

Fort Bragg Police Department Proposition 47 Evaluation Plan

Care Response Unit – Coastal Expansion

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Introduction

The Care Response Unit – Coastal (CRU-C) Program is a three-pronged approach to expand the availability of mental health treatment, including treatment of substance use disorders, and diversion services on the Mendocino Coast.

- Expand the Fort Bragg Police Department's Care Response Unit south to the Village of Mendocino and north to Cleone. This includes hiring one full-time Social Services Liaison-Care Response Unit member to expand in-person services beyond the City, and one part-time Administrative Assistant to manage grant documentation and evaluation tasks.
- 2. Expand services provided by the Mendocino County Hospitality Center (MCHC). This includes the full-time staffing of a Mental Health Provider, Services Coordinator, and Administrative Assistant.
- 3. Expand temporary and transitional housing access to the Care Response Unit. This includes reserving one stabilization bed at the Hospitality House and six transitional housing beds at the Hospitality Center.

Project Background

A steadily increasing number of individuals living on the streets and calls to law enforcement for low-level offenses resulted in the City of Fort Bragg's creation of a Care Response Unit (CRU) in 2022. This new unit, housed in the City's Police Department (FBPD), deployed two social service liaisons (SSL) and collaborated with Mendocino Coast Hospitality Center (MCHC) as a supportive service provider to divert individuals from the criminal justice system to supportive services. CRU operates with a proactive approach, and its SSLs wear street clothes and do not carry weapons or handcuffs, which fosters trust and rapport with clients. Prop 47 funding provides an opportunity to expand CRU's reach to the unincorporated areas north of the city limits to Cleone, and south to the village of Mendocino in partnership with the Mendocino County Sheriff's Office (MCSO).

Fort Bragg holds a population of 6,983, while the broader County of Mendocino has a population of 91,601. The total population of the communities of Fort Bragg, Cleone, and Mendocino Village is approximately 8,500.

The data available from the current CRU Program shows that it is effective in reducing documented calls for service involving individuals with mental health illness (MHI) and reducing the disproportionate arrest rate of individuals with MHI. A recent survey of residents and key leaders in Mendocino County ranked the three most significant health problems in the County as mental health issues, alcohol and drug abuse, and homelessness.

In the 12-month period ending April 30, 2024, the MCSO received 132 calls for service related to substance use and mental health crises in the unincorporated areas of the Mendocino coast.

According to the MCSO, many of the calls to law enforcement come in simply because citizens do not have any alternative but to call 911.

The CRU-C will take an "upstream" approach before law enforcement interventions and make services and connections prior to the need for law enforcement. The 132 calls for service represent calls that would have been best served by non-law enforcement. Although the underlying issues surrounding MHI, SUD, and homelessness are not criminal in nature, the spoils of these issues, including theft, are criminal. To take an "upstream" approach prior to law enforcement intervention, connections must be made proactively. The CRU-C program will allow for properly trained SSLs to intervene before and shortly after contacts with the criminal justice system.

There are currently no programs comparable to the CRU-Coastal (CRU-C) program in the Mendocino Coast region, and MHI and SUDT providers remain limited in both capacity and accessibility. To address this gap and expand service coverage beyond the Fort Bragg city limits, the Fort Bragg Police Department (FBPD) has entered into a memorandum of understanding with the Mendocino County Sheriff's Office (MCSO). As part of this agreement, a dedicated space for a social services liaison has been established within the MCSO substation in the town of Mendocino. This collaboration marks a critical step forward in regional information sharing, service integration, and access to care for justice-involved individuals. The partnership has already strengthened coordination between agencies and enhanced service delivery to rural and underserved areas. The success of this model offers a clear and replicable framework for future CRU program expansions along the Mendocino Coast and throughout other parts of the county.

The CRU-C will target adults who have been arrested, charged, and/or detained by the criminal justice system and have a history of low-level crimes that can largely be attributed to living with untreated or undertreated serious MHI, SUD, and/or a lack of housing. This target population is measurable, given that some contact with law enforcement will be a prerequisite for participation in the program and can be tracked by program staff.

