



2011 PUBLIC SAFETY REALIGNMENT ACT:

Fifth Annual Report on the Implementation of Community Corrections Partnership Plans

July 2017



Board of State & Community Corrections
2590 Venture Oaks Way, Suite 200
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www.bscc.ca.gov

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STATE OF CALIFORNIA – EDMUND G. BROWN, GOVERNOR
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A sheriff in charge of local detention facility with a BSCC rated capacity of more than 200 inmates appointed by the Governor and subject to Senate confirmation	
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Director, Commonweal Juvenile Justice Program	David Steinhart
A community provider or advocate with expertise in effective programs, policies and treatment of at-risk youth and juvenile offenders appointed by the Senate Committee on Rules	
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* Board member composition is pursuant to Penal Code 6025

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EXECUTIVE SUMMARY

In 2011 Governor Jerry Brown signed Assembly Bill (AB) 109, which shifted the responsibility of lower-level offenders to counties with the intent of improving public safety outcomes for the adult offender population. This historic piece of legislation is commonly referred to as “Public Safety Realignment” or simply “Realignment.” AB 109 (Chapter 15, Statutes of 2011) changed both sentencing and post-prison supervision for a new classification of offenders: those with non-serious, non-violent, non-sex crimes. These lower-level offenders now serve their sentences in local jails, making reintegration back into their home communities more effective and successful.

Each year since Realignment, appropriations in annual State Budget Acts have provided monies for counties to implement diverse approaches for supervision and rehabilitation that reduce recidivism. These local approaches and corresponding spending plans for Realignment activities are created by each county’s Community Corrections Partnerships (CCPs), as established in Penal Code Section 1230. The CCPs are chaired by the Chief Probation Officer and membership includes, at a minimum: the Chief of Police; Sheriff; District Attorney; Public Defender; Presiding Judge of the Superior Court (or his/her designee); and a representative from either the County Department of Social Services, Mental Health, or Alcohol and Substance Abuse Programs, as appointed by the County Board of Supervisors.

The Budget Act of 2016 [Senate Bill (SB) 826, Chapter 23] appropriated \$7,900,000 to counties as follows: *“Counties are eligible to receive funding if they submit a report to the Board of State and Community Corrections by December 15, 2016, that provides information about the actual implementation of the 2015-16 Community Corrections Partnership plan accepted by the County Board of Supervisors pursuant to Section 1230.1 of the Penal Code. The report shall include, but not be limited to, progress in achieving outcome measures as identified in the plan or otherwise available. Additionally, the report shall include plans for the 2016-17 allocation of funds, including future outcome measures, programs and services, and funding priorities as identified in the plan accepted by the County Board of Supervisors.”*

Annual allocations are determined based on the most recent county population data published by the Department of Finance.

Funds were distributed by January 31, 2017 to all counties because they complied with the requirements, which was a condition of receiving these funds. Allocations are prescribed as follows:

- *\$100,000 to each county with a population of 0 to 200,000, inclusive;*
- *\$150,000 to each county with a population of 200,001 to 749,999, inclusive; and*
- *\$200,000 to each county with a population of 750,000 and above.*

Since 2011, the Board of State and Community Corrections (BSCC) has been the repository for the CCP Plans developed by each county to implement the provisions of Public Safety Realignment. Pursuant to the California Penal Code Section 6027, commencing January 1, 2013, and annually thereafter, the BSCC is mandated to collect and analyze available data regarding the implementation of local plans and other outcome-based measures. By July 1, 2013, and annually thereafter, the Board must provide to the Governor and the Legislature a report on the implementation of the plans.

This report presents the information and data submitted to the BSCC by all 58 jurisdictions by way of the Fiscal Year (FY) 2016-17 Community Corrections Partnership Surveys (see Appendix). Surveys were emailed to each Chief Probation Officer (as CCP Chair) in October 2017 and each Chief was asked to share the survey with CCP members and submit responses that represent the CCP's view.

Counties have developed various approaches on how to best use the allocation of Realignment funding to address local needs. Not only are counties investing in a holistic approach to the treatment of offenders, but also by investing in evidence-based strategies that provide for evaluation of programs for better outcomes in reducing recidivism and offender quality of life efforts, as well as ways to increase public safety in their jurisdictions.

Examples of diverse approaches include:

Imperial County – *“The Inside/Out College program is the first of its kind in the State of California. Since implementation in 2014, the program has offered five college courses with the students consisting of 15 incarcerated individuals and 15 junior college students. During the past year, the Inside/Out program was awarded the prestigious 2016 CSAC Challenge award for its innovation and dedication to building success between education and corrections.”*



Los Angeles County – *“The use of community-based Alternative Treatment Centers (ATC) programs has been very effective in serving the population with Substance Use Disorder (SUD). Outside of the Substance Treatment and Re-entry Transition (START) program, 91 inmates were placed into Female, Veteran's, and Transitional Case Management programs during 2015. In 2016, Gateways Mental Health Program was added to ATC programming, making up to 42 beds available for qualified mental health inmates. Thus far in 2016, 72 inmates have been placed in these various ATC programs, including 25 into the Gateways Mental Health program. In addition to the START program, 103 inmates have successfully completed their sentence while in programs.”*

Riverside County - *“The Probation Department is working with the non-profit organization CA Forward on the local CA Forward Initiative, which continued to provide assistance to the Probation Department throughout FY 15/16. The workgroups identified last year - the Offender Engagement Workgroup, the Violations Workgroup, and the Substance User Strategies Workgroup - made progress in several areas. During FY 16/17 an agreement with CA Forward to continue with the Justice System Change Initiative (J-SCI) assistance to Riverside County for the third consecutive year was approved by the Board of Supervisors. CA Forward's multidisciplinary team will provide guidance for implementation of the eight J-SCI recommendations, which are designed to mature the organizational structure, analytic capacity, management protocols and continuous improvement culture within the county.”*

San Francisco City/County – Toward the goal of increasing the knowledge of racial and ethnic disparities in the San Francisco Criminal Justice System, *“the San Francisco Reentry Council commissioned a report on the state of racial and ethnic disparities in San Francisco. The W. Haywood Burns Institute delivered a report in June 2015. The Reentry Council, which includes justice system partners in San Francisco, discussed the findings of this report and identified next steps for addressing racial and ethnic disparities in San Francisco. Next steps included: conduct interviews with justice system partners and stakeholders to discuss report findings; summarize interview findings and proposed solutions; develop plans for conducting agency-specific analyses on racial and ethnic characteristics to understand the extent to which disparities exist at each decision point in the criminal justice system; continue to us*

the Reentry Council as a mechanism for convening justice system partners to discuss this topic. In addition, 93 probation department staff (approximately 2/3) have completed training on leadership and diversity.”

