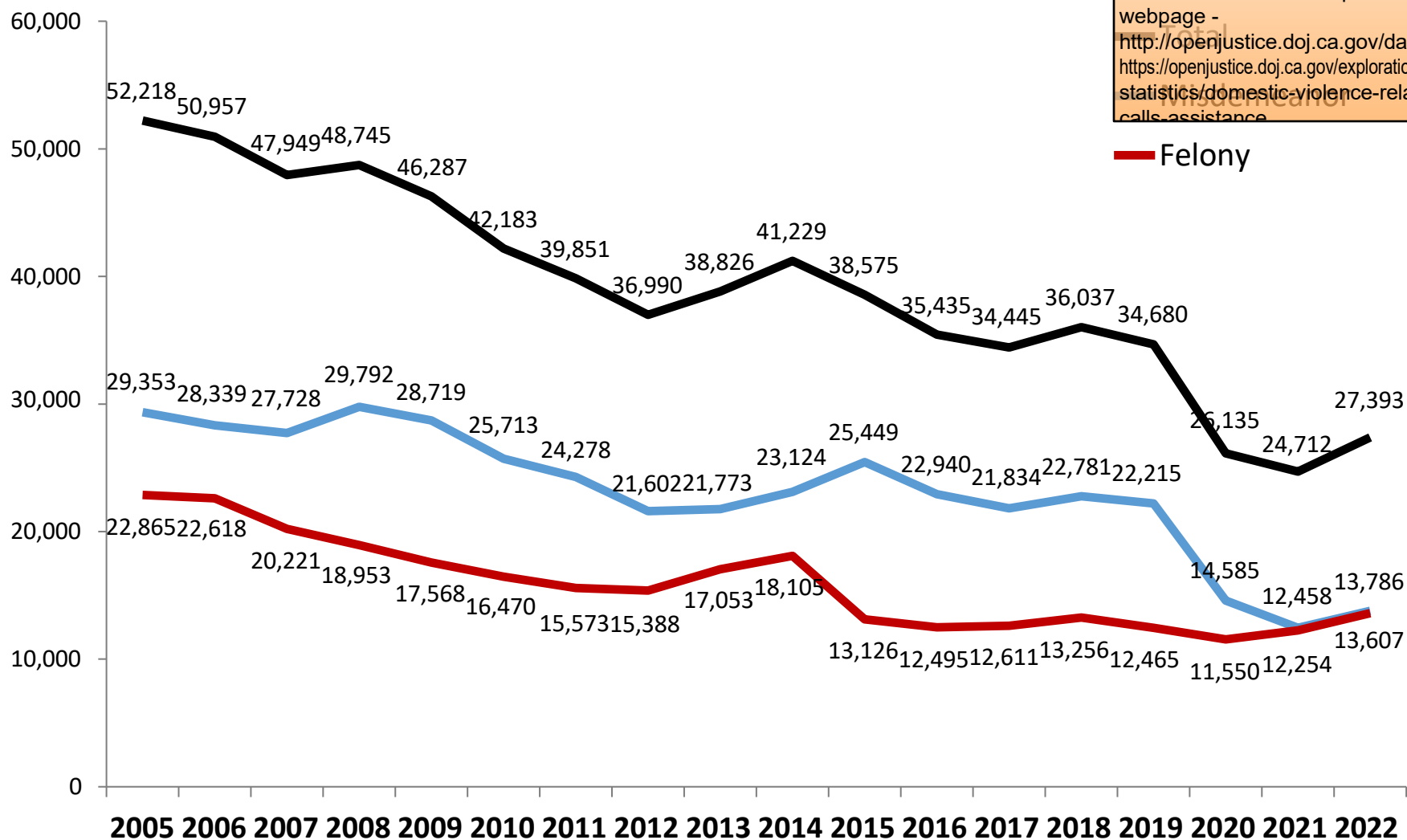


Adult Arrests Down 48% from 2005

(Misdemeanor Arrests Down 53%; Felony Arrests Returned to Pre-COVID Level)

Presenter Notes
2023-08-23 21:53:38

NOTE: Later you will see that jail bookings increase was driven by felony arrests. Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>
<https://openjustice.doj.ca.gov/exploration/crime-statistics/domestic-violence-related-calls-assistance>

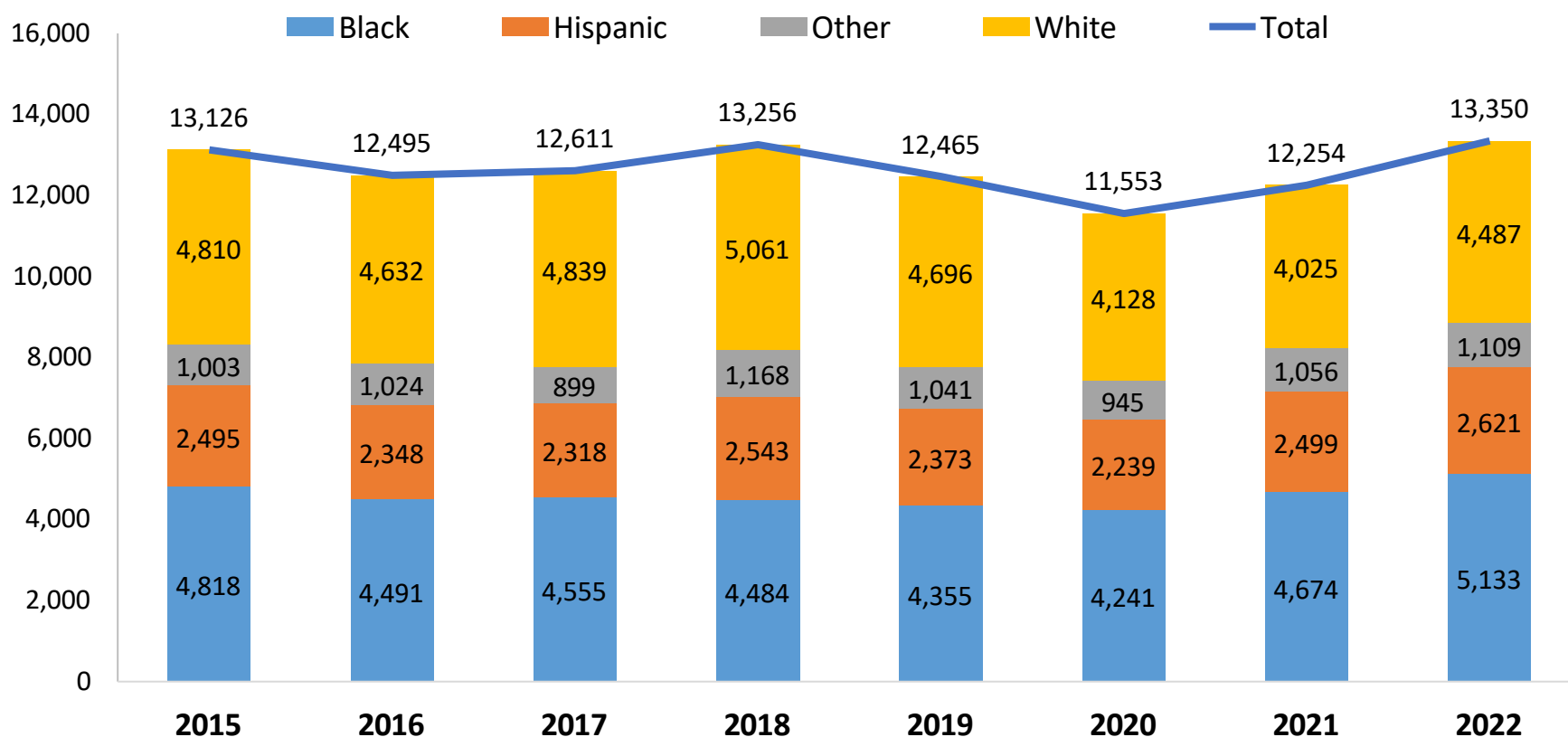




Adult Felony Arrests By Race 2015

NOTE: PSJA was created in part to help the County and all justice partners work together on identifying and addressing racial disparities in our local justice system. The level of disparity has been pretty consistent, but as constraints on use of the jail tightened in 2020 and 2021, the proportion of felony arrests increased.

	Felony Arrests								Total
	2015	2016	2017	2018	2019	2020	2021	2022	
Black	37%	36%	36%	34%	35%	37%	38%	38%	38%
Hispanic	19%	19%	18%	19%	19%	19%	20%	20%	20%
Other	8%	8%	7%	9%	8%	8%	9%	8%	8%
White	37%	37%	38%	38%	38%	36%	33%	34%	42%

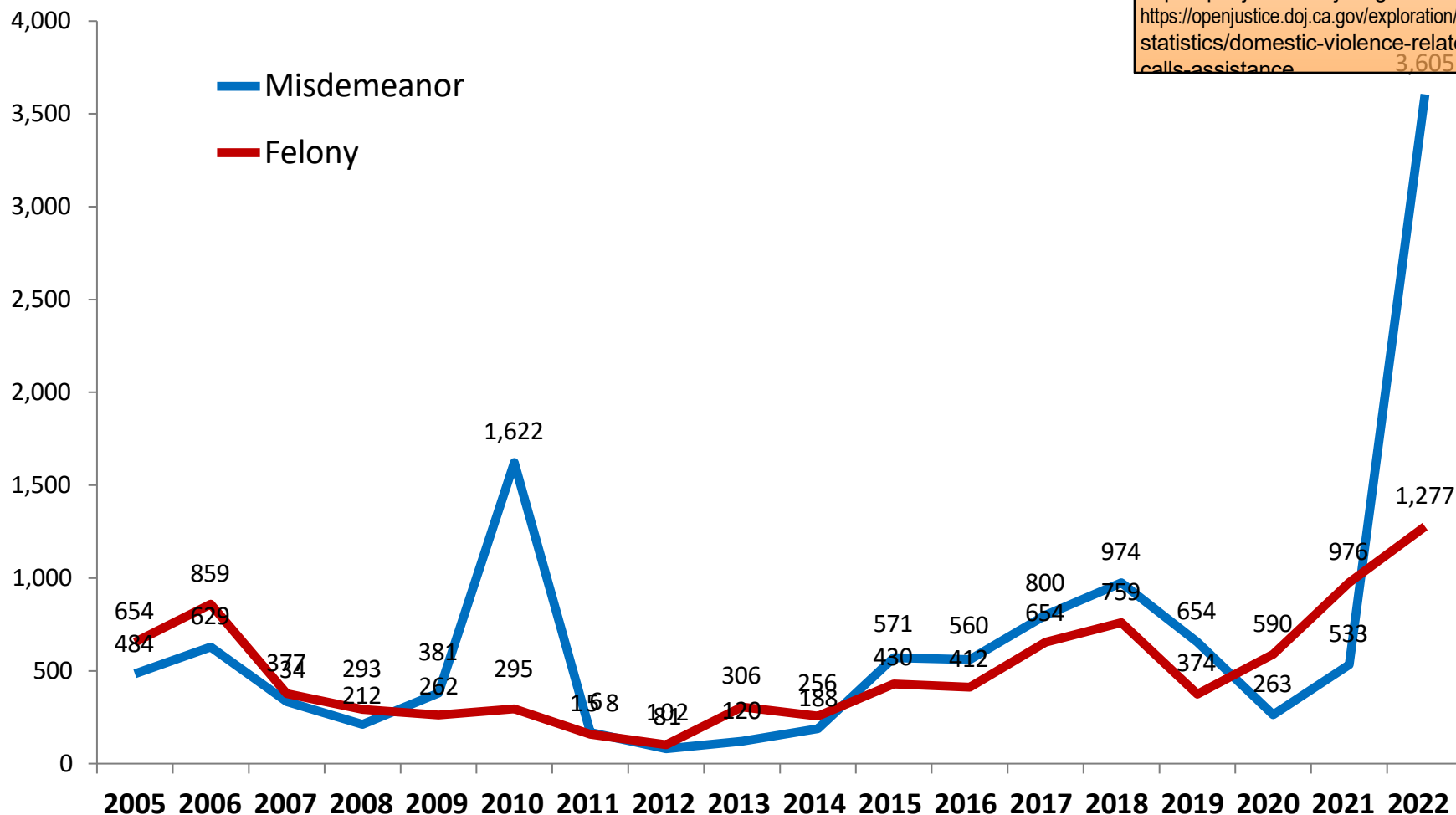




Adult Arrests for Other Jurisdiction with No Local Charges, 2005 to 2022

Presenter Notes
2023-08-23 21:53:40

NOTE: Later you will see that jail bookings increase was driven by felony arrests. Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>
<https://openjustice.doj.ca.gov/exploration/crime-statistics/domestic-violence-related-calls-assistance>



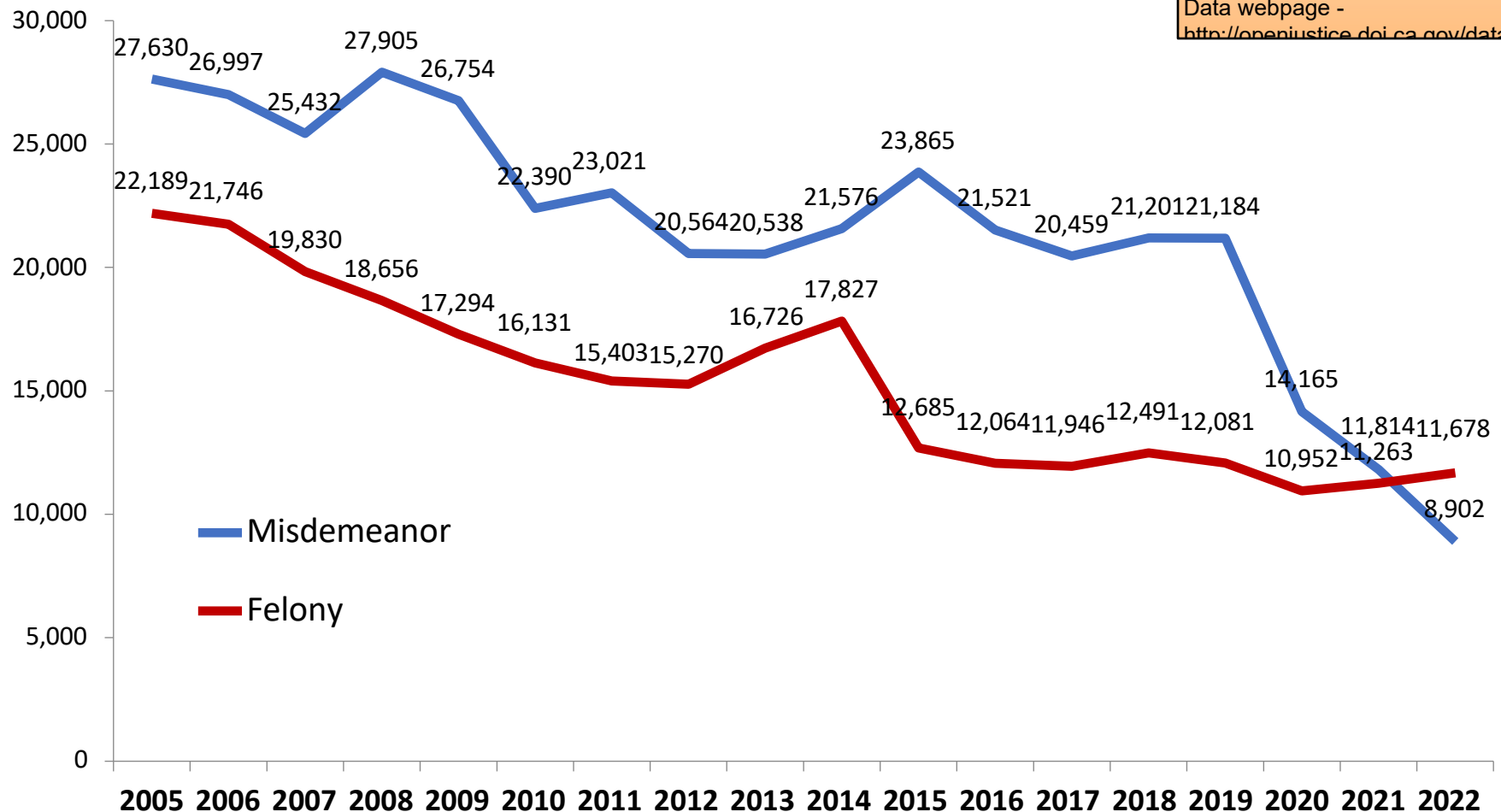


Adult Felony Cases Submitted to DA Down 47% from 2005 to 2022

(Misdemeanor Cases Submitted Down 69% from 2005 to 2022)

Presenter Notes
2023-08-23 21:53:41

NOTE: While arrest is an important decision point to study, as a follow up to arrest, this slide can be referenced to show that MOST arrests result in cases submitted to the DA for filing, which is a start point for the criminal court case process. Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>





Adult Cases Submitted to DA's Office

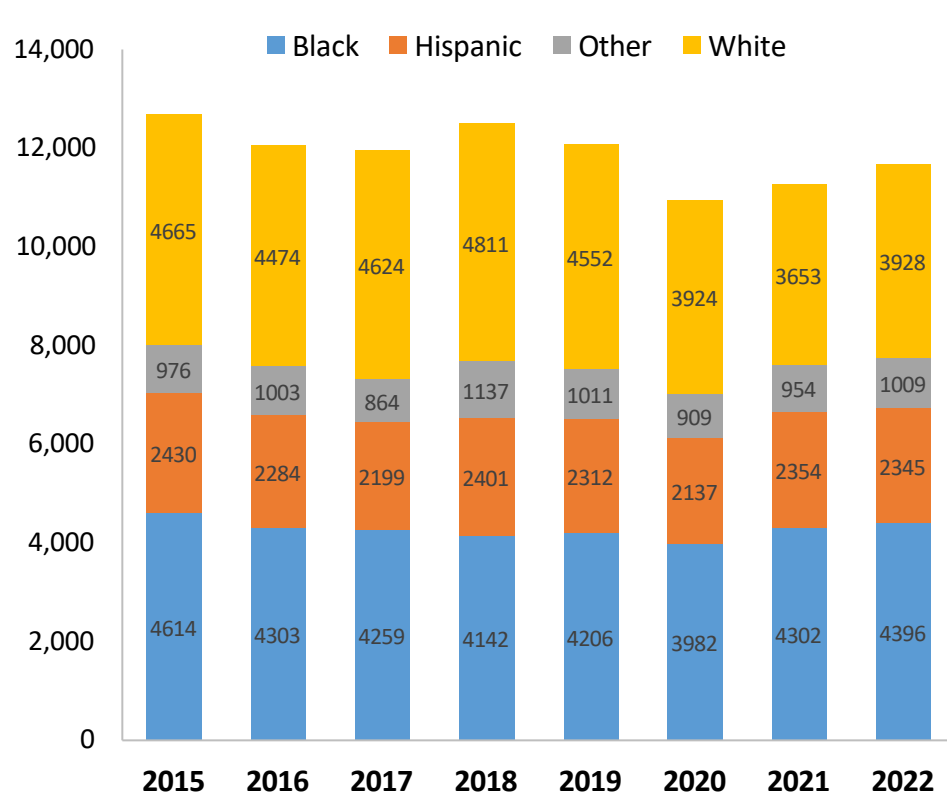
Presenter Notes
2023-08-23 21:53:42

Again, this slide shows the increase in disproportionality by race in 2020 and 2021.