While Mendocino County is known for its natural beauty, it is equally well known as part of the Emerald Triangle, the three-county region historically serving as a hub of cannabis. While the cannabis economy has largely collapsed, the culture of drug use and drug misuse has been deeply entrenched for many decades. This has also led to significant economic challenges within the County, with 19.1% of residents living below the poverty line compared to 12.2% statewide.

The existing CRU program served approximately 540 individuals from October 2023 through May 2024; of these individuals, approximately 58% identified as white, with another 22% identifying as Hispanic; approximately 49% were unhoused, and only 1% identified as members of the LGBTQIA+ community. 56% identified as men, with the remaining 44% identifying as women. The demographics of the expanded CRU-C program are expected to align with these current statistics, given the similarities between the areas already served by CRU and the proposed expansion area.

The Fort Bragg Police Department Care Response Unit works closely with an LGBTQIA+ advocate who was previously employed under a past grant that ended on May 31, 2024. This individual continues to volunteer for the Police Department as part of "Project Right Now"

which is the youth arm of the Care Response Unit. 50% of the Care Response Unit staff are bilingual and frequently provide training and services to our Spanish-speaking community. The Prop 47 Advisory Committee additionally contains one advocate from the Latinx Community. The Fort Bragg Police Department has been participating in the nationwide 30x30 initiative with the goal of 30% of sworn law enforcement positions being held by women by 2030.

The intent of Proposition 47 is to address issues of public safety and education by providing targeted funding for programs and initiatives aimed at improving outcomes for K-12 students in public schools, supporting trauma recovery centers, and providing support for mental health treatment, substance abuse treatment, and diversion programs. The project seeks to expand CRU capacity in surrounding areas to assist individuals experiencing crises related to Mental Health Illness, Substance Use Disorder, or other judgment-related impairments. The project will ultimately enable FBPD and MCSO to divert these case types to area mental health providers and thus increase their ability to focus on investigating and preventing crime. This project aligns with Proposition 47 priorities through the following elements:

Mental health treatment: The project will increase the ability of the CRU-C to connect individuals to mental health treatment. In turn, this expands and protects mental health services provided by the MCHC and expands mental health treatment regionally through transportation options.

Substance abuse treatment: The Fort Bragg CRU team has assisted 48 individuals with finding beds in inpatient rehabilitation facilities since January 2023, including the transport of individuals being released from City Jail to CRU. The regional expansion will identify more individuals in need of substance use disorder treatment and link those individuals to services.

Diversion programs for people in the criminal justice system, with an emphasis on programs that reduce recidivism of people convicted of less serious crimes: Fort Bragg CRU has received no less than 40 referrals since January 2023 from the Ten Mile Branch of the Mendocino County District Attorney's Office for low-level offenders. These offenders are referred and typically ordered by the court and the Assistant District Attorney to report to CRU to begin services. CRU then reports back to the court on progress, often resulting in cases being dismissed or suspended pending the positive progress of referred clients. CRU additionally works with the victims of referred clients to ensure their active participation in the offender's rehabilitation (i.e., restorative justice).

This drug culture may be a factor in Mendocino County's rates of overdose deaths. According to County Health Rankings and Metrics, Mendocino County's drug overdose death rate is 44 per 100k, nearly triple the rate for the state of California overall (17/100k). The challenges facing the County, and the prevalence of MHI, SUD, or living unhoused, are also demonstrated in reviewing crime rates: the County's adult arrest rate is 26.8 per 1k population over 18, exceeding the statewide arrest rate of 25.1/1k; however, the violent crime rate is 202.3/100k, significantly below both the statewide (493.1/100k) and nationwide (380.7/100k). In 2021, 68% of arrests county-wide were for misdemeanor-level offenses. This illustrates the level of non-violent crime and the opportunities for interventions like CRU-C to demonstrate effectiveness in line with the existing program.

Process Evaluation Method and Design

To effectively tailor services and measure client progress over time, it is critical to establish a clear baseline through comprehensive intake screening at the beginning of each client's engagement. Client screening uses a risk/needs assessment tool used by the CRU program. The tool includes demographics, housing status, Mental Health Illness, and Substance Use information, including medications, diagnosis, prior Mental Health services, and Substance Use Disorder Treatment. It also covers medical information and income or state benefits enrollment status. The client's level of need dictates the volume of time allotted for CRU assistance, and referrals are ranked for level of need.