San Joaquin County- *“With the assistance of the University of Cincinnati Correctional Institution (UCCI), the Day Reporting Center was re-designed in January 2015. The goal of the redesign was multi-fold: to increase client participation; increase the dosage of evidence-based programming; and reduce the wait time between entry points for closed groups.*



to increase client participation; increase the dosage of evidence-based programming; and reduce the wait time between entry points for closed groups. The program consists of three phases and aftercare. During Phase I, clients report 5 days a week and focus on orientation, assessment and treatment planning. Phase II requires clients to report four days per week, complete the Foundations class (which is a component of Thinking for a Change created by UCCI), 10 Social Skills groups and two cycles of Problem Solving groups. In Phase III, complete a treatment series

based on their top criminogenic needs. Clients are also eligible to participate in a Vocational Education Program.”

Santa Clara – *“Full Service Partnership (FSP) programs are intensive, comprehensive programs for adults with Serious Mental Illness (SMI) who are high-risk, frequent users of involuntary care and/or underserved homeless consumers with high levels of need. The philosophy is to provide a full array of treatment services which include: substance dependency treatment; psychiatric services; mental health counseling; case management; housing; and community resources necessary to meet the needs of each individual’s life circumstances. These services are operated by community-based organizations and provide client access 24-hours per day, 7-days per week. FSP targets SMI adults discharged from Institutions for Mental Diseases, inpatient hospitals, State hospitals, those who have been high users of Emergency Psychiatric Services, crisis residential services, have severe co-occurring disorders, involvement with the criminal justice system, and/or are homeless or at risk of homelessness. FSP providers have the flexibility to outreach and engage clients who are homeless or are in a locked setting.”*



In addition to the above, several counties have implemented gender-specific programs, trauma-informed care approaches, and/or specialty and collaborative courts targeting specific populations like Veterans and/or those with behavioral health needs. Additionally, many counties have determined data collection efforts within the justice system or across multiple agencies need to be improved for tracking individuals through their case management systems and for tracking a more detailed dataset of measures in relation to the goals and objectives in their CCP.

Several strategies/themes are similar between the CCP Survey responses to “Goals, Objectives, and Measures.” Specifically, 26 of the 58 jurisdictions (45%) have a goal/objective that addresses a community or transitional housing issue; 22 of the 58 jurisdictions (38%) have a goal/objective that clearly addresses the treatment of mentally ill offenders; and 19 of the 58 jurisdictions (33%) have a goal/objective that addresses vocational/employment components to their CCP plan.

As part of the CCP Survey this year, counties had the opportunity to provide photos, quotes, and/or success stories pertaining to the programs they have implemented with Realignment monies. The following are a few of those responses.

Client participated in the Reading Plus literacy program at the Probation Report and Resource Center (PRRC). Although initially apprehensive, he ultimately improved his literacy earning an award for achieving a score of 80-90% on 2 consecutive lessons. He reported that he is “learning a lot” and feels “more confident” with his reading skills. – Santa Barbara County

“When I entered the program in November of 2015, I was not ready to take my life seriously. I hit rock bottom and decided to reach out for help from my Probation Officer. He got me into the Freedom House. After nine days of no drug use, I showed up with a different outlook on what I wanted to accomplish. With the aid of a very professional and friendly staff, I was able to schedule my classes to fit into and around my work schedule. Everyone was so supportive. I have now completed my classes and graduated. I am well on my way to a better future. My relationships with friends and family have improved dramatically. I have a positive outlook on everything these days.”



– Kern County



Successful completion of Minnie Marvels Home for Women and Children - Kern County



College-bound Success
- Stanislaus County

The Pre-trial Program in Ventura County is a collaboration between the Probation Agency, District Attorney’s Office, Public Defender’s Office, Sheriff’s Office and the Superior Court. This program has shown great success, leading the Honorable Judge Brian Back to state, “Public safety is best served not just for today or until the next court appearance; instead, public safety is best served by developing programs which employ the use of evidenced-based approaches to address the long term impact on the individual and the community. This is one such program.”

-Ventura County

"Coming to the DRC has made a truly positive impact on my life. It's helped me in setting goals for the next few years and these goals are going to set my life in the right direction. The DRC has helped me with coping skills and ways to diffuse problems that may arise in daily life. It has helped me retrain my thinking pattern to be a more positive person." – Orange County

Following years of criminality, which included drug and burglary arrests, and unsuccessful stints in different drug treatment programs, the offender was referred to the DRC. This offender came into the program and attended regularly and participated in all her classes. During her time in the program she attained "Star Client" status, began taking classes full-time at a nearby community college, and completed the Restorative Justice program. She was mandatorily discharged from PCS supervision and participated in the DRC graduation ceremony six months later.
- Orange County

*"I really enjoyed being around every member of staff. They are all caring and very helpful."
"[Staff members are] very resourceful and always available."
"Everyone was very respectful."
"It feels like you guys truly care. Thank you."
"I feel I have achieved a lot at the DRC."
-Sonoma County*



"I've been in trouble most of my life, in and out of jail or prison. I've been addicted to drugs and money. My life changed dramatically when I went into the Adult Rehabilitation Center Salvation Army. I finally got it. Since then my probation officer was strict and very helpful, he cared, and it showed. Through a program from probation I went to truck driving school and got my class A driver's license. Being clean and sober changed my life. I paid off my child support, reconciled with my wife, got a passport and I'm planning a vacation with my wife. I live and work where I can appreciate being free. Thank you to all who had an impact on my life!" – Marin County

As previously stated, this report presents the information and data compiled from the FY 2016-17 Community Corrections Partnership Surveys. Prior reports on the implementation of local CCP plans can be accessed via the BSCC website at: <http://www.bscc.ca.gov/index.php>.