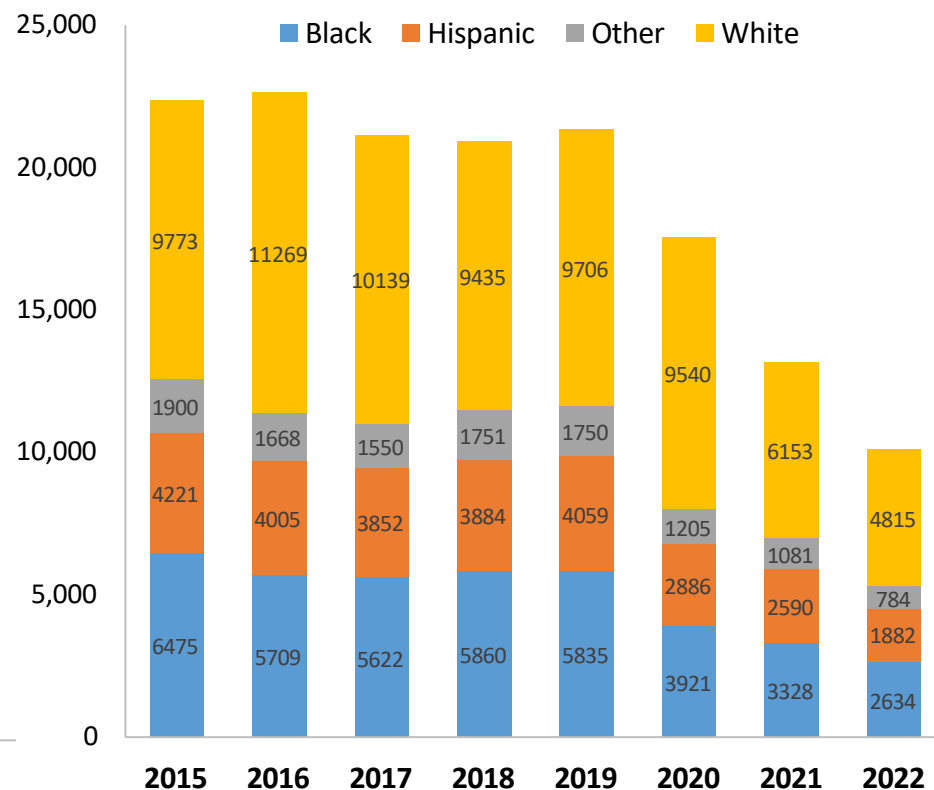
Although misdemeanor cases are not shown by race proportion, they also had an increase in disproportionality by race in 2020 and 2021. Source: DOJ Open Data webpage - <http://openjustice.doi.ca.gov/data>

Adult Felony Cases Submitted to DA's Office								
	2015	2016	2017	2018	2019	2020	2021	2022
Black	36%	36%	36%	33%	35%	36%	38%	38%
Hispanic	19%	19%	18%	19%	19%	20%	21%	20%
Other	8%	8%	7%	9%	8%	8%	8%	9%
White	37%	37%	39%	39%	38%	36%	32%	34%

Adult Felony Cases Submitted to DA



Adult Misdemeanor Cases Submitted to DA

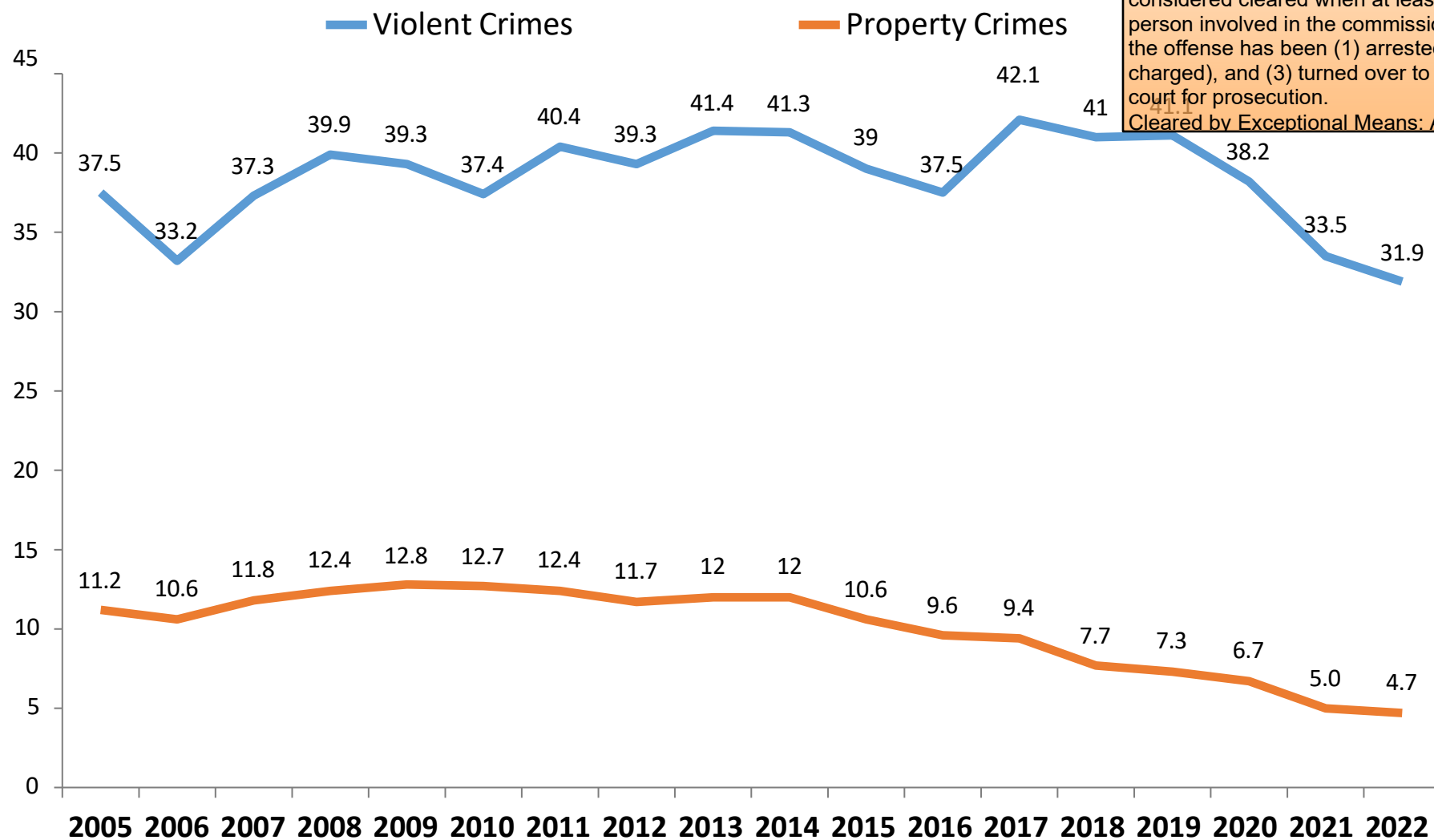




Crime Clearance Rates from 2005

Presenter Notes
2023-08-23 21:53:42

Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>
Cleared by Arrest: An offense is considered cleared when at least one person involved in the commission of the offense has been (1) arrested, (2) charged), and (3) turned over to the court for prosecution.
Cleared by Exceptional Means: A



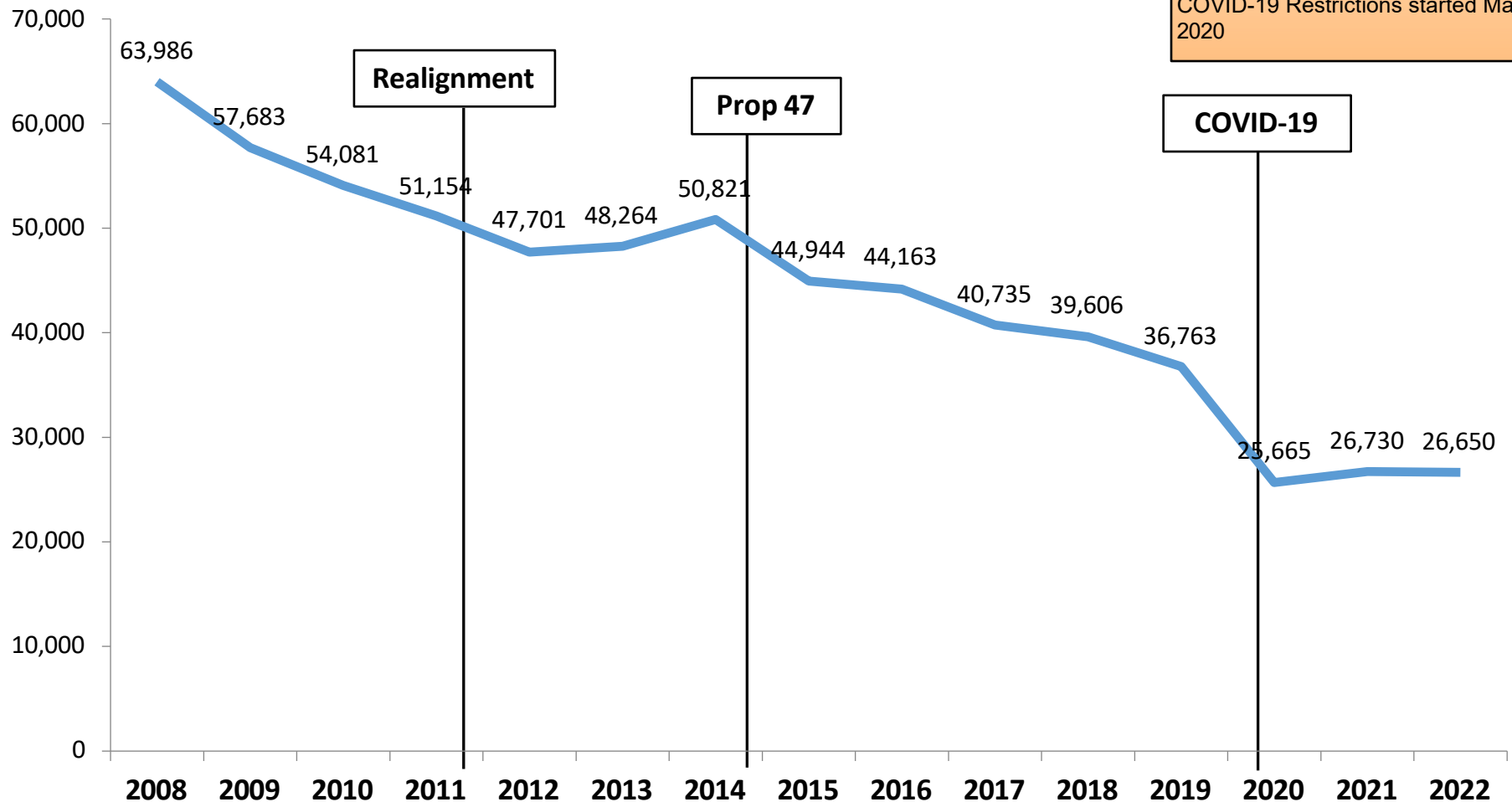


Jail Bookings Down 58% from 2008

In 2020, Booking Criteria Increased Due to COVID-19 Emergency Order

Presenter Notes
2023-08-23 21:53:43

Source: BSCC Jail Profile Survey
https://bscc.ca.gov/m_dataresearch/
AB 109 and AB 117 Public Safety
Realignment became effective
10/1/2011 Prop 47 became effective
11/5/2014
COVID-19 Restrictions started March
2020

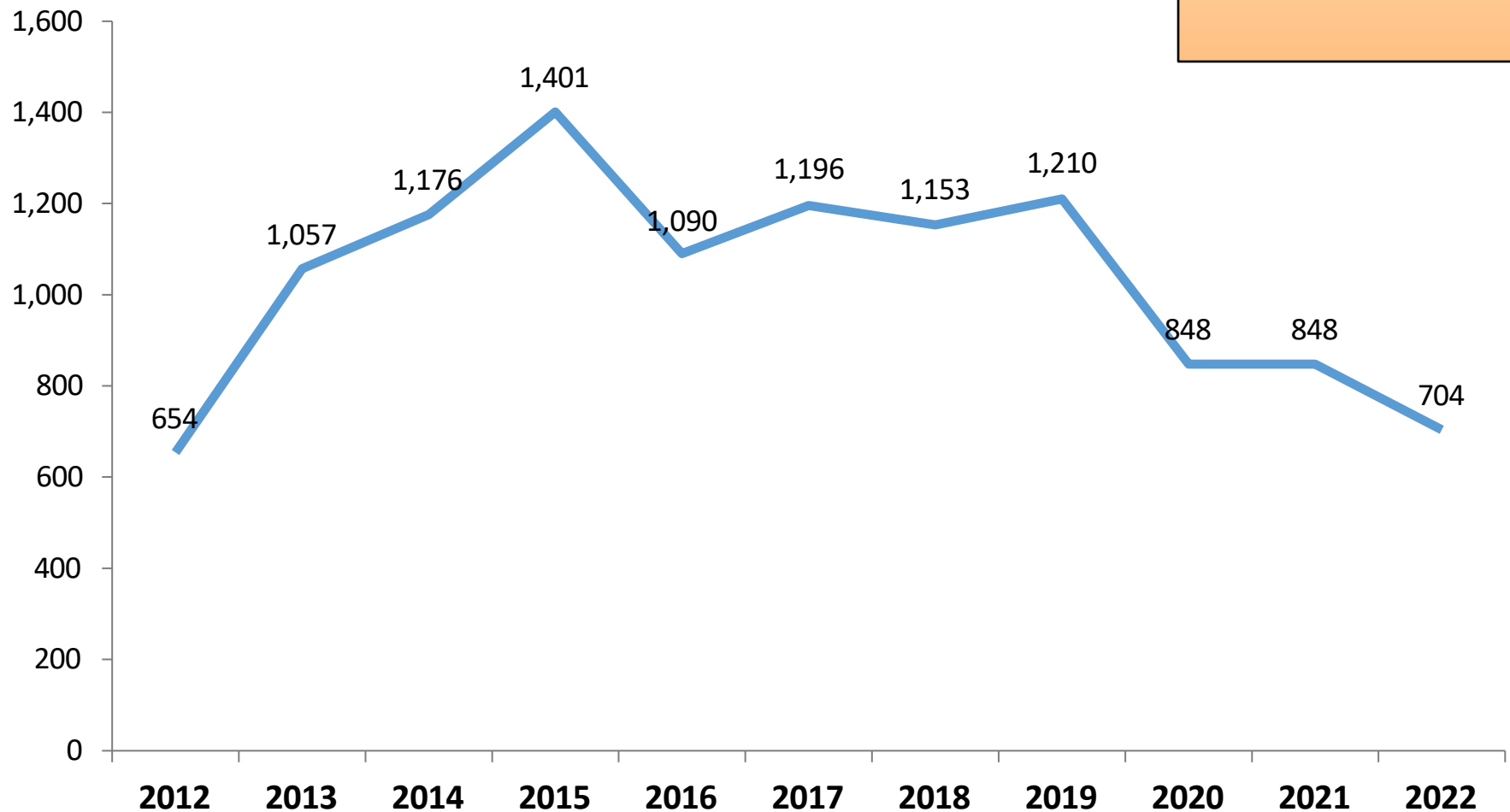




PRCS Offenders Booked for Flash Incarceration 50% from 2015 Peak to 2022

Presenter Notes
2023-08-23 21:53:43

Source: Board of State & Community
Corrections, AB 109 Monthly Jail
Profile Survey. AB 109 Jail Profile
Survey – BSCC (ca.gov)



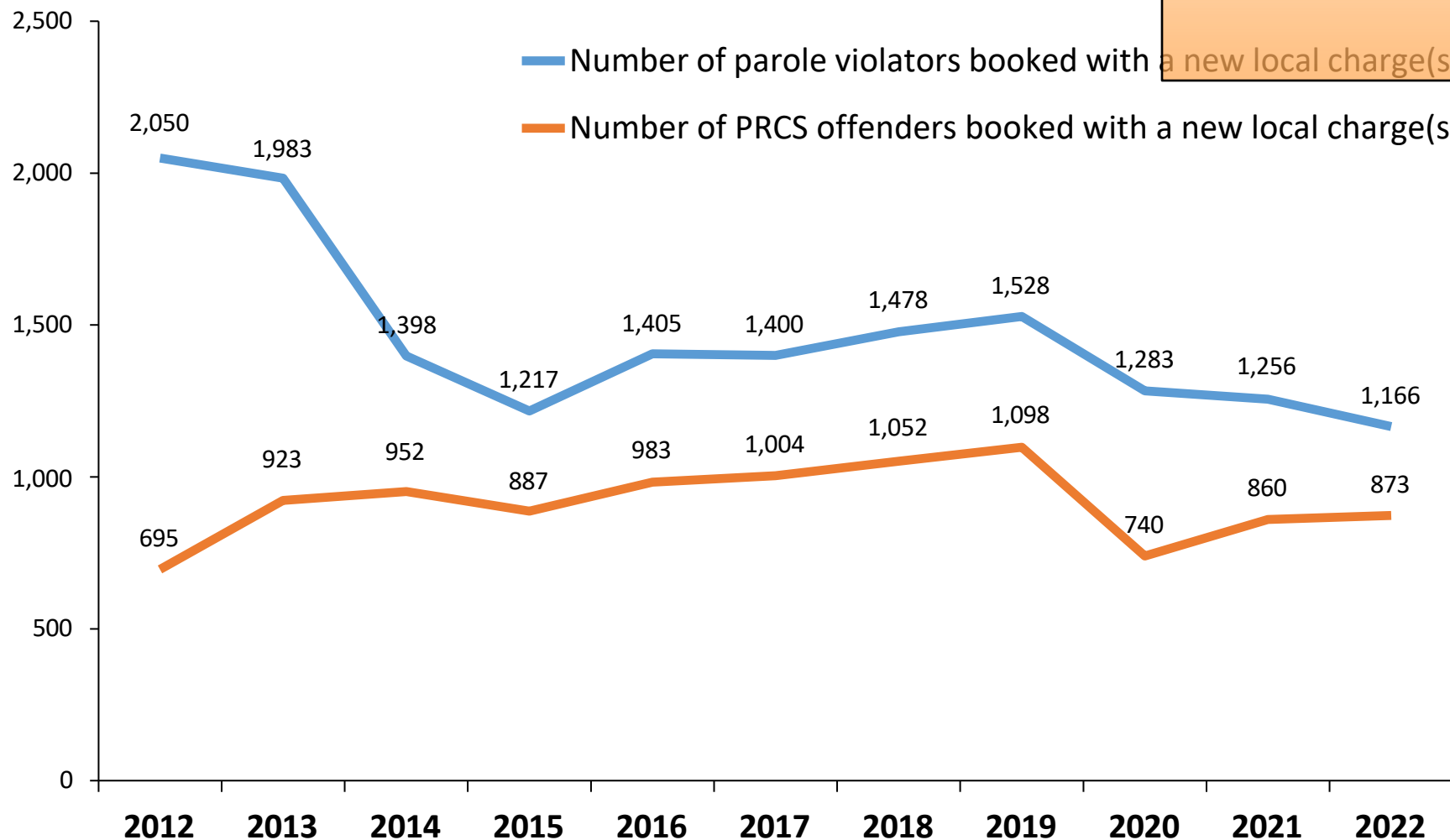


Parolees Booked with New Charges Down

PRCS Booked with New Charges Up 26% 20

Presenter Notes
2023-08-23 21:53:44

Source: Board of State & Community
Corrections, AB 109 Monthly Jail
Profile Survey. AB 109 Jail Profile
Survey – BSCC (ca.gov)