Upon handoff to MCHC, a triage process assesses safety, shelter, mental health, immediate medical/dental/vision, and medication needs. Triage also assesses enrollment status in public health benefits. If any information was already collected by CRU-C, that documentation is used. Clients have access to a mental health professional and begin enrollment in mental health services; those in need of shelter are referred to MCHC's Hospitality House, and those seeking MCHC's other services are routed accordingly.

The case plan emphasizes community partnerships by not duplicating services while providing wraparound support with case meetings between providers. The small community around Fort Bragg allows service providers to collaborate effectively, with entities such as Redwood Community Services, Tapestry Family Services, Project Sanctuary, and the County of Mendocino also providing services. This collaborative structure is facilitated through oversight boards and informal collaboration.

The FBPD/MCSO screening tool is designed to address barriers faced by clients – including questions that address past trauma, cultural/ethnic backgrounds, gender identity, and accessibility needs. This approach ensures needs are properly identified. Staff undergo yearly training on cultural competency, trauma, gender identity, and accessibility.

Goals, Objectives, and Data Collection Methods

The goals and objectives of the CRU-C team through Prop 47 are as follows, with data collection methods from the Process Design embedded to demonstrate how progress will be monitored:

1. Decrease the likelihood of recidivism among the target population

The program aims to reduce recidivism by providing early intervention, wraparound support, and coordinated behavioral health and case management services. Evaluation efforts will focus on measuring reductions in law enforcement contact and criminal justice involvement among participants, with a particular emphasis on outcomes following CRU-C intervention.

Data Collection Methods

Client-level data related to police contacts, arrests, and jail bookings will be collected in partnership with the Fort Bragg Police Department (FBPD) and the Mendocino County Sheriff's

Office (MCSO). These data will be used to track changes in justice system involvement before and after program engagement. Reductions in law enforcement contacts will serve as a key indicator of success, and trends will be monitored through official agency reports and internal case management records.

Risk and needs assessments conducted at intake, combined with individualized case plans, will support evaluation of client engagement in services designed to prevent re-offense. These tools will also help assess the alignment between client needs and the services provided.

In 2023, approximately 14% of FBPD calls were related to mental health crises, with a similar percentage resulting in arrests. Through the deployment of CRU-C resources and a strong partnership with the Mendocino Coast Hospitality Center (MCHC), many of these situations are now addressed without arrest. The program has already demonstrated effectiveness in reducing criminal justice involvement, with several documented cases of clients transitioning from frequent police contacts and multiple involuntary psychiatric holds to sustained periods of stability without further law enforcement interaction.

With Prop 47 funding, the program will expand its collaboration with MCSO to reach more individuals at risk of recidivism, further enhancing public safety and supporting long-term recovery and community reintegration.

Quantitative Benchmarks

The following performance targets will be used to assess the program's effectiveness in reducing recidivism:

- Reduction in Arrests: At least 30% reduction in arrests among program participants within 12 months of enrollment.
- Law Enforcement Contact: At least 40% of clients will have no new police contacts within six months of intervention.
- Engagement in Services: A minimum of 80% of enrolled clients will actively engage in behavioral health, housing, or case management services within 30 days of intake.
- Successful Case Plan Completion: At least 65% of clients will complete a majority (75% or more) of the goals outlined in their individualized case plan within 6–9 months.

2. Improve the self-sufficiency of the target population through employment, education, and training

The goal of this program is to enhance the self-sufficiency of the target population by improving access to employment, education, and training opportunities. Evaluation efforts will focus on both short-term outcomes and long-term impact.

Data Collection Methods

Employment and training outcomes will be measured using CRU-C's standardized intake and assessment tools. These tools will capture key baseline indicators at enrollment, including employment status, educational attainment, and job readiness. These indicators will be reassessed periodically throughout program engagement to track client progress over time.

Individualized case plans will document client goals and achievements and will be updated regularly in collaboration with workforce development partners. The program will monitor the number of clients who identify employment as a primary goal at intake and assess whether that goal is achieved by the conclusion of the grant period.