However, the most in-depth information and materials on county-specific realignment implementation are contained within the original county CCP plans available at:

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



Community Partnership for Families - San Joaquin

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INTRODUCTION

Since Realignment, each county has taken a unique direction to developing its local public safety approach. Diverse approaches, expenditure of funding allocations, target populations to be served, community stakeholders, and goals are described throughout the report.

The remainder of the report includes Individual County Profiles and an Appendix consisting of a Glossary of Terms, BSCC Definition of Key Terms, and the FY 2016-17 CCP Survey.

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Community Corrections Partnership Membership
(October 21, 2016)

Wendy Still
Chief Probation Officer

Judge Morris Jacobson
Presiding judge or designee

Susan Muranishi
County supervisor or chief administrative officer or designee

Nancy O'Malley
District Attorney

Brendon Woods
Public Defender

Rich Lucia
Sheriff

Dave Spiller
Chief of Police

Lori Cox
Department of Social Services and Department of Employment

Rebecca Gebhart
Department of Mental Health and Alcohol and Substance Abuse Programs

Karen Monroe
Office of Education

Vacant
Community-based organization

Vacant
Victims' interests

The CCP meets bi-monthly

Alameda County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Protect the public through transparent and accountable administration and service.

Objective:

- Reduce Recidivism.

Measure:

- Percent of clients with a new felony conviction within three years of placement on supervision (BSCC definition).
- Percent of violations filed by District Attorney.
- Percent of violations filed by Probation.
- Percent of active clients with a new conviction in the fiscal year.
- Percent of clients with a new conviction one year after termination of probation.

Progress: 20% obtained a new felony conviction (BSCC definition); 20% had petitions filed by the District Attorney; 5.9% had petitions filed by Probation; 5% of active clients received a new conviction in the fiscal year.

Goal: Develop innovative and therapeutic support for clients focused on health, housing and improving access to family sustaining employment.

Objective:

- Connect clients to housing and employment.

Measure:

- Employment - Percent change from FY 14/15 to FY 15/16 in the following: referrals; enrollments; subsidized employment; unsubsidized employment; 30-day job retention; 90-day job retention; and 180-day job retention.
- Housing - Percent change from FY 14/15 to FY 15/16 in the following: referrals, enrollments; and total served.

Progress: Employment – Referrals: 61%; Enrollments: 49%; Subsidized Employment: 48%; Unsubsidized Employment: 57%; 30-day Job Retention: 74%; 90-day Job Retention: 81%; and 180-day Job Retention: 87%
Housing – Referrals: 38%; Enrollments: 50%; and Total served: 38%

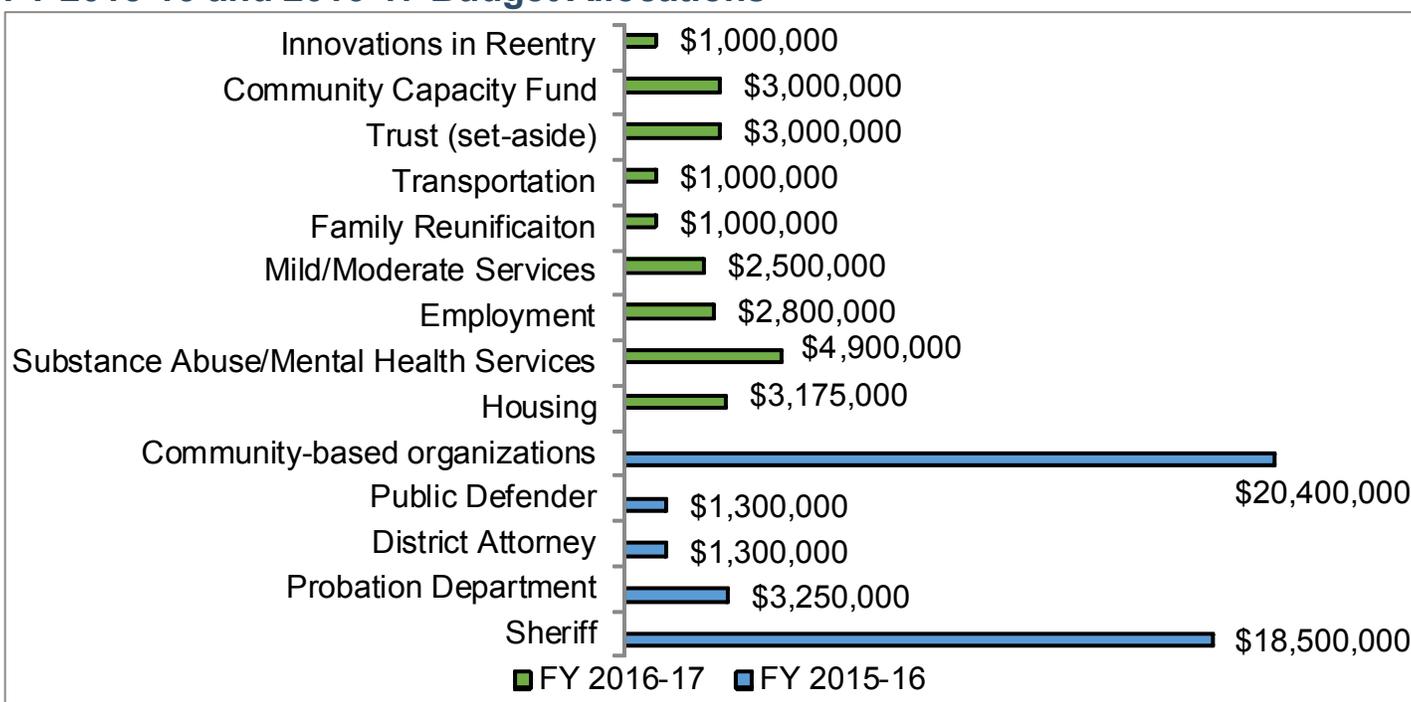
Goal: Ensure effective and supportive transitions from detention to the community.