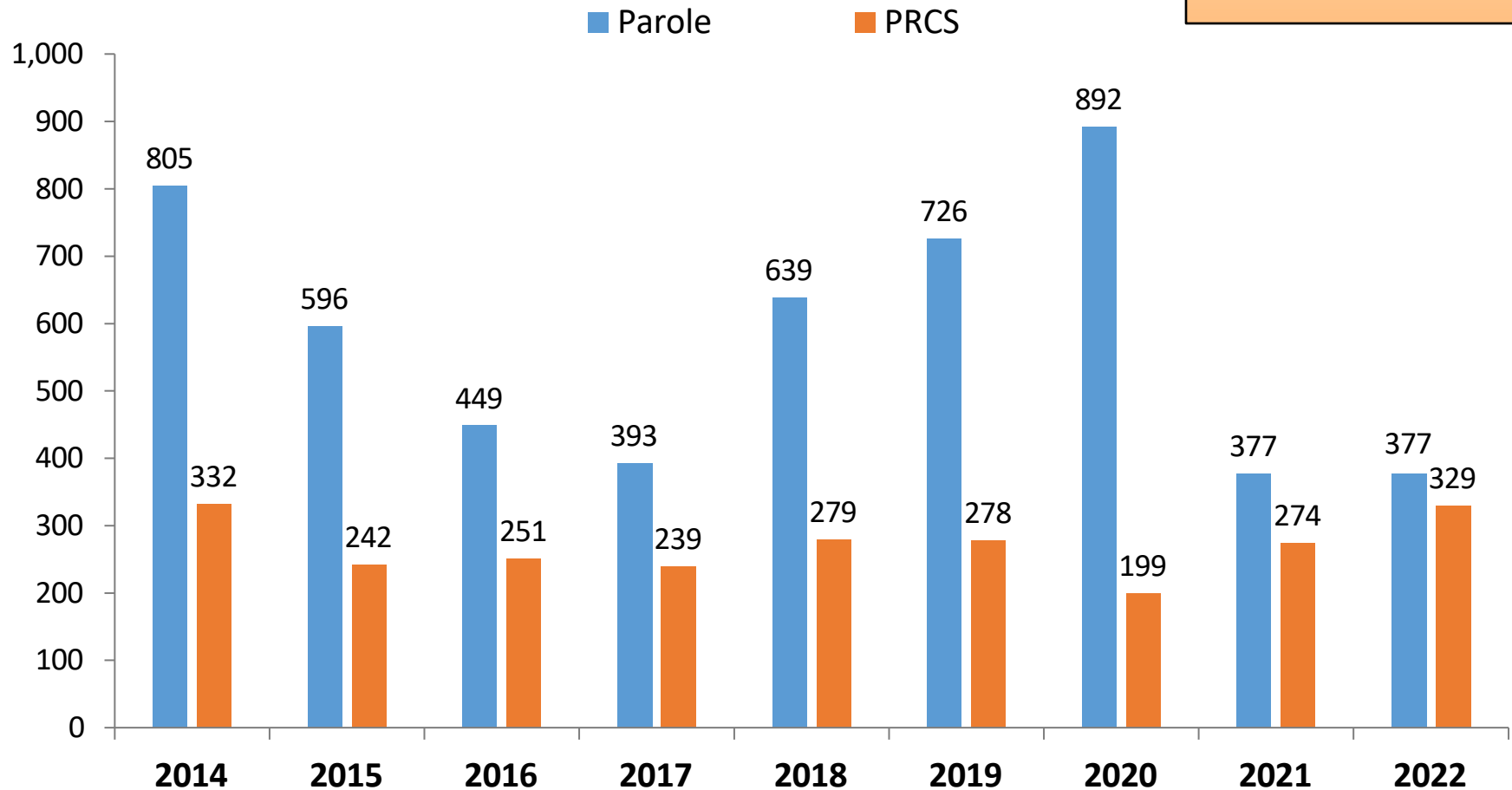




PRCS and Parole Petitions for Motion Revocation 2014 to 2022

Presenter Notes
2023-08-23 21:53:44

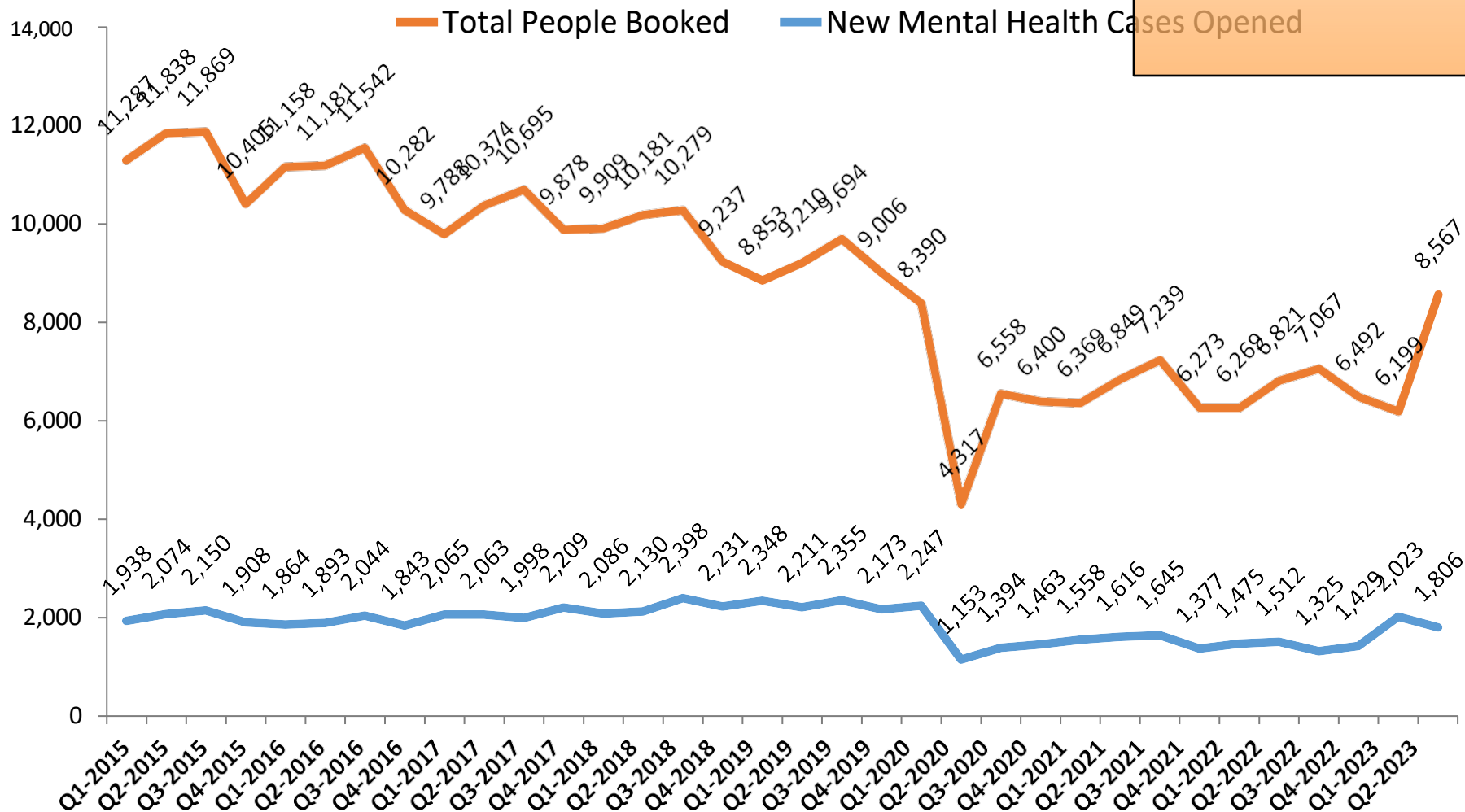
Source: JCC -
<https://www.courts.ca.gov/38232.htm>





Quarterly Bookings Declined 24% from 2015 to 2023 New Mental Health Cases Declined 7%

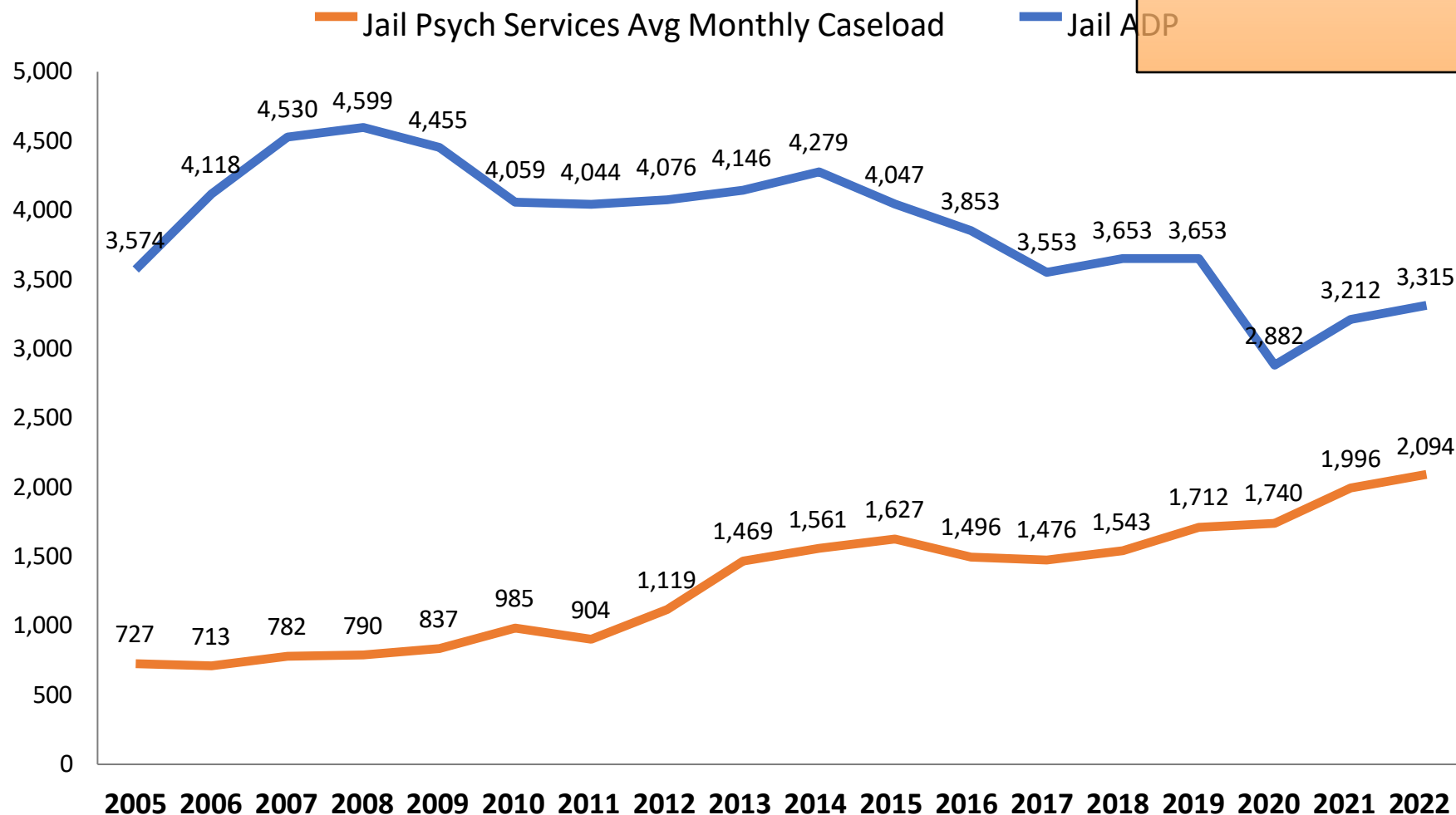
Presenter Notes
2023-08-23 21:53:45
Source: BSCC Jail Profile Survey
https://bscc.ca.gov/m_dataresearch/





Jail Psychiatric Services Average Monthly Caseload Increased 188% from 2005 to 2022

Presenter Notes
2023-08-23 21:53:46
Source: BSCC Jail Profile Survey
https://bscc.ca.gov/m_dataresearch/

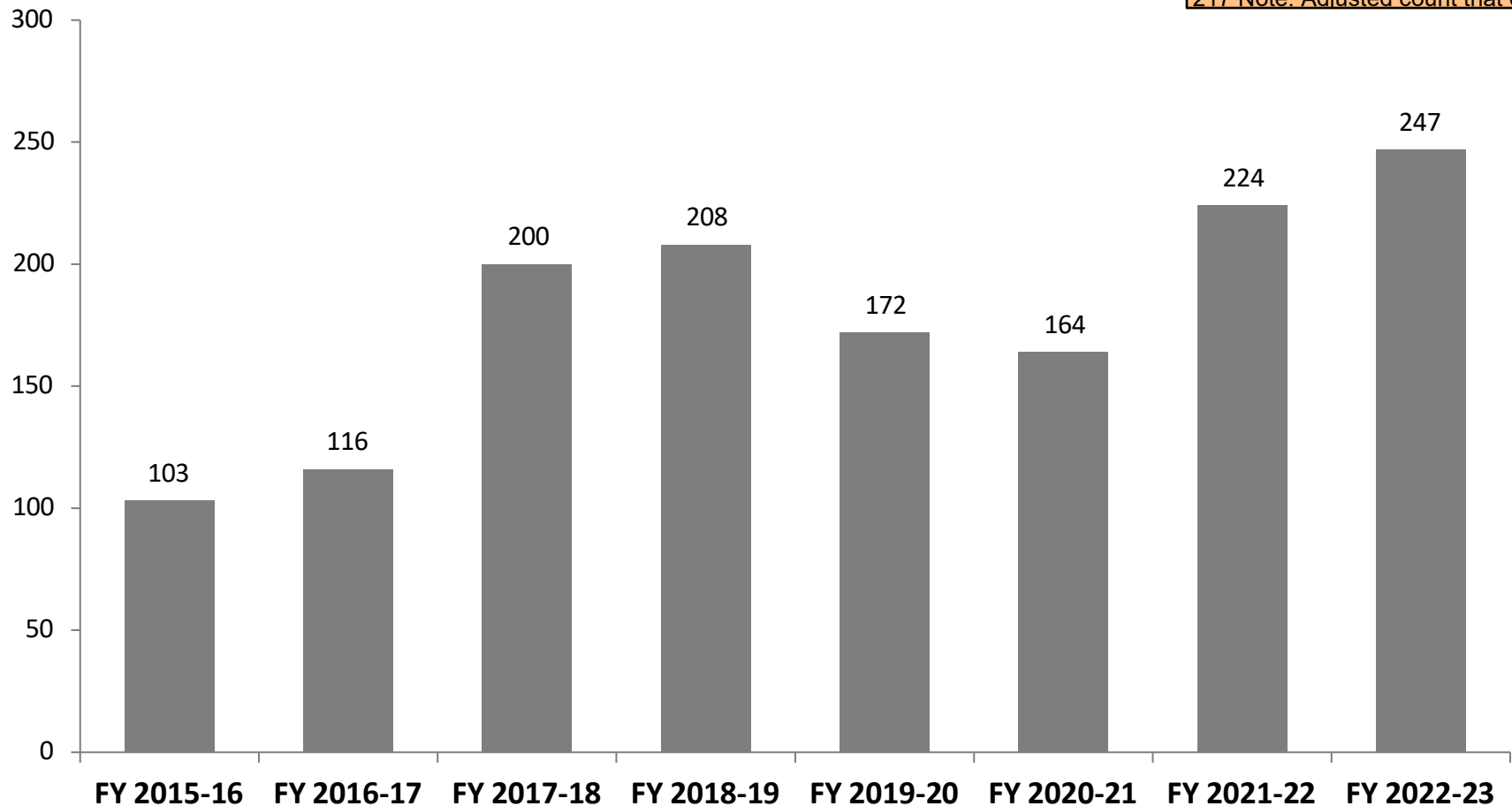




Adult Felony Defendants Incompetent to Stand Trial, Referred to Dept. of State Hospitals for Restoration

Presenter Notes
2023-08-23 21:53:46

Source: CA Department of State Hospitals NOTES...
Revised 7/31/23- Note: IST Growth Cap Excludes Reevaluations and Deaths, which totaled 6, and the County is credited for those accepted in MH Diversion, which was 1. Final Adjusted IST Count for FY 2021-22 = 217 Note: Adjusted count that exclude