Quality and Long-Term Outcomes

To assess the sustainability of program outcomes, a long-term follow-up process will be implemented. Employment retention will be tracked for up to three years after initial engagement, allowing the program to evaluate the long-term impact on clients' self-sufficiency and job stability.

3. Improve housing and family stability through civil legal services

The program seeks to enhance housing security and family stability by providing targeted civil legal services, including assistance with landlord-tenant issues, family court navigation, protective orders, and benefits access. These services are designed to address key legal barriers that contribute to housing instability, domestic conflict, and system involvement.

Data Collection Method:

Service data will be collected on the number, type, and duration of civil legal services provided to clients. Legal interventions may include housing-related advocacy (e.g., eviction prevention, habitability claims), family law support (e.g., custody, visitation, restraining orders), and assistance in accessing public benefits.

Legal service engagement will be documented in the Homeless Management Information System (HMIS) and tracked through coordinated case management platforms. Outcomes will be reviewed quarterly to assess the impact on housing retention, legal resolution rates, and family well-being.

Client satisfaction surveys will be administered after services are delivered, providing qualitative insights into whether legal interventions contributed to increased stability, safety, or access to essential resources.

4. Improve follow-through with criminal justice and family court obligations through case management

The program aims to increase client compliance with court-related responsibilities—including probation terms, family court mandates, and criminal justice obligations—through intensive case management rooted in restorative justice principles. Staff work collaboratively with courts, probation, and family members to ensure comprehensive support, while promoting client accountability and engagement.

Data Collection Methods

All case management activities and related outcomes will be documented in participant case files and a secure non-clinical tracking system. Compliance with court orders and legal requirements will be monitored through:

- Regular updates to individualized case plans
- Interagency communication with probation officers, public defenders, and family court personnel
- Client check-ins and compliance logs maintained by CRU-C staff

Staff will assess progress using structured compliance tracking tools. Restorative justice-informed practices allow for direct involvement of victims and family members in service planning when appropriate, strengthening client motivation and community accountability.

Quantitative Benchmarks

The following performance targets will be used to evaluate program effectiveness:

- Court Compliance Rate: At least 75% of enrolled clients will comply with all court or probation requirements during the first six months of engagement.
- Case Plan Adherence: 75% of clients will meet at least three key milestones identified in their individualized case plan within 90 days of enrollment.
- Court Appearance Rate: 90% of clients will attend all scheduled court hearings or legal appointments while in active case management.

5. Increase enrollment in inpatient substance use or other non-local treatment through the utilization of stabilization beds

The program seeks to improve access to inpatient substance use treatment and other non-local behavioral health services by using short-term stabilization beds as a bridge to treatment. These beds provide a critical opportunity for physical and mental stabilization before referral, increasing the likelihood of successful treatment engagement and completion.

Data Collection Method:

Referral, utilization, and outcome data for stabilization beds will be collected in partnership with Mendocino Coast Hospitality Center (MCHC). Data will be tracked through internal logs and shared case management systems and will include:

- Bed occupancy and turnover rates
- Number of clients referred to inpatient or residential treatment
- Enrollment rates in non-local treatment programs
- Treatment start and completion rates

Client progress will be assessed using triage tools at entry and follow-up assessments postdischarge from stabilization. These assessments will help evaluate readiness for treatment and identify success factors. Comparative analysis will be used to examine outcomes for clients who accessed stabilization beds versus those who did not.

Quantitative Benchmarks

The comparative success rate will be used to assess the impact of stabilization bed utilization: Clients who use stabilization beds will be at least twice as likely to enter scheduled treatment as those referred without stabilization support.

6. Decrease recidivism through transitional housing

The program aims to reduce justice system re-involvement by offering transitional housing to individuals exiting incarceration or inpatient care without a stable housing plan. Transitional housing provides structure, safety, and case-managed support that improves the likelihood of long-term stability and reduces the risk of recidivism.