Objective: • Connect clients to services, pre-and post-release.

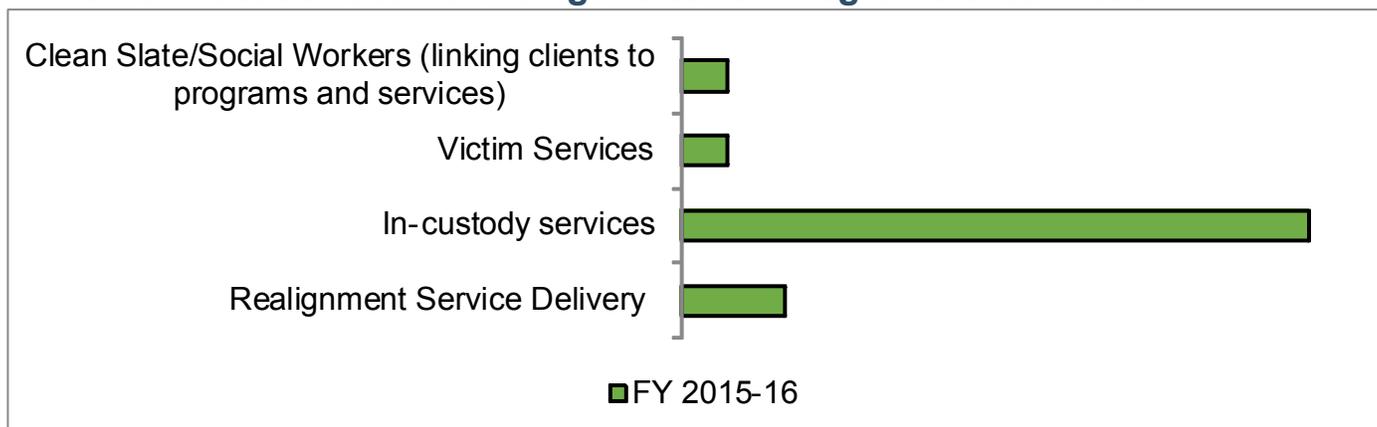
- Measure:**
- Percent of clients enrolled in services through the Transition Day Reporting Center.
 - Percent of clients connected to one or more services within 30 days of enrollment in the Transition Day Reporting Center.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17. Note: Alameda County intends to modify the goals established in the County’s Realignment Plan to be aligned with the goals established in the County’s Adult Re-entry Strategic Plan.