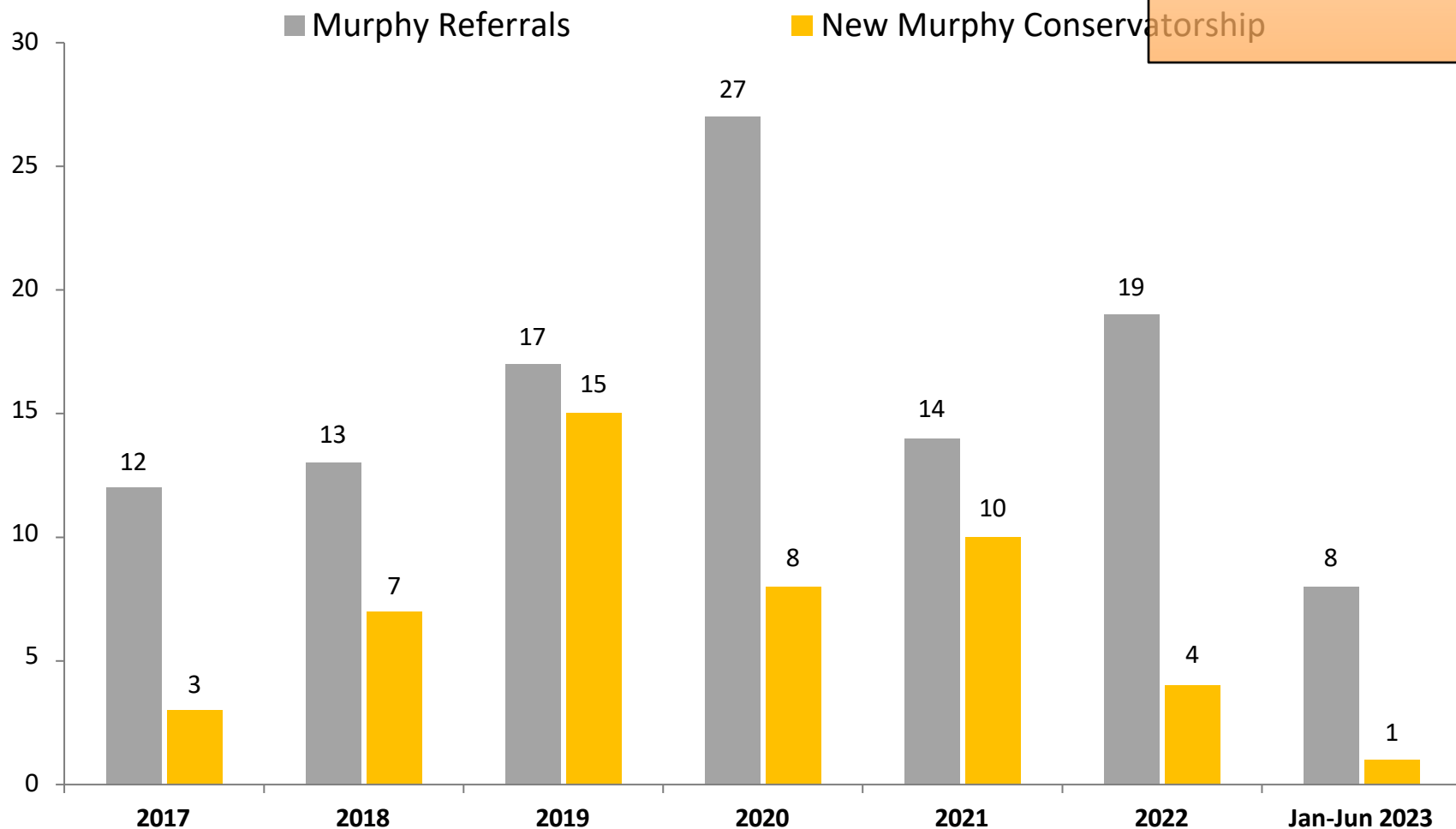




Adult Felony Incompetent to Stand Trial Referred for Murphy's Conservatorship

Presenter Notes
2023-08-23 21:53:47

Source: Sacramento County DCFAS,
Public Guardian's Office

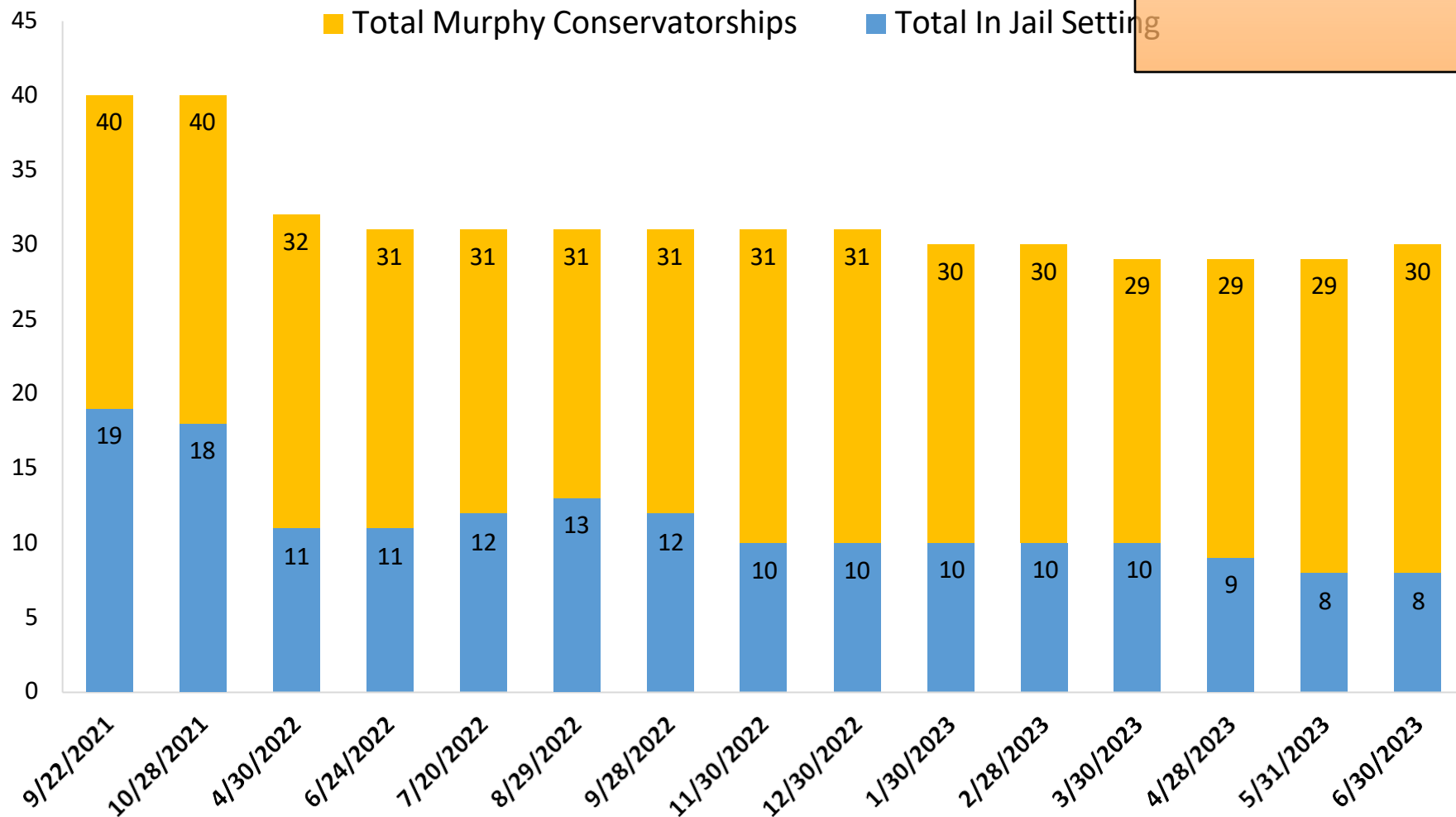




Murphy's Conservatorship Point in Time Total in Jail

Presenter Notes
2023-08-23 21:53:47

Source: Sacramento County DCFAS,
Public Guardian's Office

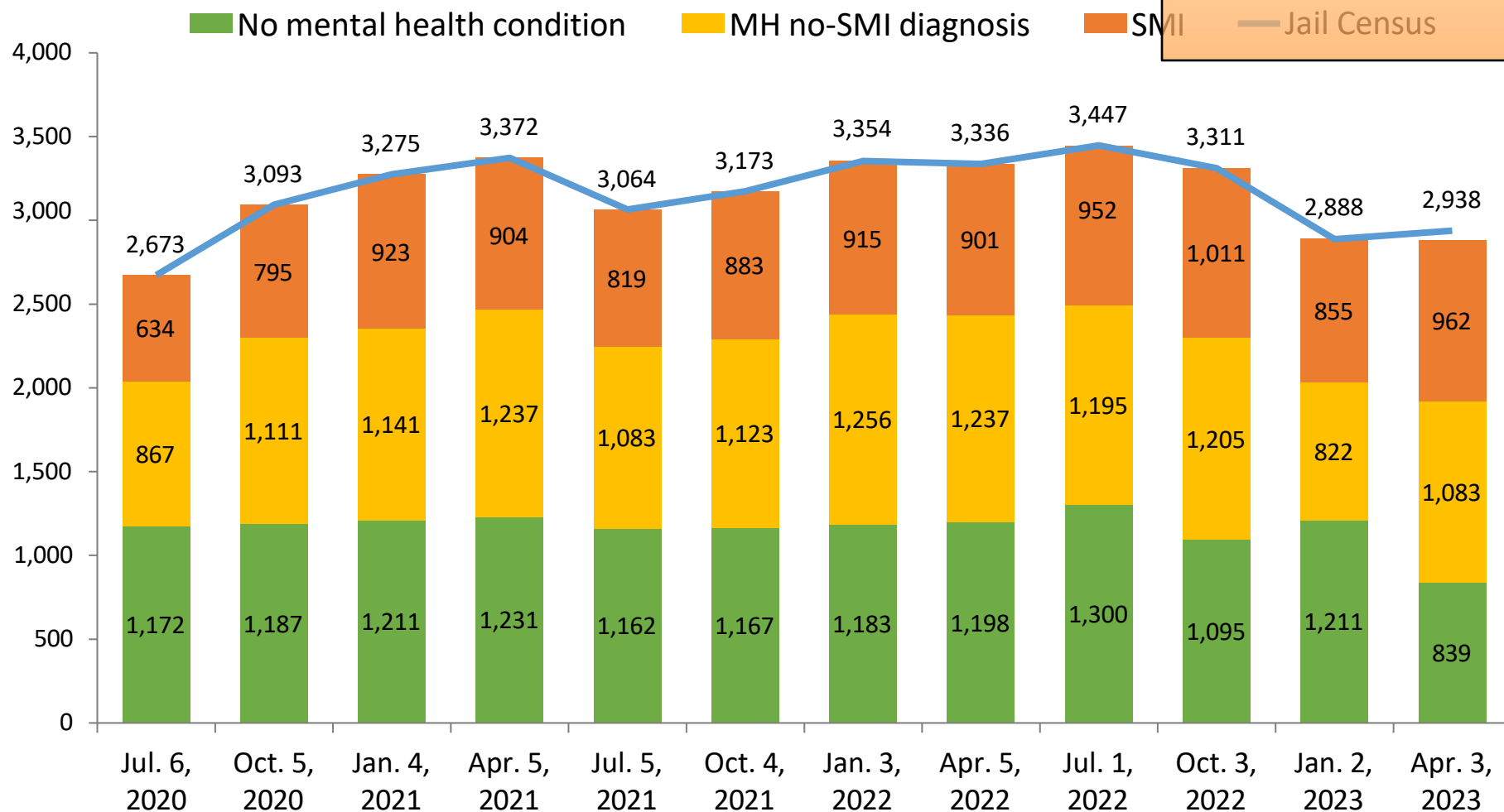




Adult Correctional Health Quarterly Mental Health Reports

Presenter Notes
2023-08-23 21:53:48

Source: SSO Transparency Webpage
<https://www.dropbox.com/sh/pre9pq4sqj3l6w/AAACXGc9Uxukjec8S18WBlkpa?dl=0>