Data Collection Method:

Client housing transitions and retention will be tracked using the Homeless Management Information System (HMIS) and individual case files. Case managers will document:

- Entry into transitional housing from jail, prison, or inpatient facilities
- Duration of stay in transitional housing
- Movement into permanent housing, employment, or outpatient treatment
- Any law enforcement contact post-placement

Housing status updates will be reviewed regularly to track progress toward independent living. Program effectiveness will be evaluated through comparison of outcomes between those who enrolled in transitional housing and a baseline group of individuals released without housing support.

Quantitative Benchmarks

To measure impact, the following performance indicators will be tracked:

- Transitional Housing Enrollment: At least 85% of referred individuals exiting incarceration or inpatient care without housing will be successfully placed in transitional housing within 14 days of referral.
- Recidivism Reduction: Individuals placed in transitional housing will show a 40% lower rate of re-arrest or jail booking within 12 months, compared to similar individuals without housing placement.
- Housing Retention: 75% of participants will remain in transitional housing for at least 90 consecutive days, a known predictor of improved long-term outcomes.
- Permanent Housing Exit Rate: 80% of transitional housing participants will successfully transition to permanent housing or long-term supportive housing within 6–9 months.
- Employment or Service Engagement: 60% of participants will engage in employment, outpatient services, or education/training within 60 days of placement.

7. Provide services tailored to individual needs that help improve life functioning and resiliency

The program is designed to increase individual functioning, resilience, and overall well-being by offering comprehensive, client-centered services informed by detailed assessments and personalized case planning. These services support improvements in mental health, substance use recovery, independent living skills, and social connectedness.

Data Collection Method:

A multi-tiered approach will be used to assess client needs, guide service planning, and monitor progress over time. Evaluation tools and tracking methods include:

- Adult Needs and Strengths Assessment (ANSA): Used to identify strengths and needs across life domains and track improvements over time.
- Bio-Psycho-Social Assessment: Used to diagnose mental health conditions and inform care planning; secondary diagnoses for substance use will also be identified where applicable.
- Triage Tools and Initial Intake: Used to prioritize services and build individualized case plans based on urgency and presenting issues.

Service participation will be tracked using:

- Homeless Management Information System (HMIS) for non-clinical and housing-related support
- Internal case tracking systems for care coordination and life skills programming

Services monitored include:

- Attendance in therapy, groups, and care management sessions
- Engagement in housing navigation, employment readiness, and street medicine
- Progress toward case plan goals and participation in up to 18 weekly wellness and life skills classes offered through the MCHC Wellness Center

Case plans will specify individualized service duration and intensity. Clients will remain open in the system for six months after achieving their case plan goals to ensure continuity and sustainability.

Quantitative Benchmarks

The following performance indicators will be used to evaluate service effectiveness and impact:

• Goal Achievement: At least 70% of participants will achieve 75% or more of their individualized case plan goals within 6–9 months of enrollment.

- Improvement in Functioning (ANSA): 65% of clients will demonstrate measurable improvement in functioning and resiliency indicators on the ANSA within 90 days of service initiation.
- Program Engagement: 80% of clients will participate in at least two types of services, such as therapy and life skills classes, within their first 60 days.
- Sustained Participation: 75% of clients will remain engaged in services for at least 90 consecutive days, a key milestone for behavior change.

8. Improve service delivery through engagement with the Local Advisory Committee (LAC)

The program will strengthen service delivery and accountability by actively engaging the Local Advisory Committee (LAC)—a cross-sector body of stakeholders, including service providers, justice system representatives, community members, and individuals with lived experience. The LAC will serve as an oversight and feedback mechanism to ensure Prop 47-funded services are responsive, effective, and community-informed.

Data Collection Method:

The LAC will convene quarterly to review:

- Performance metrics aligned with each program goal
- Client outcome data and service utilization trends
- System-level challenges, gaps in care, and opportunities for coordination
- Client and stakeholder feedback collected through surveys, public input sessions, and direct service engagement

The following will be documented and used to inform program adjustments:

- Meeting minutes and attendance records
- Formal recommendations issued by the LAC
- Thematic analysis of public comments and community concerns

All findings and recommendations will be integrated into bi-annual evaluation reports and used to inform program strategy, resource allocation, and policy advocacy.