FY 2015-16 and 2016-17 Budget Allocations

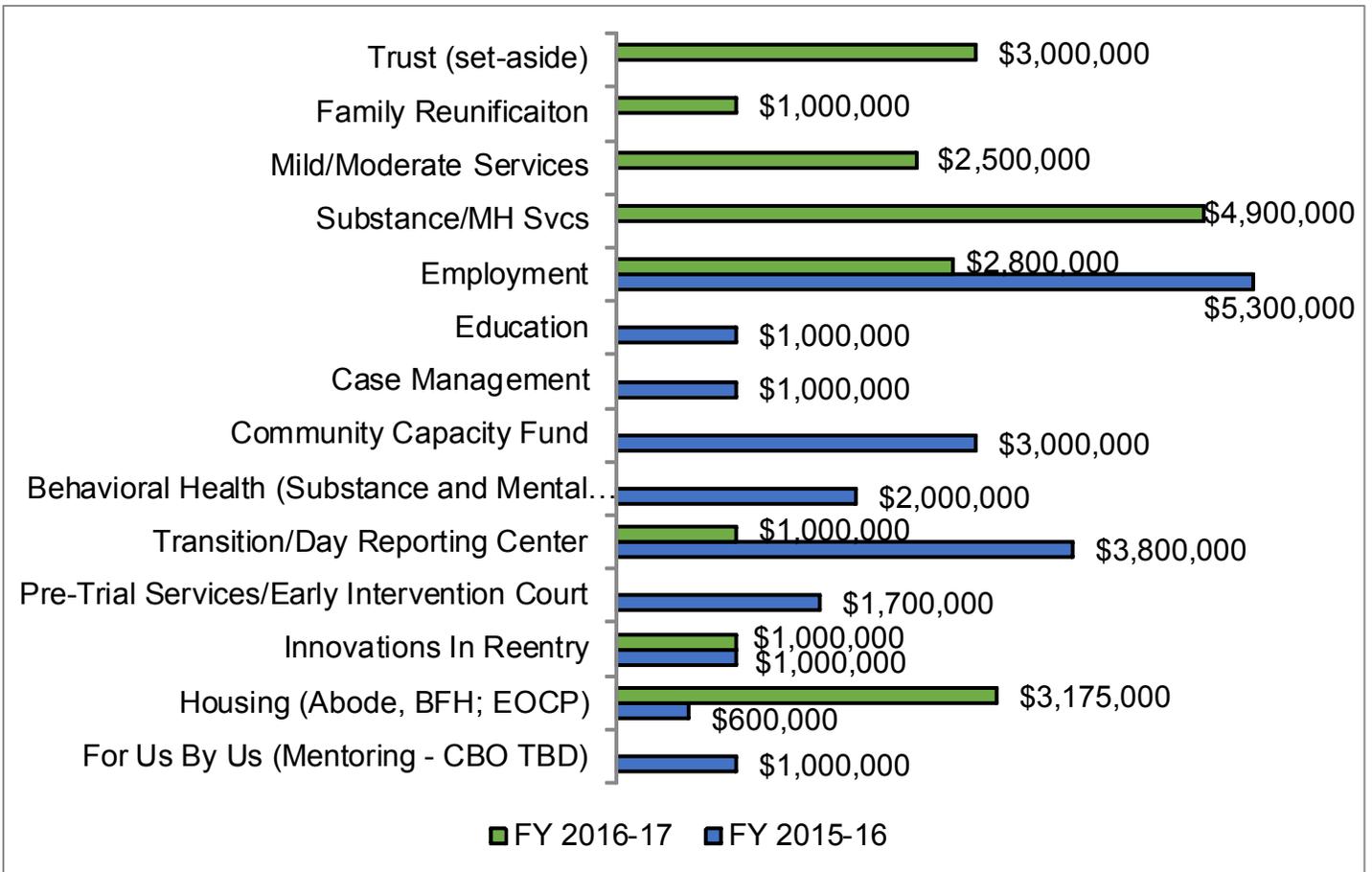


FY 15-16 Allocations to Public Agencies for Programs & Services



The allocations to public agencies for FY 2016-17 are not determined.

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Alameda County contracted with an outside evaluator who is in the process of evaluating the County's realignment efforts .

Does the county consider evaluation results when funding programs and/or services?

Yes. Since the outside evaluation is in process, we have relied on program outcomes when funding programs and services.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population, conviction, length of stay and recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Mental health services, as follows-

In-Custody: medication evaluations and counseling; psychiatric hospitalization (5150 crisis); and pharmacy

Out-of-Custody: psychiatric hospitalization and residential; crisis medication; counseling; and pharmacy

Substance use disorder services, as follows-

Out-of-Custody: detox; sobering station; residential/recovery residences; outpatient group and individual sessions; care management; and narcotic treatment programs (dosing and counseling)

Housing services, as follows-

In-custody: information, assessments and housing identification

Post-release:

Short-term rental subsidies

Housing search and placement support

Support with reducing barrier to obtaining housing

Coordination with employment support providers

Housing Case management

Landlord relationship building

Assistance with re-unification with support system and family members

Transportation assistance
Emergency Shelter

Employment services, as follows-

In-custody:

Employability Assessments

Post-release:

Employability Assessments

Job Readiness Training

Transitional Work Programs

Subsidized/Unsubsidized Employment

Job Retention Services

What challenges does your county face in meeting these programming and service needs?

A) Developing a robust data system that will collect and report services and outcomes for both public and community agency service providers has been a challenge, due to the number of agencies and resources available to clients in Alameda County; and

B) Developing capacity within the Probation Department to administer and oversee contracts/ outcomes.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

For FY 15/16, the Alameda County Board of Supervisors approved the allocation of 50% of the Public Safety Realignment funding to community-based organizations. Additionally, the Alameda County Board of Supervisors approved the allocation of \$9 million dollars over three fiscal years (FY 14, FY 15, and FY 16) in an effort to build the capacity of community-based organizations that provide reentry and wraparound services to the reentry population. For FY 15/16, there were 87 agencies that participated in the capacity building program and received technical assistance by two highly trained providers.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Probation Department entered into performance-based contracts for employment services where vendors are paid when clients' reach specific benchmarks or vendors complete various tasks, such as: enrollments, assessments, employment (subsidized or unsubsidized); and job retention (30-day, 90-day and 180-day). This type of payment structure provides incentives to the vendors to assist clients achieve employment outcomes. The payments increase as the client progresses through the continuum of services, with the highest amounts to be invoiced, once a client has retained 180 days of employment. This model also includes payments for services that help to reduce barriers to employment and provide case management.

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**Community Corrections
Partnership Membership**
(October 21, 2016)

Gordon Morse
Chief Probation Officer

Vacant
Presiding judge or
Designee & County
supervisor or chief
administrative
officer or designee

Karen Dustman
District Attorney

Eric Acevedo
Public Defender

Rick Stephens
Sheriff

Vacant
Chief of Police

Nichole Williamson
Department of Social
Services and Department
of Employment

Alissa Nourse
Department of Mental
Health and Alcohol and
Substance Abuse
Programs

Vacant
Office of Education

Vacant
Community-based
organization

Vacant
Victims' interests

The CCP meets semi-
annually and as needed.

Alpine County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: The overall goal of the CCP is to maintain offender accountability throughout the duration of their probationary period. This goal was implemented in 2011 and remains today.

Objective: • To prevent a negative impact on local crime patterns due to former state prison inmates and parolees being supervised locally.

Measure: • This will be measured by the lack of increase or decrease of local crime in the county as well as successful completions of supervision.

Progress: The local Sheriff's Department, in cooperation with the local Probation Department has been successful in participating in more home visits as well as probation checks helping to maintain accountability.

Goal: Alternative sentencing options are difficult to find in or near Alpine County. In a county where there is limited opportunity for employment, no treatment centers, and no counseling centers other than the county's Behavioral Health Programs; it is difficult to provide successful alternative sentencing options to our local probationers. When the probation department is successful in finding alternative sentencing programs transportation becomes an issue because of Alpine County's remote location. Programs are available in neighboring counties or over the State line into Nevada. Local programs are greatly needed. Our goal is to seek out and provide successful alternative sentencing options.

Objective: • To give Alpine County more resources.

Measure: • To increase success rates of PRCS, parolees and grants of probation.

Progress: Local monitoring has become available through SCRAM this year. That system has increased success rates in Alpine County. The ability to more closely monitor probationers has helped the Probation Department provide alternatives for promoting success.

Goal: With resources sparse, at best, it is difficult for Alpine County to provide successful offender rehabilitation programs. When looking for inpatient treatment centers, probationers must be transported to out of county treatment centers. Alpine County's goal is to provide successful rehabilitation as close to home as possible.