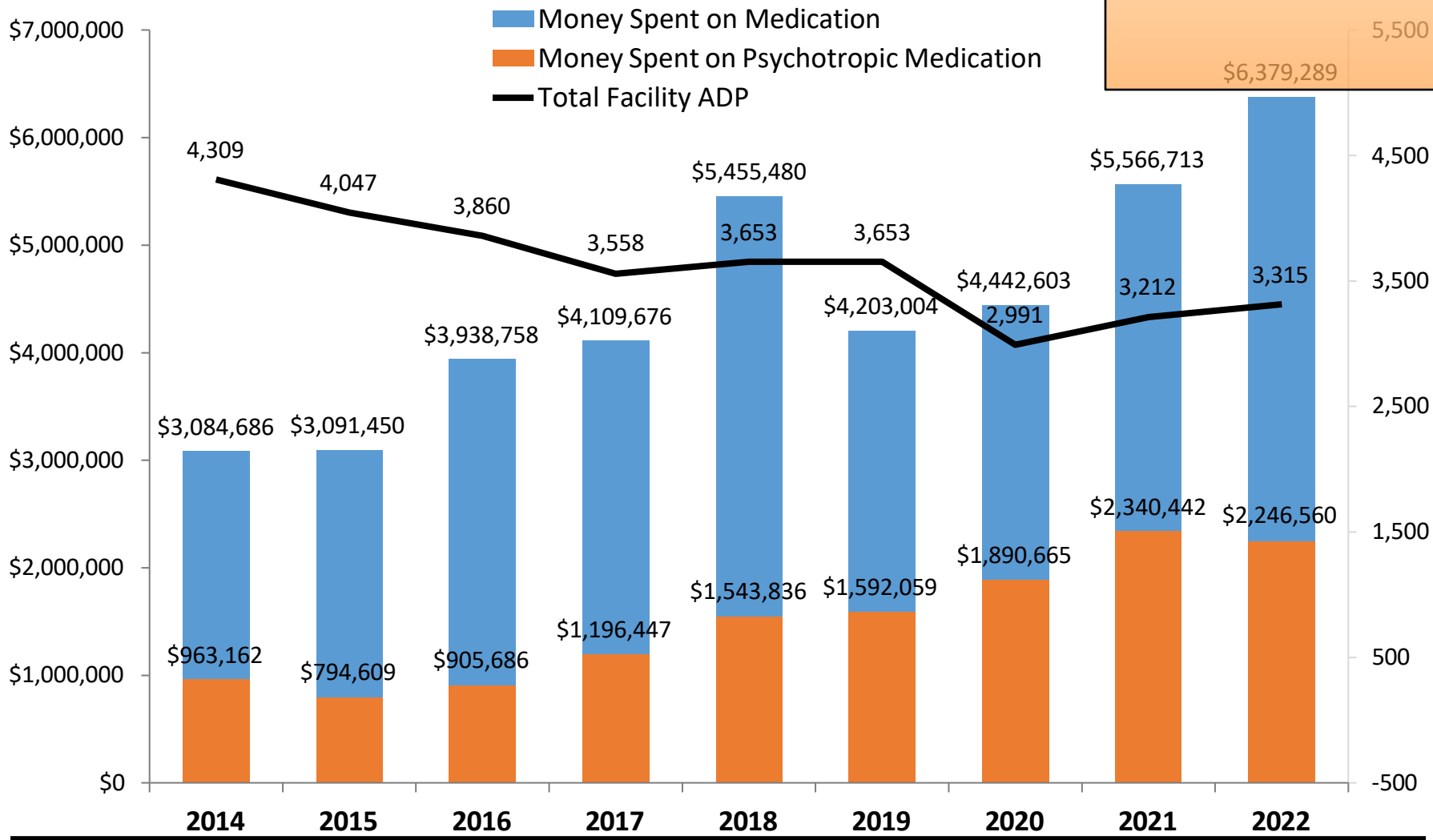


Inmate Medication Costs Up 107% 2014 to 2022

ADP Down 23% 2014 to 2022

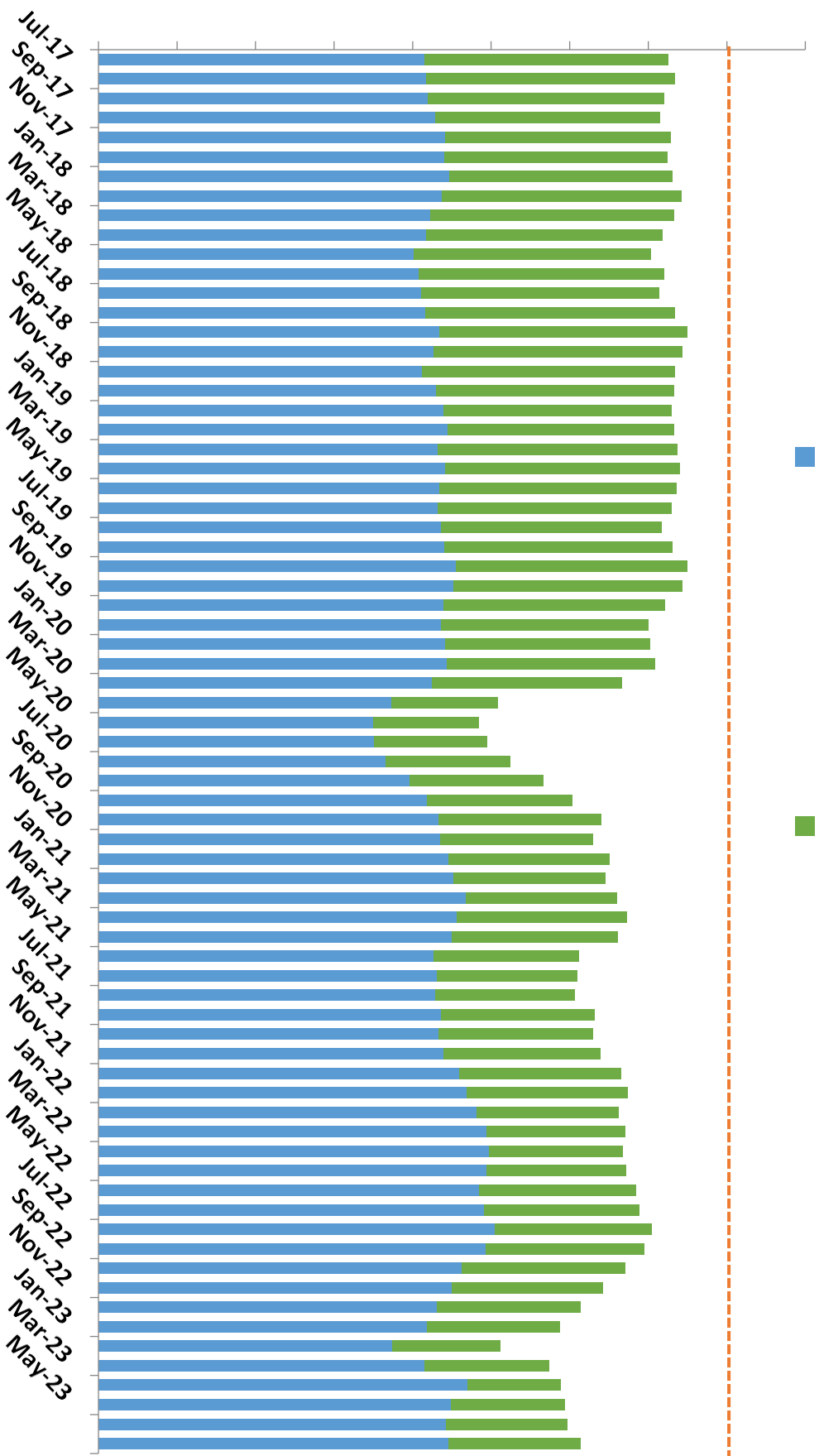
Presenter Notes
2023-08-23 21:53:49

Source: BSCC Jail Profile Survey
https://bscc.ca.gov/m_dataresearch/





Pretrial/Unsentenced & Sentenced Jail Monthly Average Daily Population

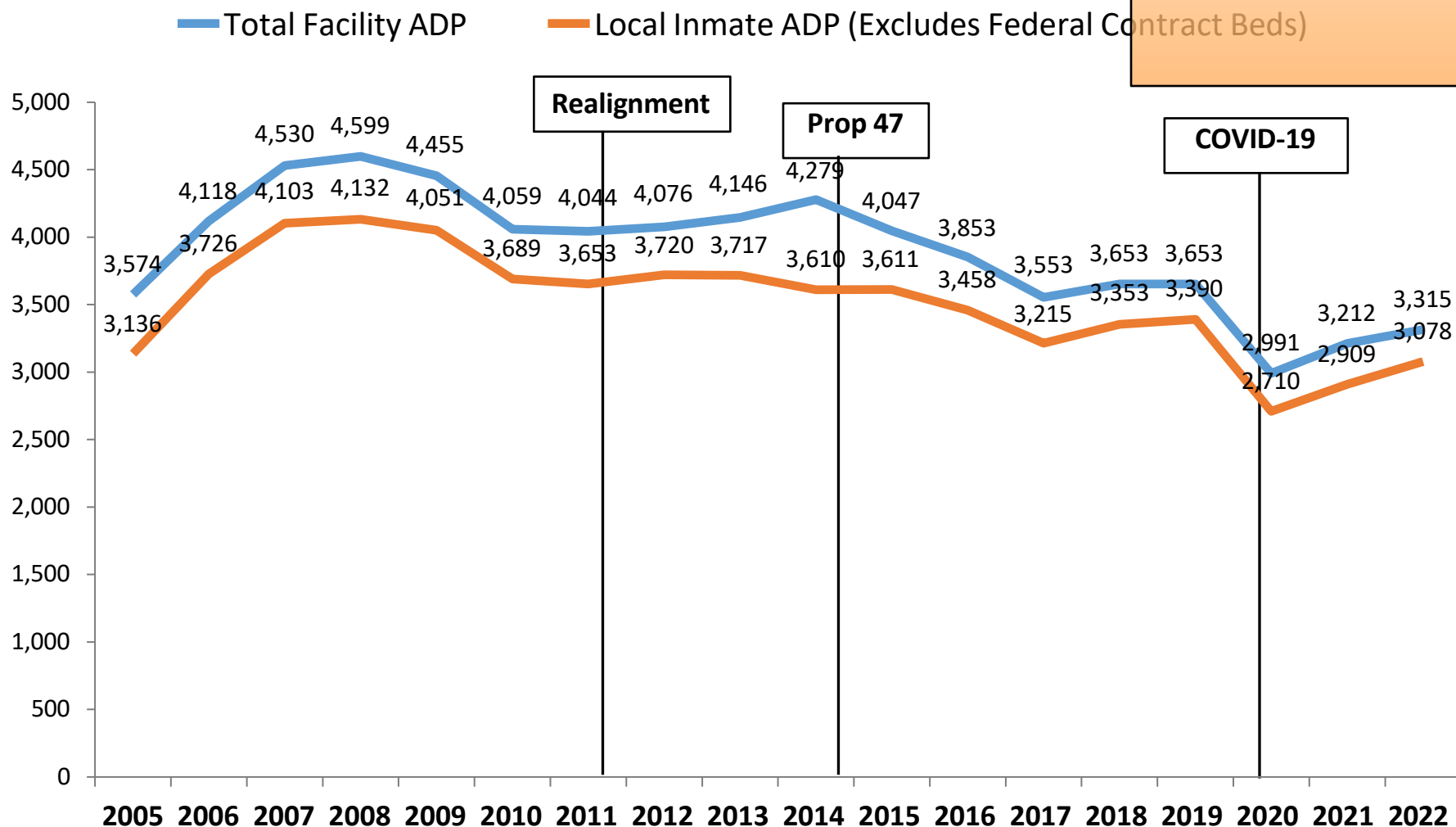




Jail Average Daily Population Down 2008 Peak to 2022

Presenter Notes
2023-08-23 21:53:52

Source: BSCC Jail Profile Survey
https://bscc.ca.gov/m_dataresearch/

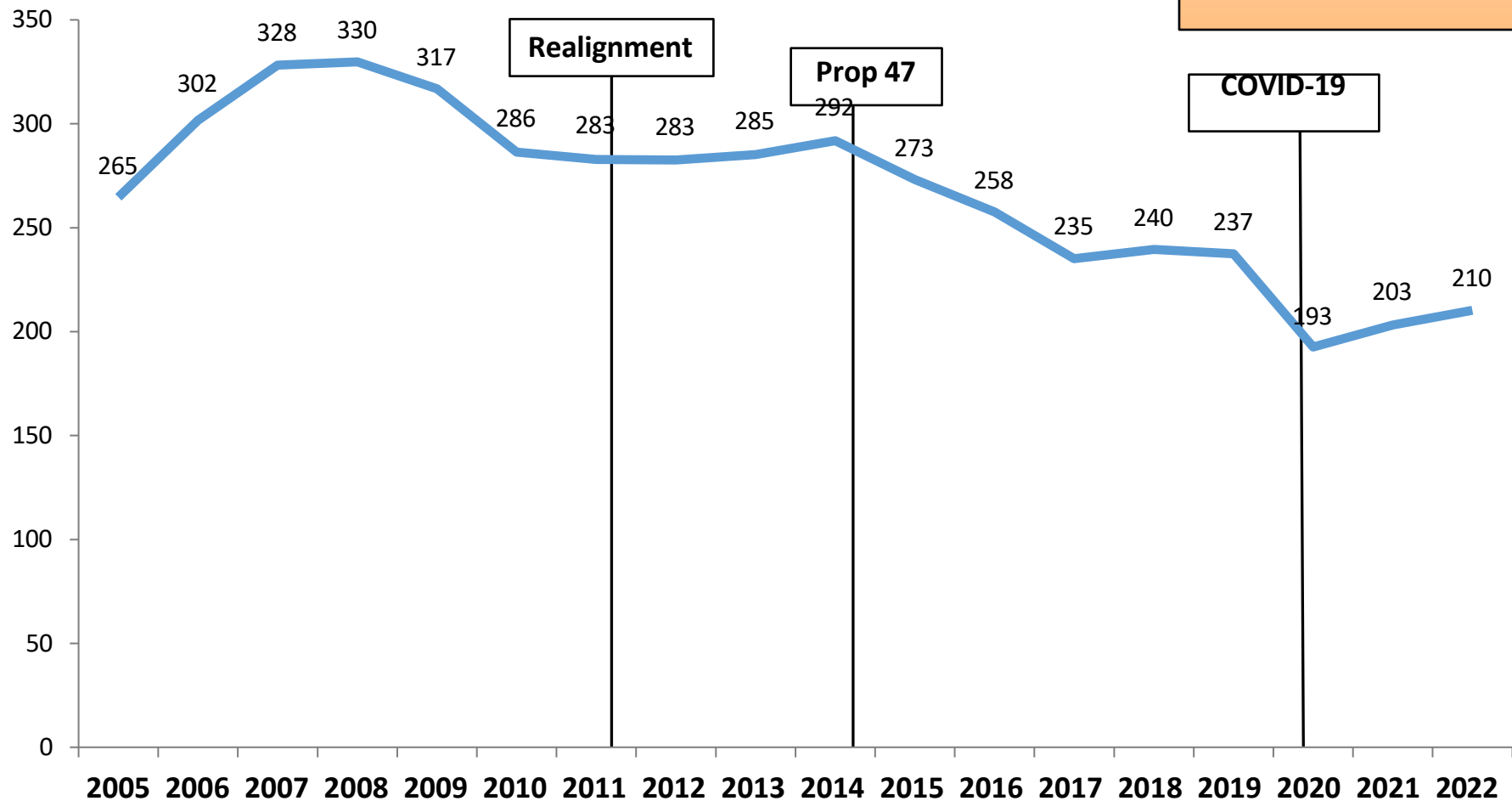




Jail Incarceration Rate Down 37% from Peak to 2022

Presenter Notes
2023-08-23 21:53:52

Source: BSCC Jail Profile Survey -
https://bscc.ca.gov/m_dataresearch/
CA DOF -
<https://dof.ca.gov/forecasting/demographics/estimates/>

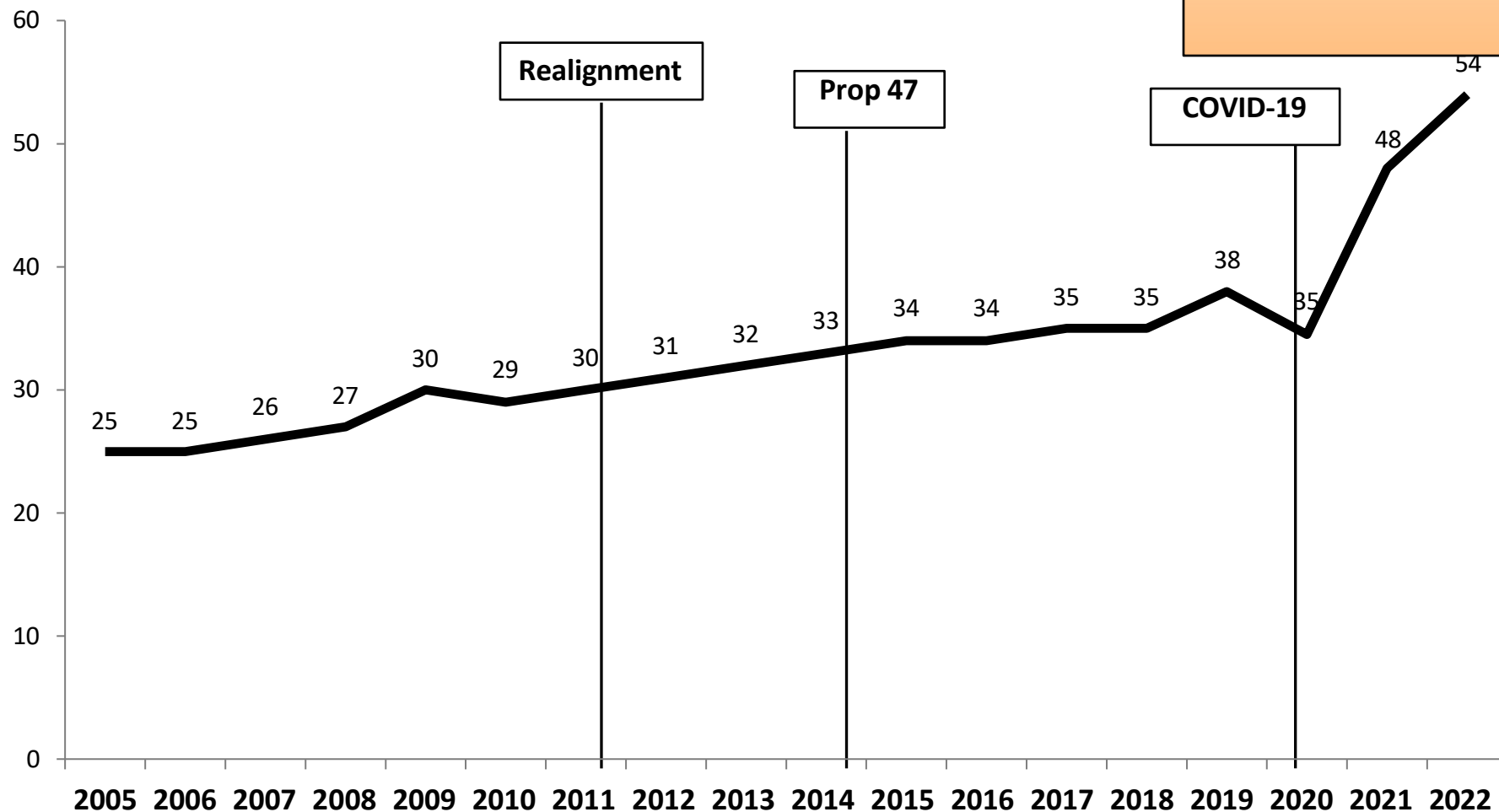




Average Length of Stay in Jail Up from 2005 to 2022

Presenter Notes
2023-08-23 21:53:53

Source: BSCC Jail Profile Survey -
https://bscc.ca.gov/m_dataresearch/

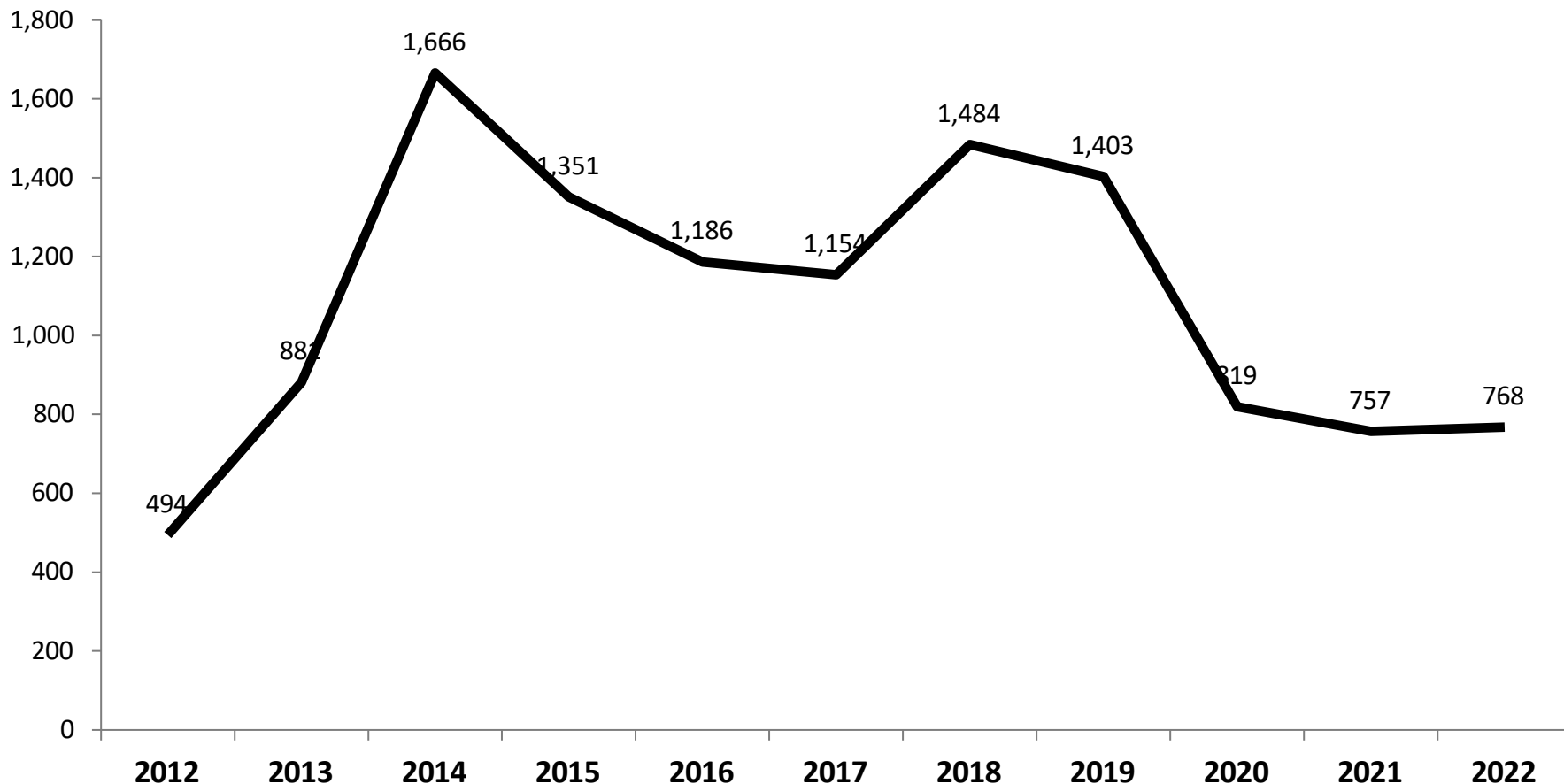




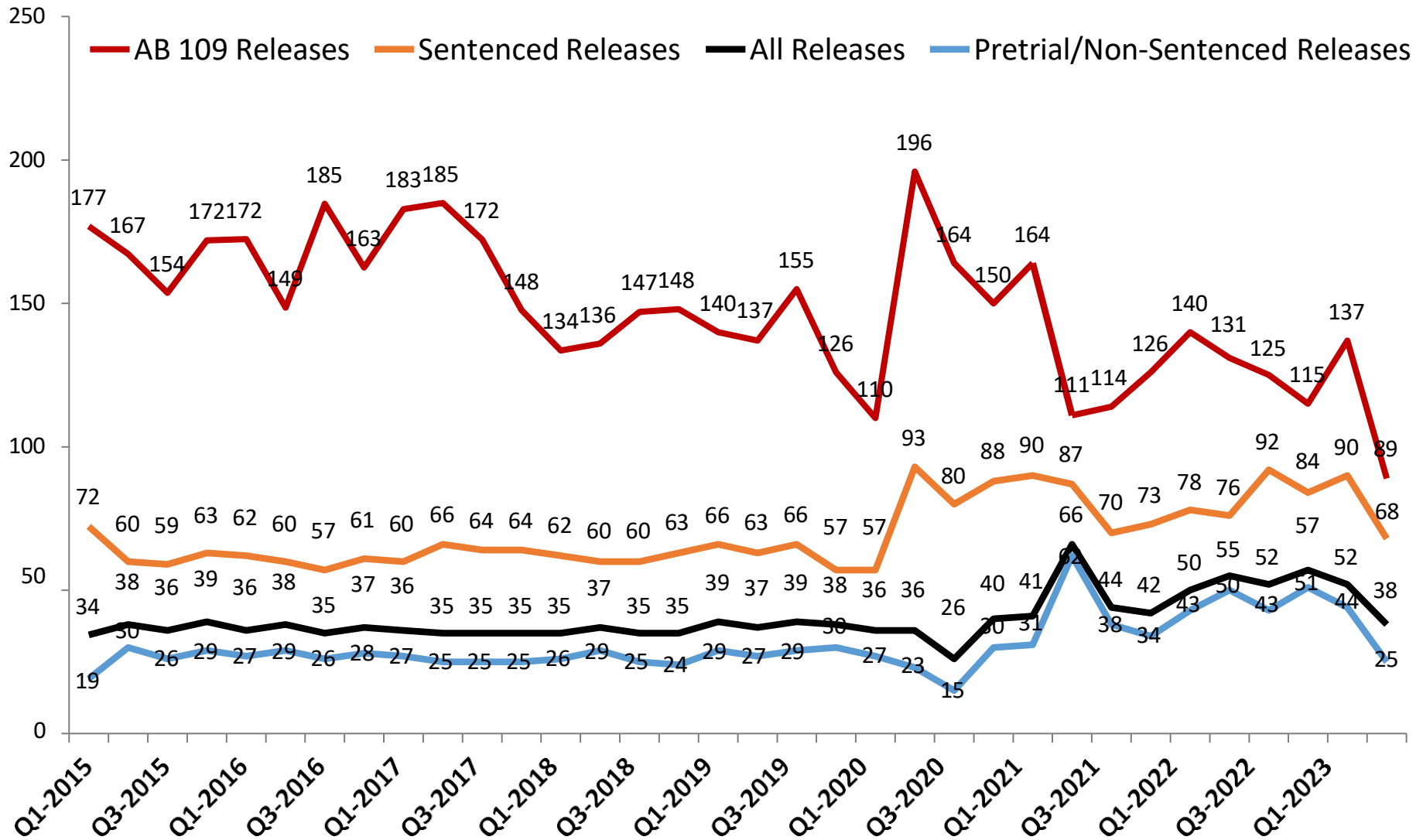
PC 1170(h)(1) Offenders Sentenced to County Jail (CJP) Decreased 54% from 2014 Peak to 2022 Increased 237% 2012 to 2014 *(Includes Straight & Split Sentences)*

Presenter Notes
2023-08-23 21:53:53

Source: Board of State & Community
Corrections, AB 109 Monthly Jail
Profile Survey. AB 109 Jail Profile
Survey – BSCC (ca.gov)