Alignment with Prop 47 Objectives

By aligning LAC feedback and oversight with data collection strategies tied to each program goal, the CRU-C ensures that:

• Progress is continuously monitored

- Adjustments can be made in real time
- The impact of Prop 47-funded services can be clearly demonstrated throughout the grant term

This structure enhances transparency, ensures community voice, and supports evidence-based service delivery.

Client Surveys and Program Completion

Exit surveys and follow-up assessments will be administered to evaluate both short-term and long-term client outcomes, satisfaction with services, and perceived effectiveness of the CRU-Coastal program.

A participant will be considered to have successfully completed the CRU-Coastal program if they complete at least 80% of the goals outlined in their individualized case plan. At the start of participation, each client will undergo a comprehensive intake and assessment process—including risk/needs screening, triage, and collaborative planning – to identify personalized goals based on their immediate needs and long-term stability. These goals may include, but are not limited to: engagement in case management services, completion of assigned courses at the MCHC Wellness Center (such as Life Skills or Recovery Support), linkage to housing or legal services, participation in employment or educational programs, or follow-through with mental health or substance use treatment plans. Successful completion reflects meaningful engagement with services and measurable progress toward increased stability, self-sufficiency, and reduced risk of recidivism.

Successful program completion results in a reduction in law enforcement contacts and emergency calls for service. Additional components include obtaining employment or housing.

- Employment Successfully obtain documented full-time or part-time employment for at least 6 months.
- Housing Successfully obtain a stable housing status.

Upon completion of services, clients will complete an exit survey designed to assess:

- Satisfaction with specific services received (e.g., case management, housing navigation, employment assistance, legal aid, behavioral health support).
- Perceived impact of services on their stability, safety, and self-sufficiency.
- Confidence in navigating systems (e.g., justice, social services) post-intervention.
- Suggestions for improvement in service delivery or accessibility.

Surveys will include both quantitative questions (e.g., Likert-scale items rating effectiveness and satisfaction) and qualitative prompts (e.g., open-ended questions about their experience and outcomes). In addition, follow-up assessments will be conducted at intervals (e.g., 3 months, 6 months, and possibly 12 months post-exit) to measure:

- Sustained progress toward goals (e.g., continued housing stability, employment, absence of new arrests).
- Continued engagement in support services, if applicable.
- Ongoing barriers to success and areas where additional support may be needed.

These follow-ups will be conducted via phone, in-person check-ins, or online platforms, depending on client preference and accessibility.

All feedback from surveys and assessments will be anonymized and aggregated to identify trends in client experiences and outcomes. This information will be shared with the CRU-C team and the Local Advisory Committee (LAC) to inform program adjustments, service improvements, and ongoing evaluation efforts.

Process Measures (PM) and Outcome Measures (OM)

Baseline and outcome data will be based on a review of a client's history with the criminal justice system, including contacts with law enforcement. Evaluations related to recidivism and diversion will be based on a reduction in incidents of incarceration and a reduction of negative contacts with law enforcement. Mendocino County already shares data related to recidivism related to incarceration; the Mendocino County Sheriff's Office and the Fort Bragg Police Department have agreed to share data related to police contacts involving clients with signed Release of Information agreements.

Additionally, the Fort Bragg Police Department and MCHC will share data related to the number and types of services a client has received, and where a signed Release of Information agreement can be located. Data-sharing agreements will be signed and in place for all non-public information prior to October 1, 2024. The Advisory Committee will review the types of data shared and the effectiveness of the agreements; based on findings, the Committee will receive recommendations on whether the agreements need to be modified.

The following actions will be implemented to achieve desired outcomes:

- **PM.1**: Provide services related to reducing recidivism, increasing diversion, and increasing access to mental health services to no fewer than 120 non-duplicated individuals over the grant performance period.
 - o **OM.1**: At least 40% of the clients who receive services will see in a reduction in the frequency of police contacts, incarceration, or being placed on mental health holds (5150 W&I) during the three years following the end of the grant period.
- **PM.2**: Provide support with employment, education, and training opportunities for no fewer than 70 unduplicated individuals.
 - o **OM.2**: At least 30 individuals will obtain some form of documented employment.