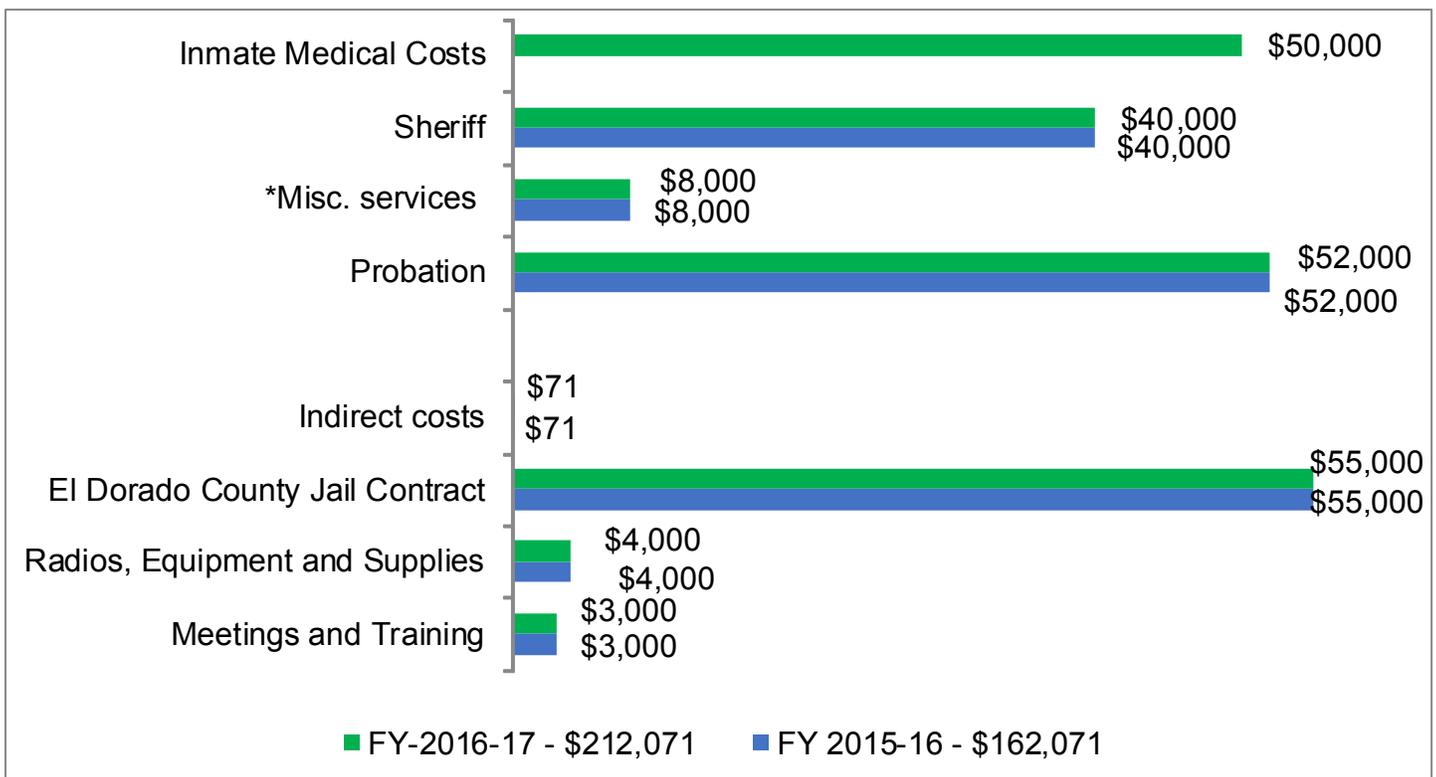
Objective: • Additional treatment programs.

Measure: • Increased success in the area of rehabilitation.

Progress: The Alpine County Probation Department has been working more closely with Alpine County Behavioral Health providing new programs, classes and group meetings which have impacted rehabilitation success in a positive manner.

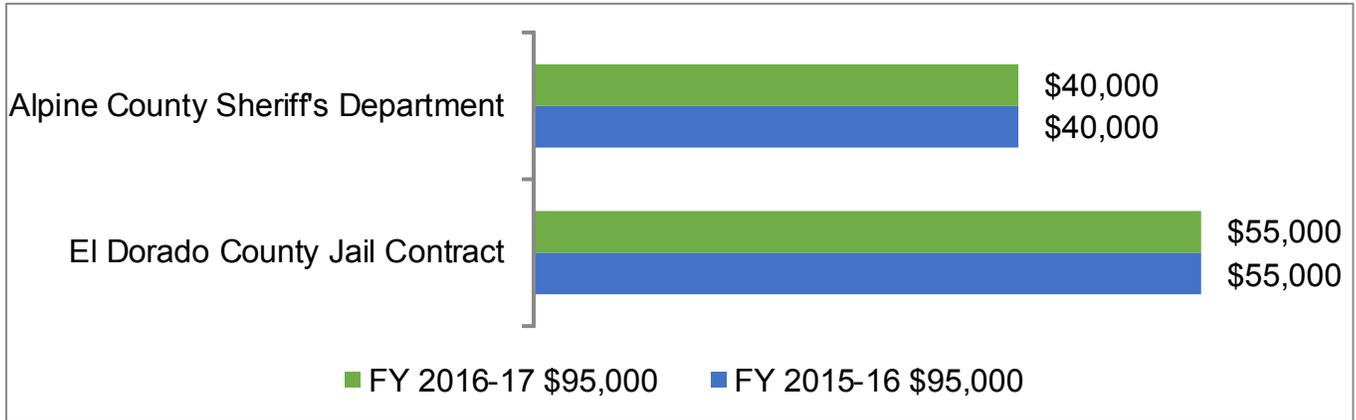
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



* May increase due to in-custody services.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



Alpine County has no Jail or detention center. El Dorado County Jail is concentrated on a daily bed charge for inmates held there for incarceration of any kind.