Quarterly Average Length of Stay

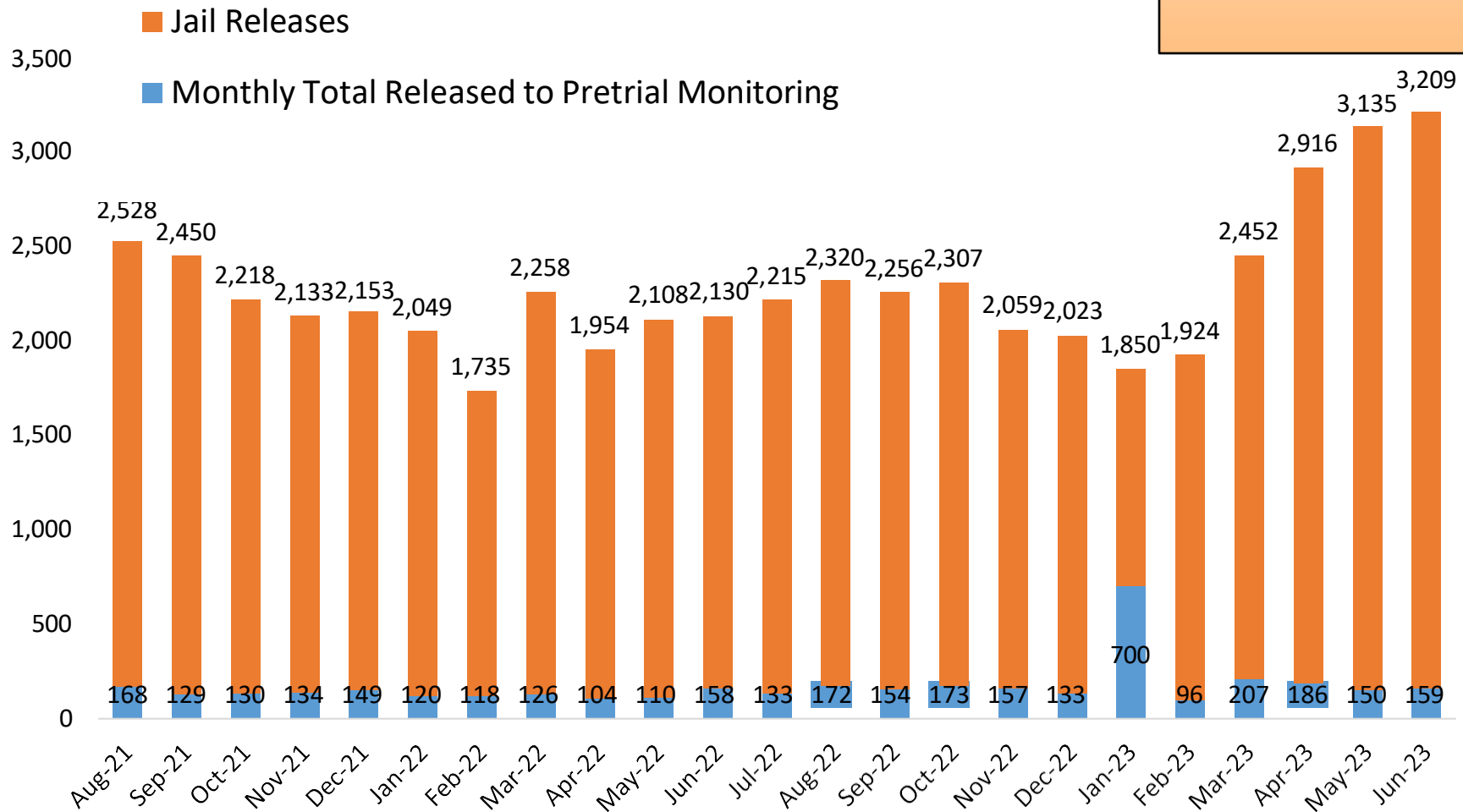




Total Monthly Jail Releases and Pretrial Monitoring Starts

Presenter Notes
2023-08-23 21:53:56

Source: Probation -
<https://saccprobation.saccounty.gov/Pages/Pre-trial-Monitoring.aspx> BSCC Jail Profile Survey -
https://bscc.ca.gov/m_dataresearch/



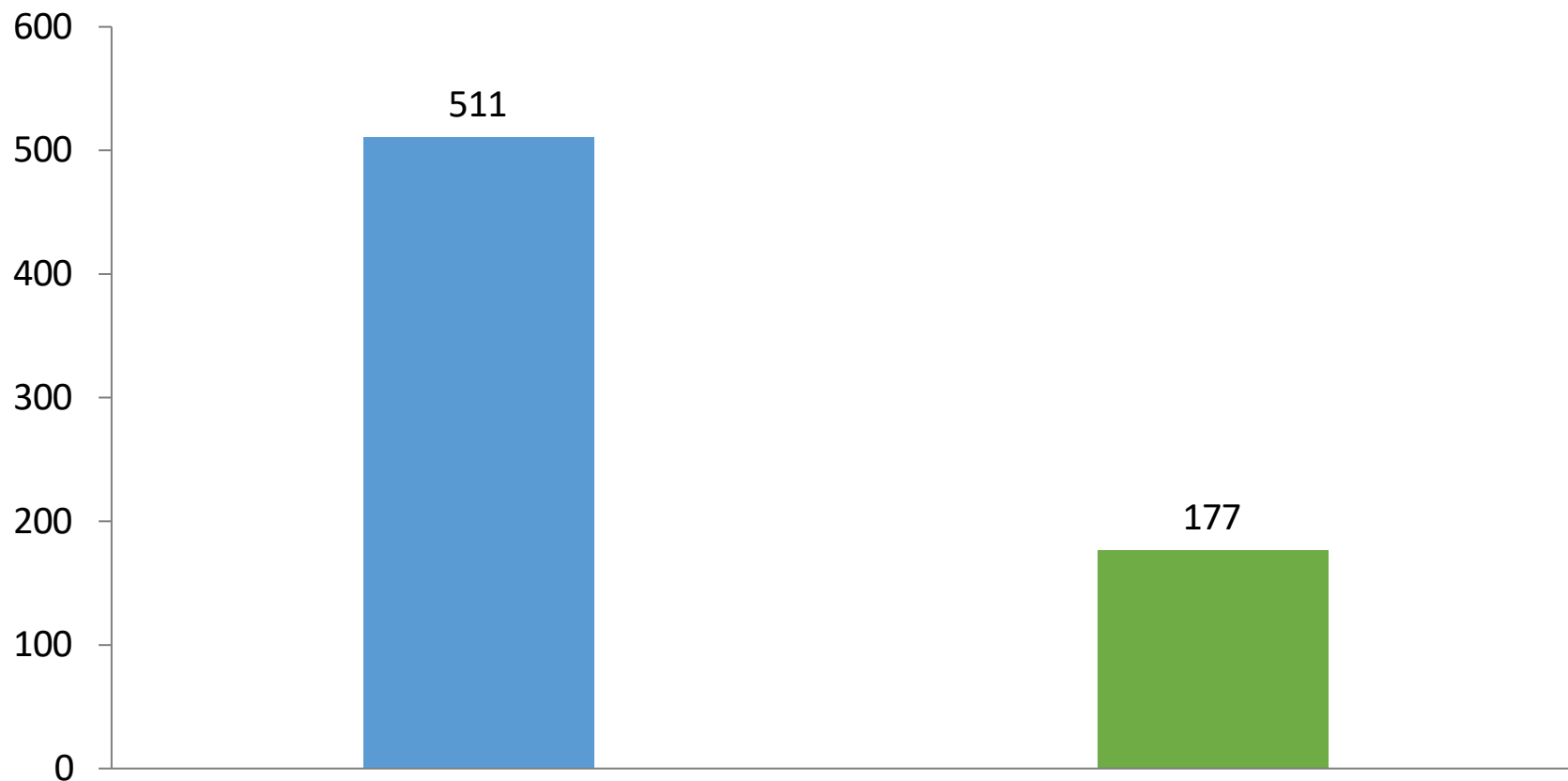


Sacramento County Mental Health Petitions July 2019 - March 2023

Presenter Notes
2023-08-23 21:53:56

Source: JCC -
<https://www.courts.ca.gov/38232.htm>
Can Superior Court Provide
Monthly/Quarterly Stats on number of
MHD petitions filed by type (Fel & Mis),
Total Petitions Granted by Type, total
grads/successful completions and total
deletions/fails by type?

■ Total Petitions Granted ■ Felony Petitions Granted

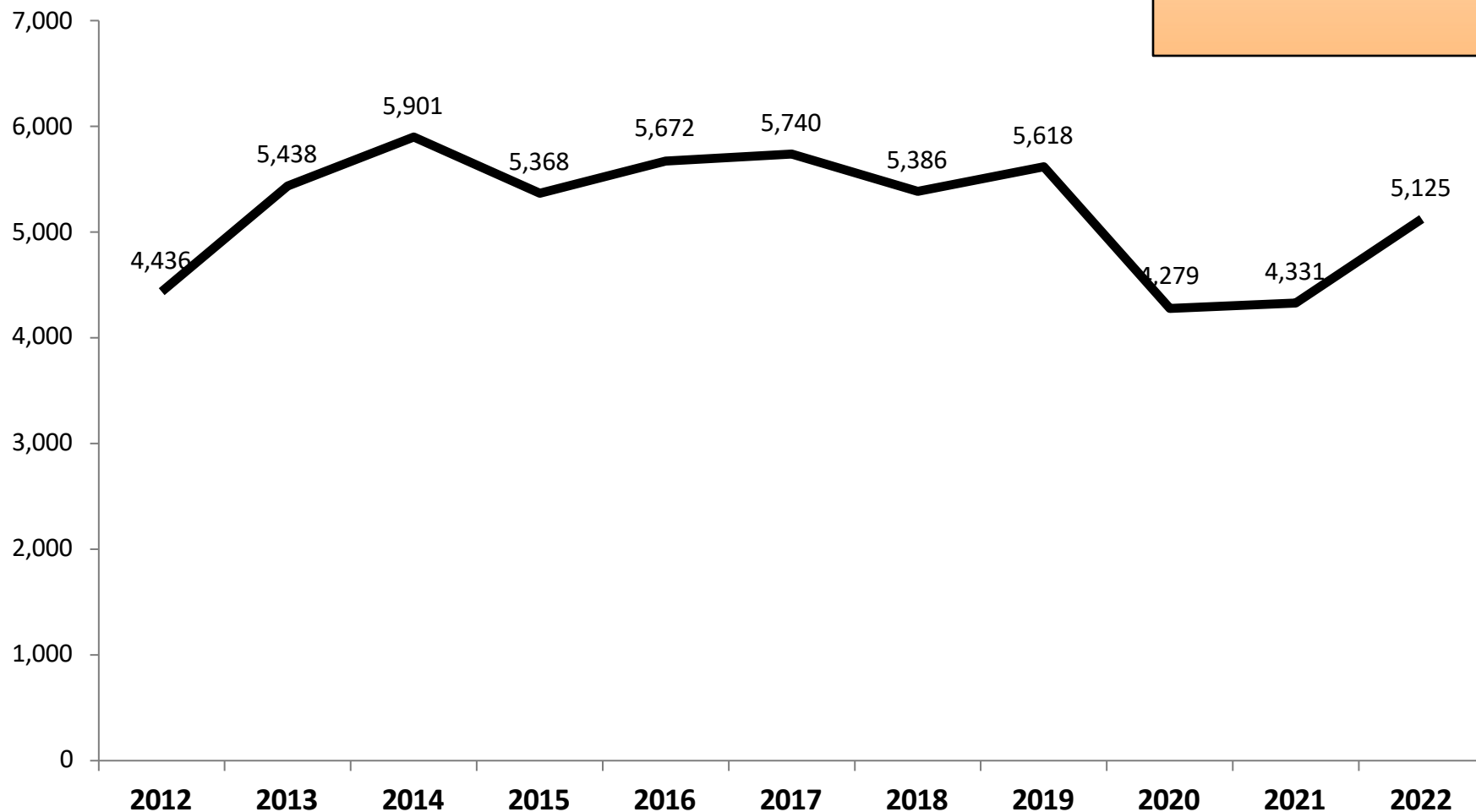




New Adult Felony Probation Grants 2010 to 2022

Presenter Notes
2023-08-23 21:53:57

Source: JCC -
<https://www.courts.ca.gov/38232.htm>

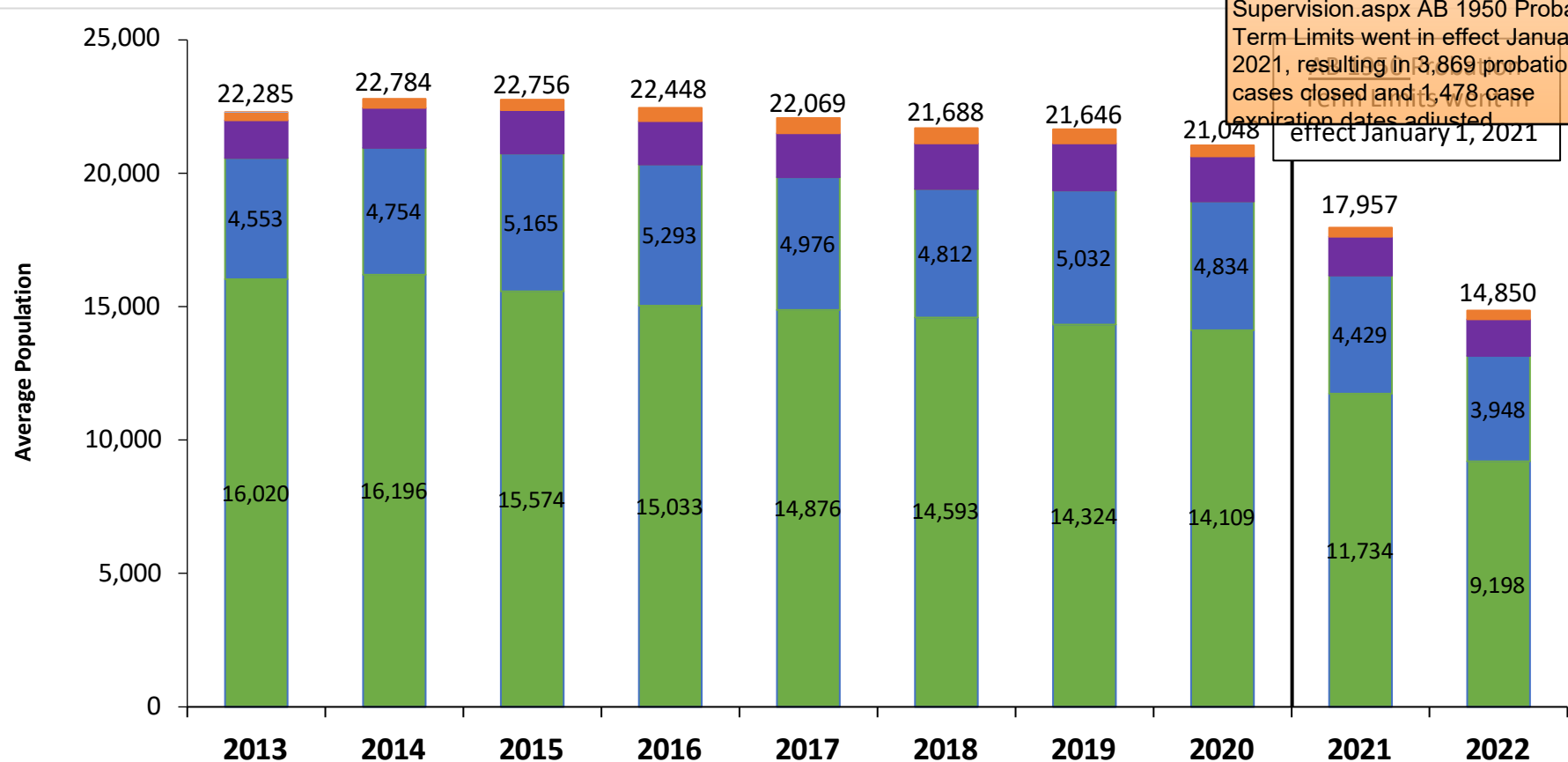




Adult Probation Population Decreased 33% from 2013 to 2022

Presenter Notes
2023-08-23 21:53:57

Source: Probation -
<http://www.probation.saccounty.net/Admin-DepartmentInfo/Pages/Populations-Under-Probation-Jurisdiction-of-Supervision.aspx> AB 1950 Probation Term Limits went in effect January 2021, resulting in 3,869 probation cases closed and 1,478 case expiration dates adjusted effective January 1, 2021

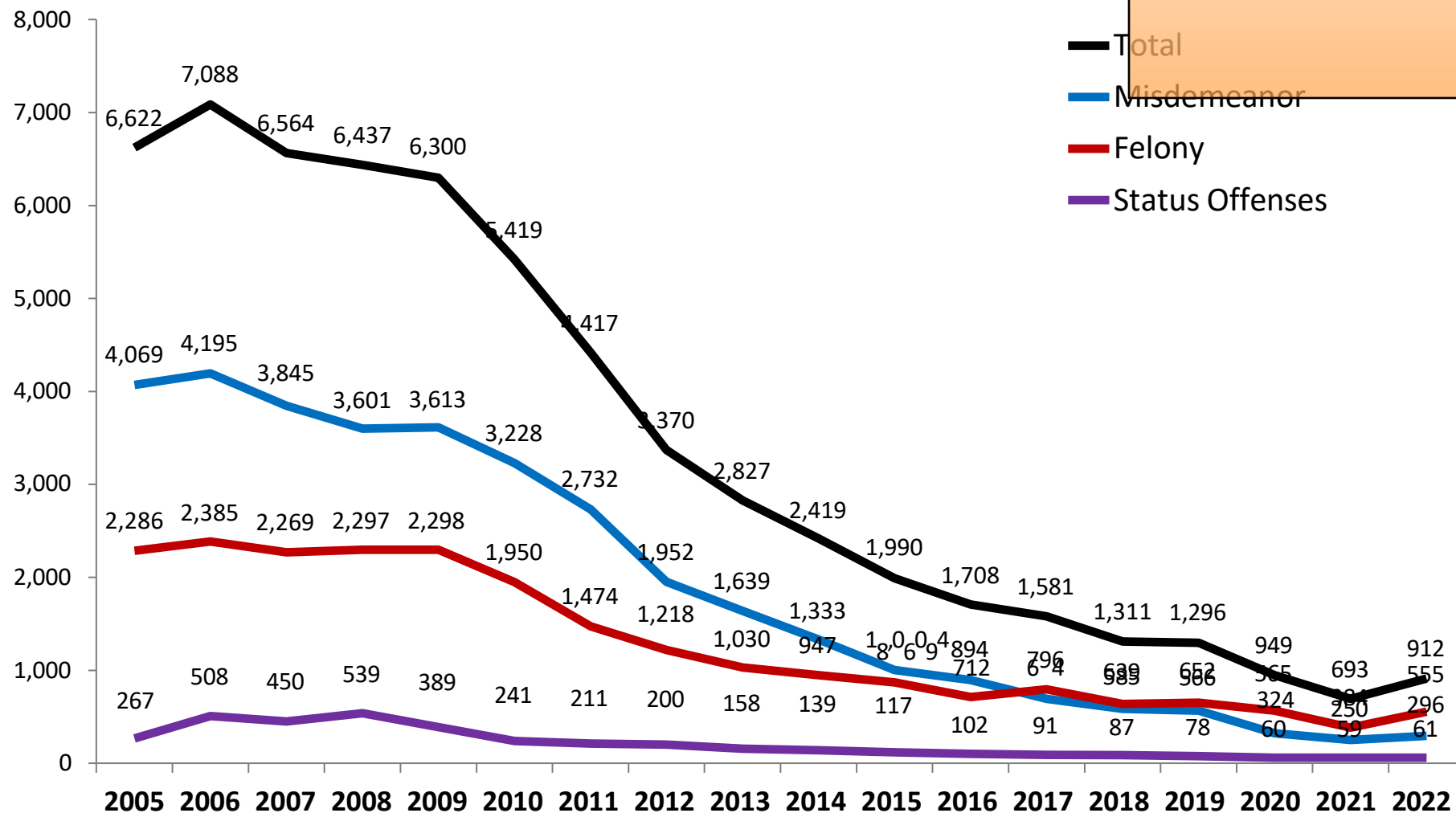


	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Total Adult Persons	22,285	22,784	22,756	22,448	22,069	21,688	21,646	21,048	17,957	14,850
Mandatory Supervision	303	339	392	494	571	574	530	421	335	329
Post-Release Community Supervision	1,409	1,494	1,626	1,628	1,647	1,709	1,760	1,684	1,459	1,375
Adult Non-Felony Probation	4,553	4,754	5,165	5,293	4,976	4,812	5,032	4,834	4,429	3,948
Adult Felony Probation	16,020	16,196	15,574	15,033	14,876	14,593	14,324	14,109	11,734	9,198