- **PM.3**: Provide linkage to civil legal services to no fewer than 140 unduplicated individuals.
 - o **OM.3**: Client exit surveys following civil legal services show at least 75% of the clients found the service beneficial.
- **PM.4**: Provide case management to no fewer than 130 unduplicated individuals.
 - o **OM.4.1**: At least 50% of clients receiving case management services subsequently received alcohol or other drug recovery services
 - o **OM.4.2**: At least 10% of unhoused clients receiving case management procure permanent housing
 - o **OM.4.3**: At least 75% of unstably housed clients receiving case management services avoid return to homelessness during the project performance period.
- **PM.5**: Provide stabilization beds prior to inpatient treatment or other non-local services for no fewer than 15 unduplicated individuals.
 - o **OM.5**: The use of stabilization beds increased the Care Response Unit's ability to connect individuals with in-patient rehabilitation services.
- **PM.6**: Provide transitional housing for no fewer than 15 clients who are exiting incarceration, inpatient treatment, or seeking permanent housing.
 - OM.6: This process measure will allow us to compare the effectiveness of Care Response Unit services and lasting outcomes between unhoused and temporarily housed clients.
- **PM.7**: Conduct Adult Needs and Strengths Assessment (ANSA) upon intake on no fewer than 150 individuals over the grant performance period.
 - o **OM.7**: Individuals demonstrate an average 9-point improvement in ANSA scores each year for services received
- **PM.8**: Make adjustments as needed to service delivery based on input from the Local Advisory Committee.
 - o **OM.8**: The project meets at least 90% of deliverables described in this work plan and effectively utilizes at least 90% of the proposed budget.

Reporting and Continuous Improvement

- **Quarterly Reports**: Progress reports will be submitted to the Board of State and Community Corrections.
- **Annual Evaluation**: Annually, an internal comprehensive analysis of outcomes and recommendations for program adjustments will be conducted.

• **Final Report**: A summative evaluation report will document program impact, challenges, and lessons learned at the conclusion of the grant period.

Program Monitoring and Oversight

- Leadership Responsibility: Captain Thomas O'Neal (FBPD) and Paul Davis (MCHC) will oversee project implementation, staffing, and evaluation efforts.
- Local Advisory Committee: Quarterly meetings to track progress, address challenges, gather feedback, and make adjustments as necessary.

A Local Advisory Committee (LAC) was formed to provide project oversight. The LAC roster includes members with professional experience as supportive service providers, representatives from the local educational system, two representatives from faith-based organizations, a member of the Latinx community, a previously-incarcerated member, a representative of the FBPD, a representative from the District Attorney's office, two local elected officials, a member of the native American community, and a medical doctor with experience working with SUDT.

In May and June 2024, the Fort Bragg Police Department conducted direct outreach with key stakeholders from the mental health, substance use, and homeless communities and advocacy groups to identify potential candidates to serve on the Local Advisory Committee. Outreach recipients were selected in accordance with the Proposition 47 focus on preventive and supportive programs for K-12 schools, victim services, and mental health and drug treatment initiatives. Outreach activities included presenting a comprehensive project overview, soliciting feedback from potential candidates, and obtaining recommendations for additional stakeholders.

Committee Member selection was guided by key priorities including a wide range of viewpoints, relevant work experience both in specialized fields and with targeted groups, and an ability to commit to the Committee meeting schedule. The final Member roster is built on a diversity of stakeholder types to ensure fairness and inclusivity—including behavioral health professionals, educators, elected officials, faith-based organization members, law enforcement, prosecution, social services providers, and key representatives of the community including Latinx and Pomo representations, individuals impacted by the Justice System, and a parent of a child experiencing mental health or substance use disorders. Other stakeholder types that the Committee is actively seeking to engage include public defenders, LGBTQIA+ advocates, and Village of Mendocino representatives.

The coastal Mendocino County community is relatively small, with approximately 8,500 residents in the communities of Cleone, Fort Bragg, and Mendocino; as such, there is a limited pool of qualified candidates for the LAC, and FBPD is familiar with the entities and individuals with pertinent experience in this topic area. The LAC will meet publicly and will develop a process for filling seats that become vacant should any members leave the LAC in the future.