Alpine County Sheriff's Deputy position to increase enforcement activities and local control by the Sheriff's Department.

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The effectiveness of the programs are evaluated within the county through local agencies.

Does the county consider evaluation results when funding programs and/or services?

Yes. When funding is requested through CCP, program evaluations are considered.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. The County uses the BSCC definitions Average daily population, Conviction, Length of stay, Recidivism, and Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

Alpine County has limited resources when offering treatment. Our Behavioral Health Department is the only agency in the county to offer evaluations and outpatient services. These outpatient services include mental health evaluations and treatment as well as substance use disorder and behavioral health programs. When seeking services for DUI programs, inpatient care, including 5150 PC holds our probationers have to travel or be transported to neighboring counties where services can be obtained. This sometimes includes travel to Nevada for programs and treatment.

What challenges does your county face in meeting these programming and service needs?

Alpine County, being the least populated county in the State of California, as well as geographically isolated; the county has no newspaper, (fully equipped) grocery store, bank, hospital or staffed gas station. The County's only school is K-8 and up until last year, high school students were all bussed to Nevada to attend high school. There was an option implemented last year to bus high school students to El Dorado County, California. In Alpine the challenges are vast with probationer's treatment only one of them.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

Community Corrections Partnership Membership
(October 21, 2016)

Mark Bonini
Chief Probation Officer

Rob Klotz
Presiding judge or designee

Chuck Lley
County supervisor or chief administrative officer or designee

Todd Riebe
District Attorney

Randy Shrout
Public Defender

Martin Ryan
Sheriff

Tracy Busby
Chief of Police

Jim Foley
Department of Social Services, Department of Mental Health, Alcohol and Substance Abuse Programs

Vacant
Department of Employment

Vacant
Office of Education

Vacant
Community-based organization

Vacant
Victims' interests

The CCP meets monthly

Amador County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Eliminate barriers to employment and build employment competencies utilizing the Workforce Assistance Placement Program (WAPP).

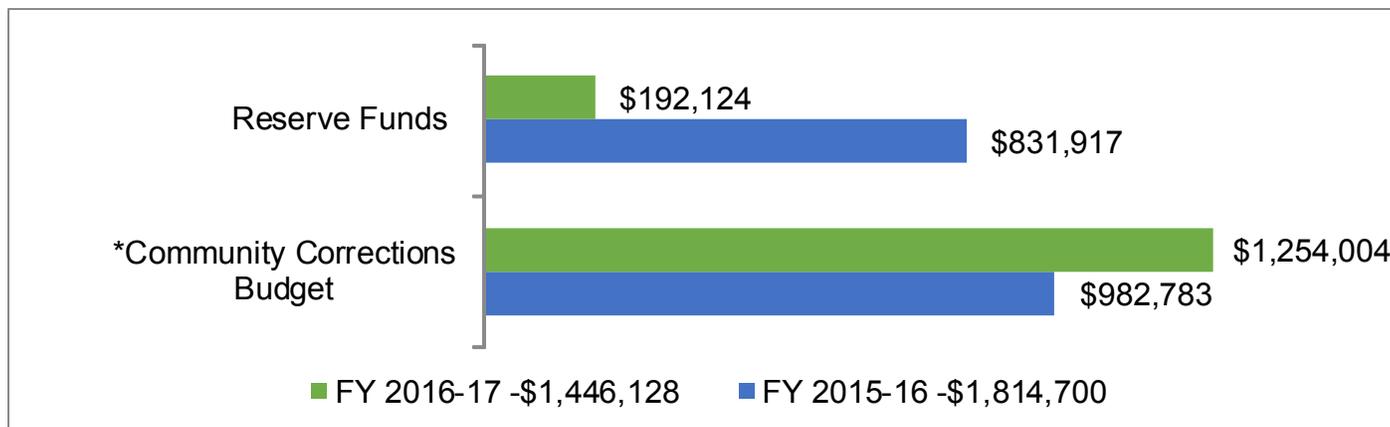
- Objective:**
- Offer on-the-job training through Amador County Public Works Department.
 - Offer assistance with job search activities.
 - Eliminate barriers to employment; such as, transportation, purchasing work boots, outerwear, jeans, and shirts.

- Measure:**
- Eligible offenders will receive on-the-job training teaching them transferrable skills to become gainfully employed.
 - Eligible offenders will learn and receive assistance to actively search for employment; such as, creating resume, interviewing skills, and appropriate attire.

Progress: Offenders graduating from the program will learn the employment competencies and job searching skills to become gainfully employed.