Juvenile Arrests Down 86% 2005 to 2022

Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>

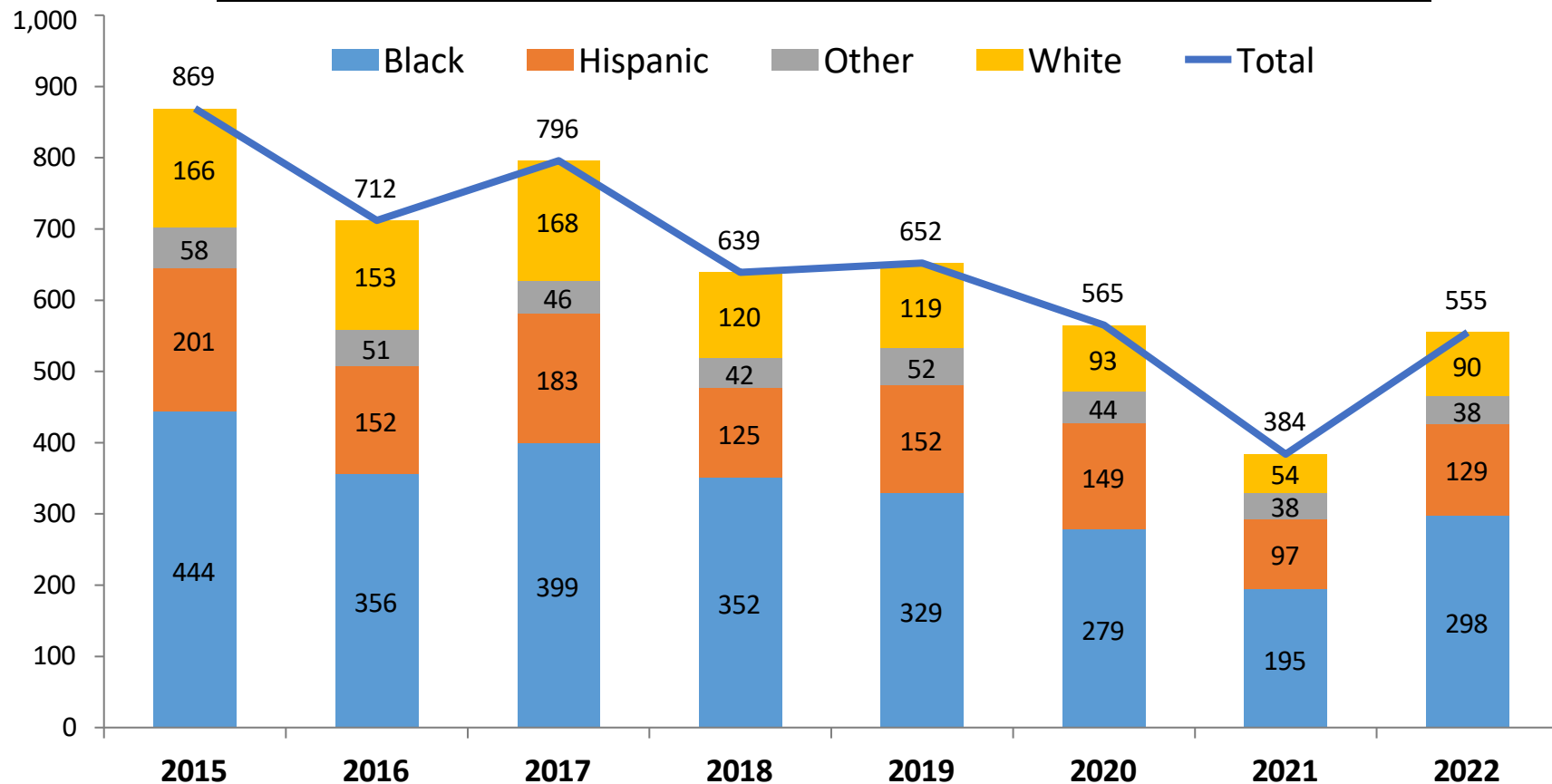




Juvenile Felony Arrests By Race 2015-2022

Source: DOJ Open Data webpage - <http://openjustice.doj.ca.gov/data>

	Felony Arrests								County Population
	2015	2016	2017	2018	2019	2020	2021	2022	
Black	51%	50%	50%	55%	50%	49%	51%	54%	10%
Hispanic	23%	21%	23%	20%	23%	26%	25%	23%	24%
Other	7%	7%	6%	7%	8%	8%	10%	7%	24%
White	19%	21%	21%	19%	18%	16%	14%	16%	42%



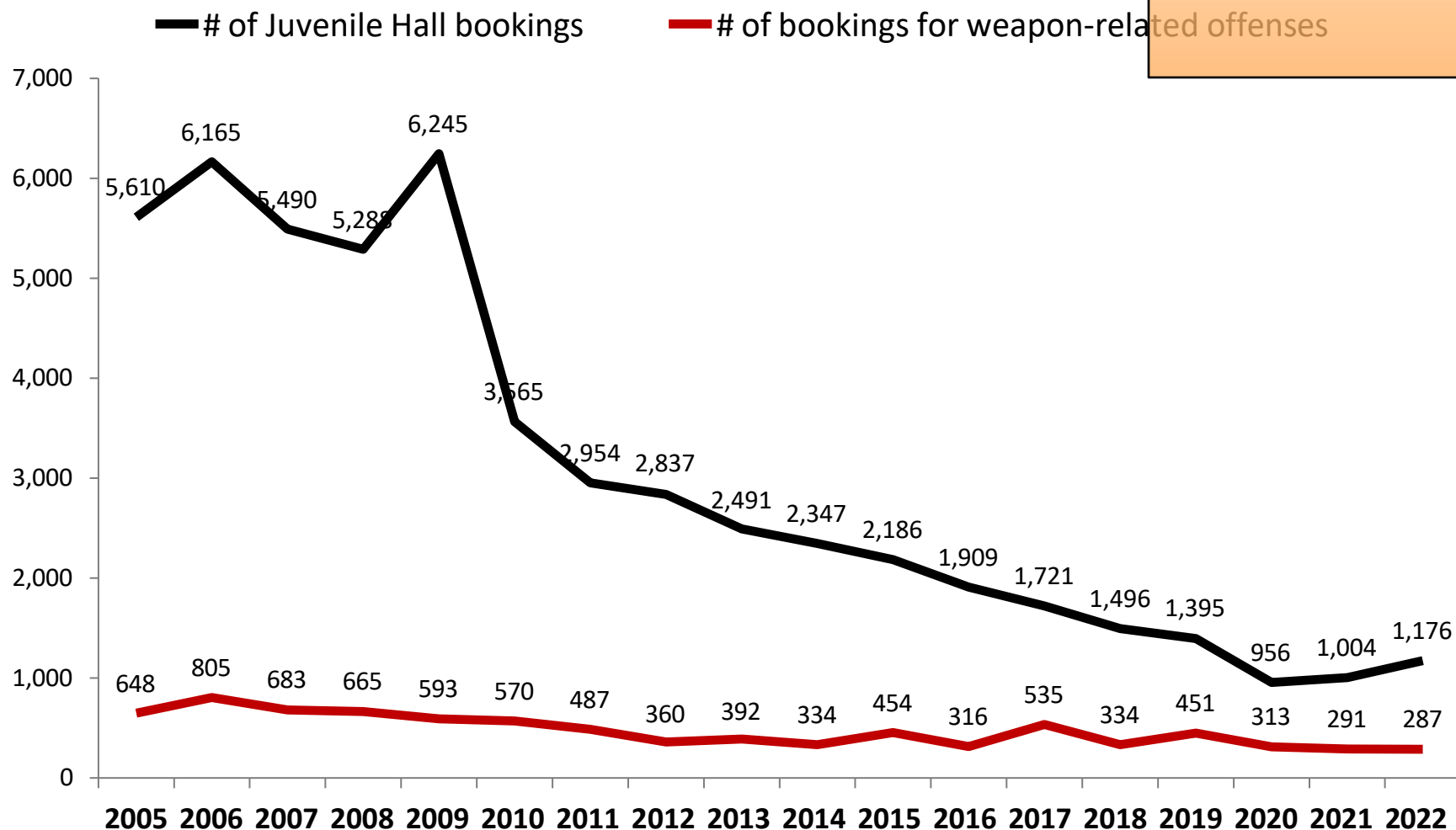


Youth Detention Facility Bookings

79% from 2005 to 2022

Presenter Notes
2023-08-23 21:54:01

JUVENILE DETENTION PROFILE
SURVEY- ONLINE QUERYING -
JPJDSReporting (ca.gov)
<https://jpdreporting.bscc.ca.gov/jds-query>



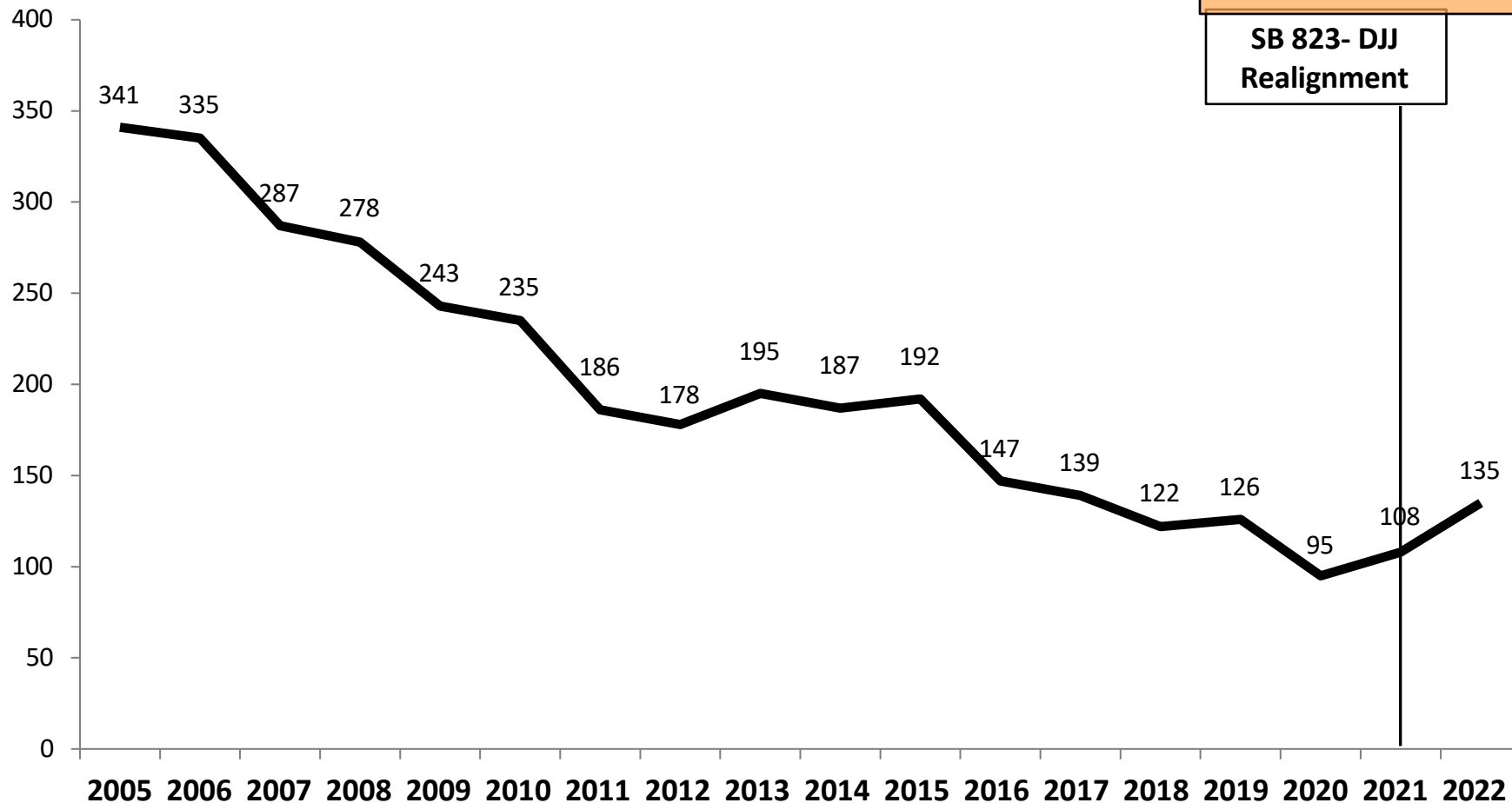


Youth Detention Facility Average Population Down 60% from 2005

Presenter Notes
2023-08-23 21:54:01

Probation -
<https://saccoprobatation.saccounty.gov/Admin-DepartmentInfo/Pages/Populations-Under-Probation-Jurisdiction-of-Supervision.aspx> BSCC – SB 823DJJ Realignment Implementation -
https://bscc.ca.gov/s_djjrealignment/