The Fort Bragg Police Department designed a set of guidelines for Advisory Committee meetings and public meetings—to inform the overall process and ensure a consistent meeting structure that is comprehensive and accessible. Advisory Committee members will commit to convening quarterly meetings starting no later than October 31, 2024. Regular meeting agendas will focus on, at minimum: project updates, identifying and prioritizing needs for target areas and

populations, identifying strategies to address those needs, developing and implementing the Prop 47-funded project, reviewing feedback from public meetings, and considering additional Committee Members from underrepresented populations and groups. Minutes will be generated and archived for each Advisory Committee meeting and made available to the public.

Stakeholder Meetings

The CRU-C team will hold meetings to inform the community about the grant and program, answer questions, and gather feedback. Subsequent annual meetings to report on program performance, gather input and feedback, and answer questions.

Public meetings will similarly be held on a quarterly schedule and will present opportunities for broader community input. With an emphasis on inclusivity and to encourage maximum attendance, public meetings will be held in a neutral venue (i.e., not a police department or place of worship) and publicized through various channels including social media, local news outlets, on the lead agency's website, and via email subscription lists for interested stakeholders.

Public meeting agenda will cover, at minimum: updates from key staff on project accomplishments, needs, and challenges; identifying and prioritizing needs for target areas and populations; identifying strategies, programs, and/or services to address needs; collecting recommendations for increased public involvement and inter-agency collaboration; and overviewing the efforts of collaborators. These guidelines help to ensure overall transparency and accountability in the project's development and implementation.

Conclusion

The CRU-Coastal (CRU-C) Program is a vital initiative serving the Mendocino Coast, aimed at breaking the cycle of repeated law enforcement contact by connecting individuals with mental health and substance use challenges to timely, supportive services. By prioritizing early intervention, personalized case management, and strong community partnerships, CRU-C helps reduce recidivism, improve public safety, and support long-term stability for individuals in crisis. A comprehensive evaluation plan ensures the program remains transparent and accountable to the public, tracks progress toward key goals, and provides valuable data to inform future policies, community investments, and potential expansion across the region.

Project Logic Model

Social Services Liaison

Administrative

Inputs

Assistant Staff training Coordination with Mendocino County Sheriff's Office Deployment of Care Response Unit program to unincorporated areas Mendocino Coast **Hospitality Center** Stabilization beds and transitional housing Collaboration with **Local Advisory** Committee (LAC) Referrals from DA **Public Defender** Probation Jail Re-Entry Team

Activities

Provide services to reduce recidivism and mental health holds Provide employment, education, and training opportunities Provide legal civil services Case management Alcohol or drug recovery Permanent housing Avoid homelessness Stabilization beds Transitional housing **Conduct Adult Needs** Assessments Collaborate with LAC Participation in **Behavioral Health Court Homeless Services** Continuum of Care

Outputs

Number of individuals served as well as reduced recidivism and mental health holds Number of individuals with documented employment Number of individuals receiving beneficial civil legal services Number of individuals receiving alcohol or drug recovery services Number of individuals procuring permanent and transitional housing Number of individuals receiving in-patient rehabilitation services **Individuals** demonstrating 9-point improvement in ANSA scores Project achieves 90% of deliverables Connections and enrollment into mental

health services



Outcomes

Decrease the likelihood of recidivism among the target population through linkages to supportive services and ongoing support in navigating both the criminal justice and social service systems upon initial contact with law enforcement when appropriate

Improve the self-sufficiency of the target population through assistance with employment, education, and training opportunities following diversion into the CRU-Coastal program

Improve housing and family stability by providing civil legal services, such as assistance with restraining orders for crime victims, navigating the Family Court process, and responding to or assisting with eviction notices and other threats to housing

Improve individual follow-through with criminal justice and family court obligations through case management following diversion to the CRU-Coastal program

Increase the likelihood of target population enrollment in inpatient substance use treatment or other non-local services by providing stabilization beds in partnership with the Mendocino Coast Hospitality Center (partner CBO) after the individual agrees to enroll in services

Decrease recidivism among the target population through the provision of transitional housing for individuals exiting incarceration, inpatient treatment, or when working to become housed

Provide services tailored to individual needs that help improve life functioning and resiliency

Improve service delivery through active engagement with the Local Advisory Committee throughout the grant term