**SB 823- DJJ
Realignment**

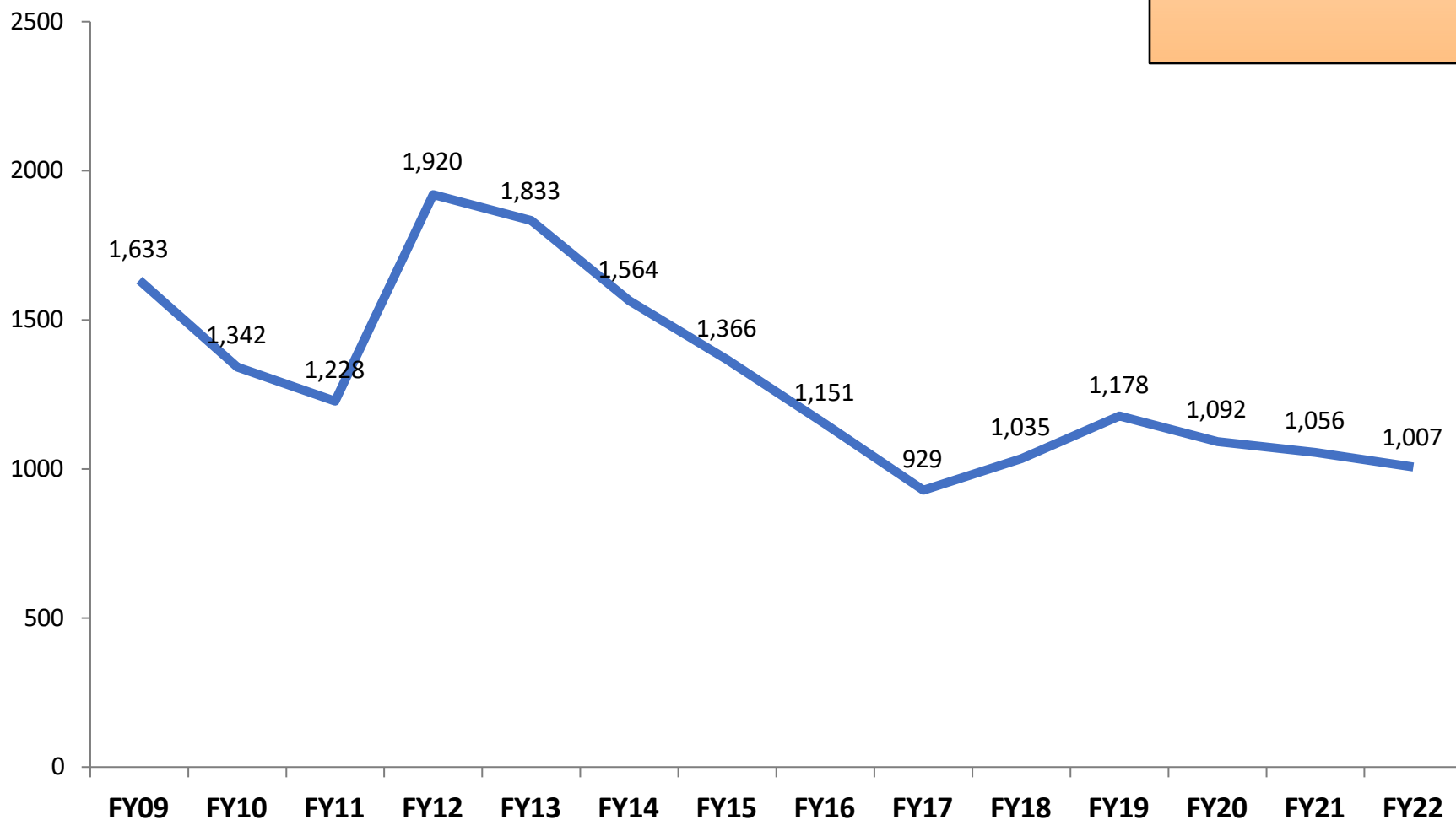




Juvenile Delinquency Filings Down from Peak in FY2011-12 to FY2021-22

Presenter Notes
2023-08-23 21:54:02

Source:
<https://www.courts.ca.gov/dashboard.htm>

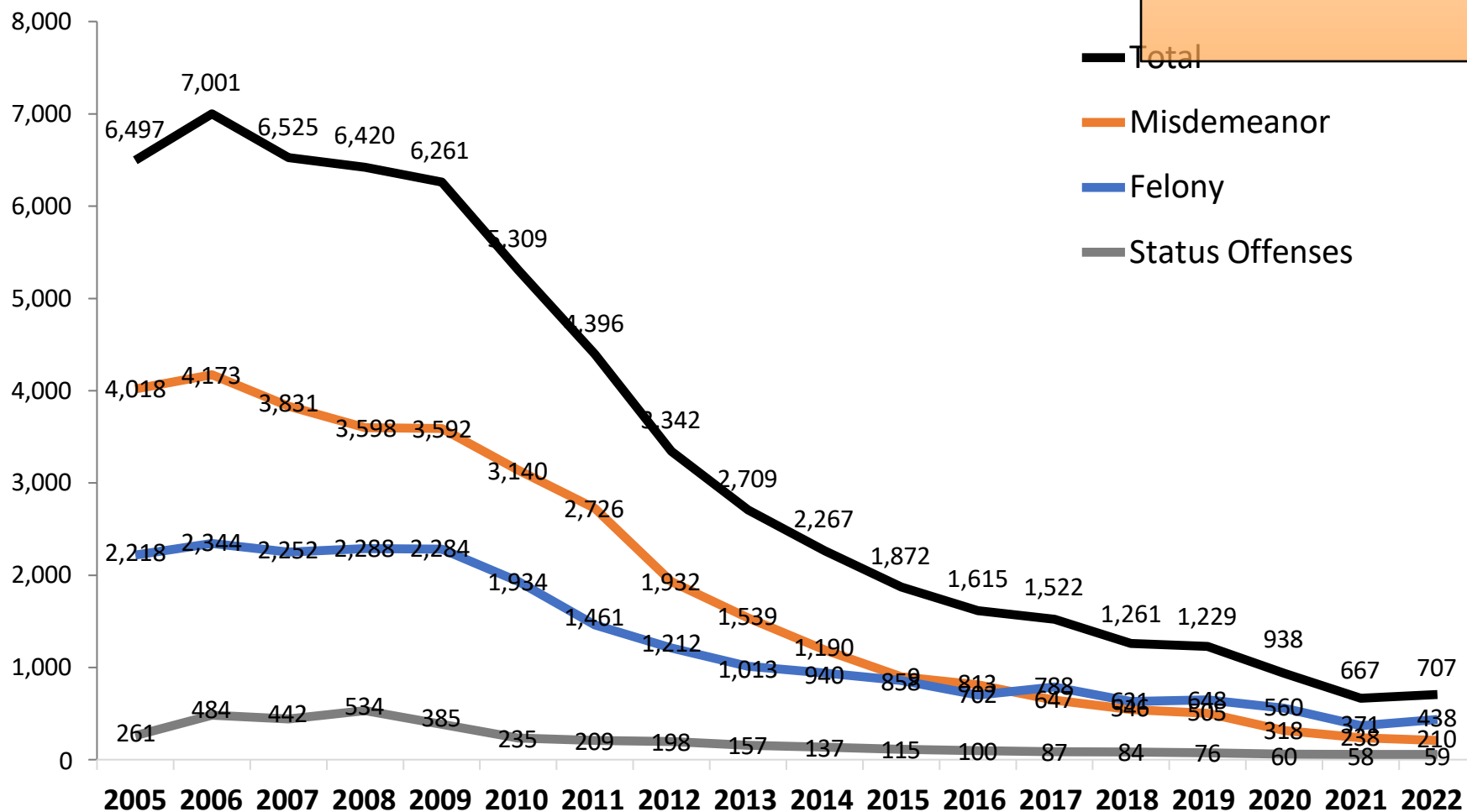




Juvenile Probation Dispositions Dec 2005 to 2022

Presenter Notes
2023-08-23 21:54:03

Source: DOJ Open Data webpage -
<http://openjustice.doj.ca.gov/data>



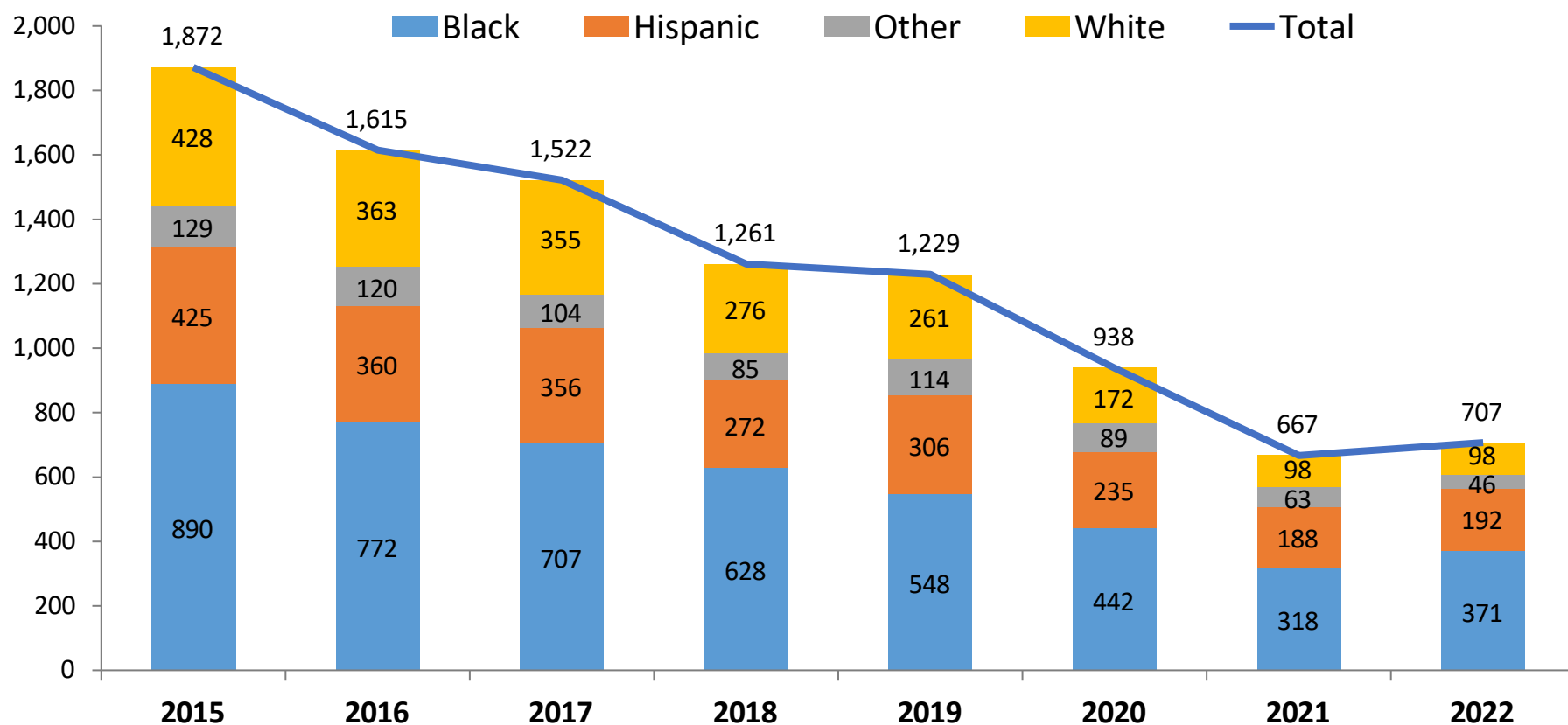


Juvenile Probation Dispositions by Race

Presenter Notes
2023-08-23 21:54:05

Source: DOJ Open Data webpage -
<http://openjustice.doj.ca.gov/data>
Arrest Dispositions by Race;
Disposition Type= Juvenile Probation

	Juvenile Probation Dispositions								County Population	
	2015	2016	2017	2018	2019	2020	2021	2022	Black	Hispanic
Black	48%	48%	46%	50%	45%	47%	48%	52%	10%	10%
Hispanic	23%	22%	23%	22%	21%	18%	15%	14%	24%	24%
Other	23%	22%	23%	22%	25%	25%	28%	27%	24%	24%
White	7%	7%	7%	7%	9%	9%	9%	7%	42%	42%

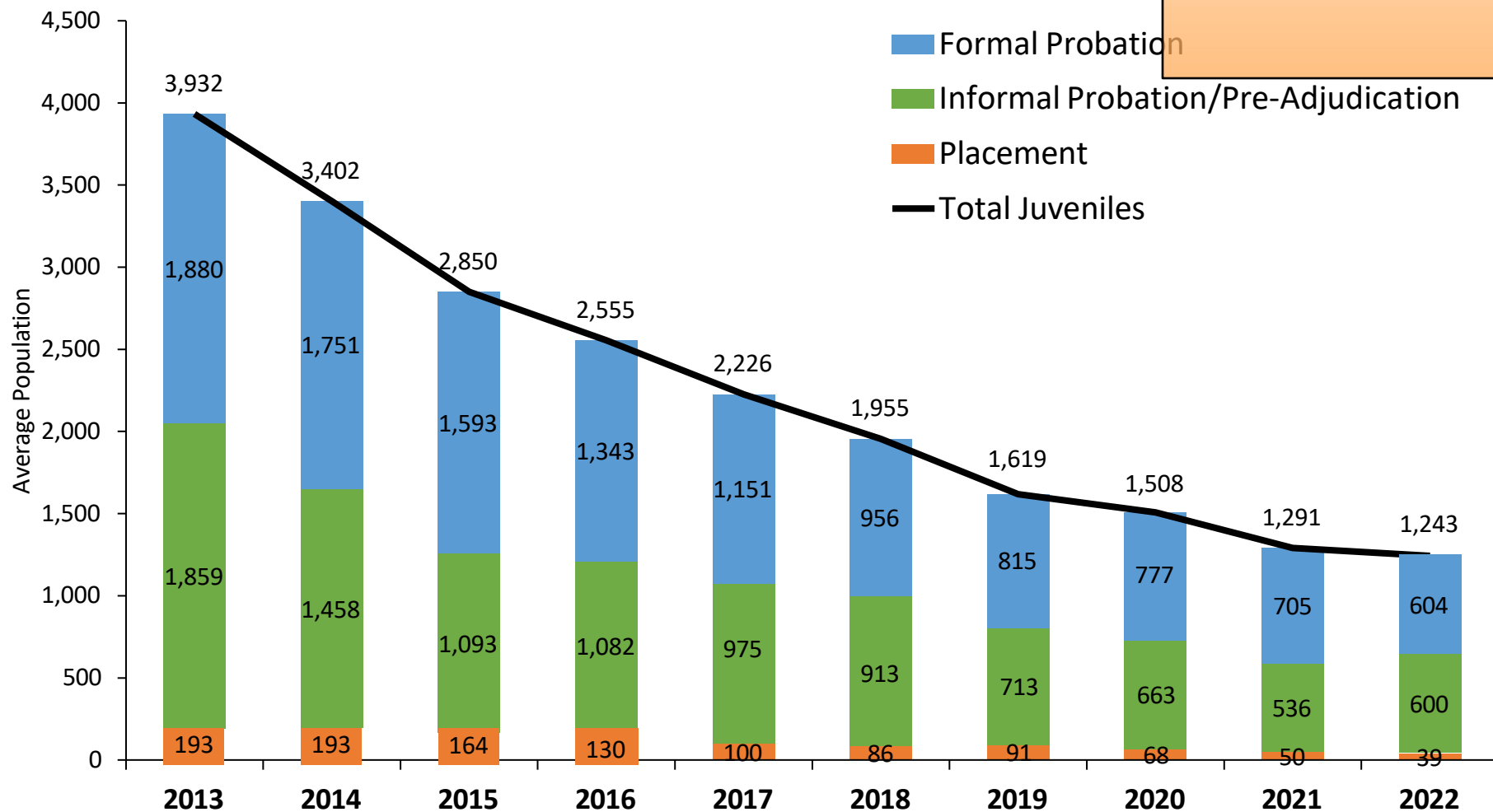




Juvenile Probation Population Data 2013 to 2022

Presenter Notes
2023-08-23 21:54:05

Source: Probation -
<http://www.probation.sacounty.net/Admin-DepartmentInfo/Pages/Populations-Under-Probation-Jurisdiction-of-Supervision.aspx>



Data Discussion: What Do The Trend Changes Indicate?

- Are changes positive or negative?
- Do you know what's driving changes?
- Is Current Annual Data Trend Update Helping Achieve CJC Mission: **Study the juvenile and criminal justice system**, identify strengths and deficiencies, and formulate policy, plans and programs for changes that will enhance public safety, reduce crime, advance fair and timely disposition of cases, and maximize the efficient use of resources
- What else do you need to know?
 - *What does your agency track? Do you track data that will help others understand what your agency is doing? Should it be posted publicly and/or further shared with partners?*



Next Steps

Presenter Notes
2023-08-23 21:54:06

Justice System Trends have been approved for public posting each of past three years– CJC, CCP and PSJA sites all have 2022 Update Posted

QUESTIONS

Contact Catherine York, CJC Analyst, by email at yorkc@saccounty.gov or by phone at (916) 874-4226

Data Sharing

- 2023 Data Trend Update Public Posting on CJC Website
- Send CJC Analyst additional data your agency would like included in annual trend updates or for requests to assist with more immediate needs to analyze and report findings

FY 2023-24 Community Corrections Partnership Survey PART B

Part B of the CCP Survey collects information about the allocation of Public Safety Realignment dollars.

For detailed guidance on how to complete Part B of the CCP Survey package, please refer to the FY 2023-24 CCP Survey Data Reporting Guide at:
https://www.bscc.ca.gov/m_realignment/

The first question in this file, question 24, requests the name of the county for which the survey is being submitted.

Following the identification of the county, Part B is divided into two sections:

Section 6: FY 2022-23 Public Safety Realignment Funding Allocation

Section 7: FY 2023-24 Public Safety Realignment Funding Allocation

24. Please identify the county for which this portion of the survey is being submitted:

County Name: **Sacramento**

SECTION 6: FY 2022-23 Public Safety Realignment Funding Allocation

Section 6 contains questions related to the allocation of FY 2022-23 Public Safety Realignment dollars. There are three (3) questions in this section.

When answering these questions, consider the funds allocated in FY 2022-23 and include any monies from 2021-22 growth funds and 2022-23 programmatic funding.

25. Of the total funds received in FY 2022-23, how did the CCP budget the allocation? Input the total allocation in the cell above the table. Within the table, identify where funds were allocated to, and include if the county used any carry-over funds (monies from previous annual CCP allocations) and/or if the county put any funds into a reserve fund (i.e., funds specifically set aside to be used when budget is disrupted or decreased so operations can continue). Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in **red**. Please correct any cells displaying **red** prior to submitting.

Total Allocation: \$ 81,279,899

Where funds were allocated to:	Amount
Sheriff - Corrections (Community Corrections Partnership Program)	\$ 38,511,258
Adult Correctional Health	\$ 12,542,681
Probation Community Corrections Partnership Program	\$ 29,042,158
District Attorney Community Corrections Partnership Program	\$ 974,650
County Executive Office - Community Corrections Partnership Planning	\$ 209,152

(Total sums to) \$ 81,279,899

Please spell out all names and do not
use acronyms.

Difference from
Stated Allocation: \$ -

26. Of the total funds received in FY 2022-23, how much did the CCP allocate to public agencies for programs and services? How much did the CCP allocate to non-public agencies for programs and services? Input the total allocations in the cells above each table. Within the tables, identify where funds were allocated to. Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red. **Please correct any cells displaying red prior to submitting.**

Total Allocation to non-public agencies:	\$ -
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Where funds were allocated to (public agencies):	Amount	Where funds were allocated to (non-public agencies):	Amount
Sheriff - Home Detention/Electronic Monitoring & Work Release Program	\$ 2,165,374		
Sheriff - Inmate Housing and Services	\$ 34,168,710		
Sheriff - Main Jail Reentry Program	\$ 2,177,174		
Correctional Health Services - Jail Mental Health, Medical, and Dental Se	\$ 12,542,681		
Probation - Adult Community Corrections Adult Day Reporting Center Inta	\$ 10,390,421		
Probation - Adult Field AB 109, Domestic Violence, Sex Offender	\$ 17,031,231		
Probation - Drug Court	\$ 1,620,506		
DA - AB 109 Services (Collaborative Courts, Lab Tech)	\$ 974,650		
AB 109 Planning - Community Corrections Partnership Analyst	\$ 209,152		
(Total sums to)	\$ 81,279,899	(Total sums to)	\$ -
Difference from Stated Allocation:	\$ -	Difference from Stated Allocation:	\$ -

27. How much funding, if any, was allocated to data collection and/or evaluation of AB 109 programs and services?

The AB 109 Planning Funds (\$209,152) allocated in FY 2022-23 cover costs for a CCP Analyst who will be responsible for supporting centralized ongoing data collection, monitoring, and evaluation needed to inform the CCP Advisory Board and CCP regarding annual updates to the AB 109 Plan. The CCP Analyst was hired in July 2022. Additionally, to the extent possible, AB 109 funded agencies and their contracted services providers will enhance and/or expand data collection in coordination with the CCP Analyst and CCP Advisory Board to ensure the county has data to inform decisions about AB 109 program and service investments.

SECTION 7: FY 2023-24 Public Safety Realignment Funding Allocation

Section 7 asks three (3) questions related to the allocation of FY 2023-24 Public Safety Realignment funding.

When answering these questions, consider the total funds allocated in FY 2023-24 and include any monies from 2022-23 growth funds and 2023-24 programmatic funding.

28. Of the total funds received in FY 2023-24, how did the CCP budget the allocation? Input the total allocation in the cell above the table. Within the table, identify where funds were allocated to, and include if the county is using any carry-over funds (monies from previous annual CCP allocations) and/or if the county is putting any funds into a reserve fund (i.e., funds specifically set aside to be used when budget is disrupted or decreased so operations can continue). Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red. **Please correct any cells displaying red prior to submitting.**

Total Allocation: \$ 74,998,816

Where funds were allocated to:	Amount
Sheriff - Corrections (Community Corrections Partnership Program)	\$ 25,173,419
Probation Community Corrections Partnership Program	\$ 33,130,516
District Attorney Community Corrections Partnership Program	\$ 1,047,748
Public Defender Community Corrections Partnership Program	\$ 1,094,122
Adult Correctional Health Services	\$ 14,353,774
County Executive Office Community Corrections Partnership Planning	\$ 199,237

(Total sums to) \$ 74,998,816

Please spell out all names and do not
use acronyms.

Difference from
Stated Allocation: \$ -

29. If known: of the total funds received in FY 2023-24, how much did the CCP allocate to public agencies for programs and services? How much did the CCP allocate to non-public agencies for programs and services? Input the total allocations in the cells above each table. Within the tables, identify where funds were allocated to. Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red. **Please correct any cells displaying red prior to submitting.**

Total Allocation to public agencies:	\$ 74,998,816
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Total Allocation to non-public agencies:

Where funds were allocated to (public agencies):	Amount	Where funds were allocated to (non-public agencies):	Amount
Sheriff - Home Detention/Electronic Monitoring & Work Release Program	\$ 1,510,405		
Sheriff - Inmate Housing and Services	\$ 21,145,672		
Sheriff - Main Jail Reentry Program	\$ 2,517,342		
Correctional Health Services - Jail Mental Health, Medical, and Dental Se	\$ 14,353,774		
Probation - Adult Community Corrections Adult Day Reporting Center Inta	\$ 19,875,774		
Probation - Adult Field AB 109, Domestic Violence, Sex Offender	\$ 12,157,242		
Probation - Drug Court	\$ 1,097,500		
DA - AB 109 Services (Collaborative Courts, Lab Tech)	\$ 1,047,748		
AB 109 Planning - Community Corrections Partnership Analyst	\$ 199,237		
Public Defender - Mental Health Diversion and Collaborative Courts	\$ 1,094,122		
(Total sums to)	\$ 74,998,816	(Total sums to)	\$ -
Difference from Stated Allocation:	\$ -	Difference from Stated Allocation:	\$ -

30. How much funding, if any, is being allocated to data collection and/or evaluation of AB 109 programs and services?

The AB 109 Planning Funds (\$199,237) allocated in FY 2023-24 cover costs for a CCP Analyst who is responsible for supporting centralized ongoing data collection, monitoring, and evaluation needed to inform the CCP Advisory Board and CCP regarding annual updates to the AB 109 Plan. Additionally, to the extent possible, AB 109 funded agencies and their contracted services providers will enhance and/or expand data collection in coordination with the CCP Analyst and CCP Advisory Board to ensure the County has data to inform decisions about AB 109 program and service investments.

NOTE: The information contained in this report will be made public by the BSCC in the annual report to the Governor's Office and the Legislature on the implementation of Community Corrections Partnership plans on the BSCC website.

IMPORTANT

A complete FY 2023-24 CCP Survey Package includes Part A (online portal form), Part B, Highlight or Success Story (optional), and an updated CCP Plan. All attachments by must be submitted to the BSCC through the BSCC-Submittable online portal no later than Friday, December 15, 2023.

If you have any questions or need technical assistance with the BSCC-Submittable online portal, please contact:

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916.838.7777