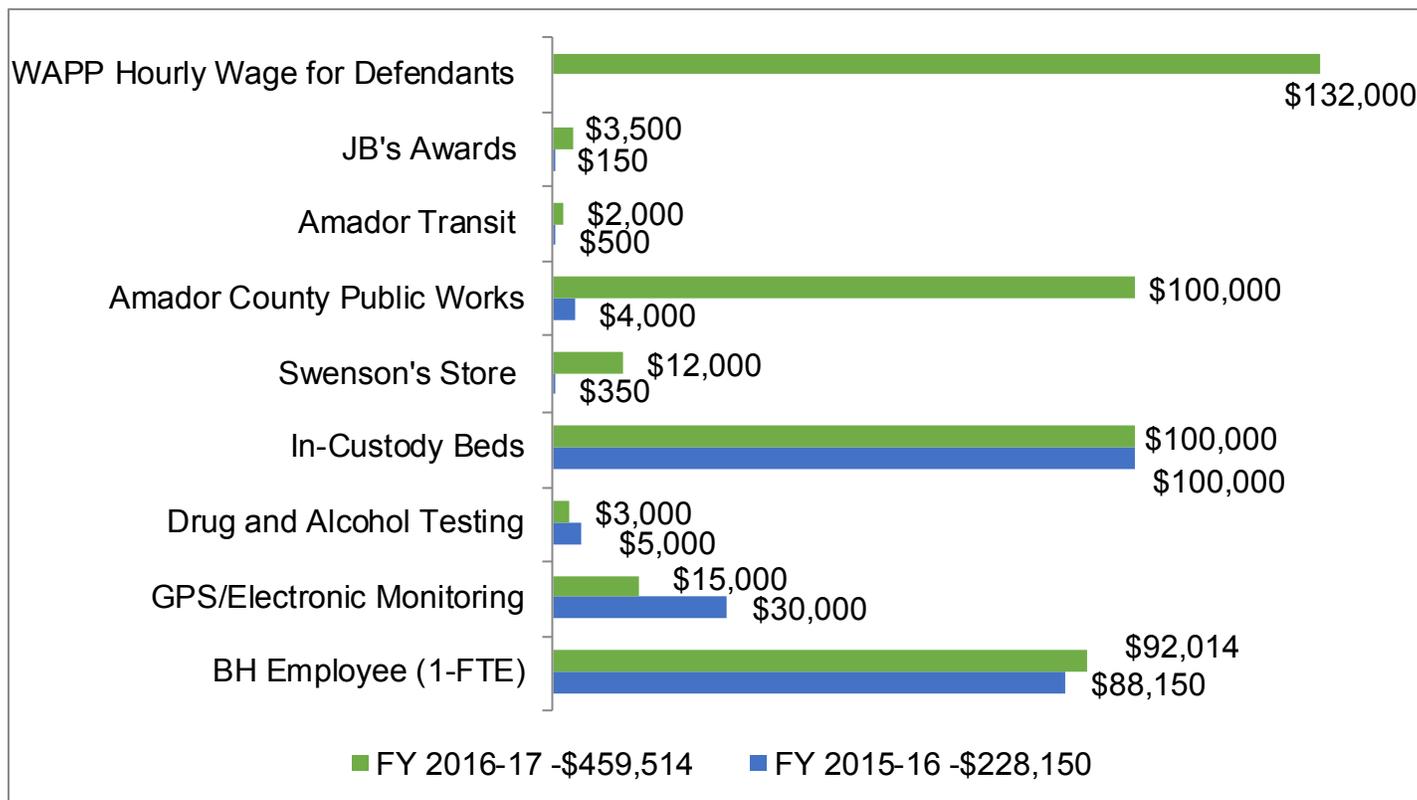
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



*Expenditures for the agencies are placed under one budget and trust account.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- FY 2015-16: Sober Living Environment \$10,000
- The allocation to public agencies for FY 2016-17 are not determined.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The various agencies keep the agreed upon data and provide said data to the CCP.

Does the county consider evaluation results when funding programs and/or services?

Yes. The CCP considers that data if/when funding is requested.

Does the county use BSCC definitions when collecting data? If so, which?

No. BSCC Definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

Moral Reconciliation Therapy™, Thinking for a Change (T4C) and the Matrix Alcohol and Drug programming are all provided to offenders if/when needed/warranted.

What challenges does your county face in meeting these programming and service needs?

Service providers (CBOs) are needed. Providing the programming outlined in question (see prior response) needs to be done in a custodial setting. However, due to the age of the current jail (limited to no programming space), this is not possible.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The CCP has started the Workforce Assistance Placement Program (WAPP) with the intent of removing barriers to employment. Key program components include:

- WAPP participants, if they complete the program, will become employable ready as an entry level Public Works worker.
- The length of the program is 90 days. WAPP case managers (officers, Mother Lode Job Training and Public Works lead workers) will have the ability to keep participants an additional 30-90 days.
- The maximum length of the program is 6 months per participant.
- Participants will be assessed by the Public Works Team Leader every 30 days. Those assessments can/will be shared with the WAPP case managers.
- Upon successful completion and concurrence of the case managers, participants can earn work boots, pants and outer clothing as a reward thus further enhancing participant's future employability.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Steven K. Bordin
Chief Probation Officer

Judge Robert Glusman
Presiding judge or
designee

Paul Hahn
County supervisor or
chief administrative
officer or designee

Mike Ramsey
District Attorney

Ron Reed
Public Defender

Kory Honea
Sheriff

Michael O'Brien
Chief of Police

Cathi Grams
Department of Social
Services and
Department of
Employment

Dorian Kittrell
Department of Mental
Health and Alcohol and
Substance Abuse
Programs

Tim Taylor
Office of Education

Erna Friedeberg
Community-based
organization

Monica O'Neil
Victims' interests

The CCP meets
bi-monthly

Butte County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide effective supervision and programming to Post-Release Community Supervision (PRCS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism.

- Objective:**
- 100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals.
 - 100% of participants will be supervised according to their needs and risk.

- Measure:**
- Number of offenders released into the community.
 - Number of offenders completing their period of supervision.
 - Number of offenders sustaining subsequent arrests and/or convictions.

Progress: As of December 1, 2016, 360 PRCS Offenders were on supervision in Butte County, with 24.4% in warrant status. In FY 15/16, 207 PRCS Offenders were released onto supervision. During that same period, 98 PRCS Offenders were successfully discharged from supervision.

Six month Felony Recidivism Rate for the PRCS Population was 4.9% (based on 1,122 PRCS Offenders who began supervision between 10/1/11 and 12/31/15, who were convicted in Butte County of a felony within 6 months of beginning supervision). This rate decreased .6% over last year.

12-Month Felony Recidivism Rate for the PRCS Population was 12.1% (based on 1,027 PRCS Offenders who began supervision between 10/1/11 and 6/30/15, who were convicted in Butte County of a felony within 12 months of beginning supervision). This rate decreased 1.9% over last year.

Goal: Provide effective supervision and programming to Mandatory Supervision (MS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism .

Objective:

- 100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals.
- 100% of participants will be supervised according to their needs and risk.

Measure:

- Number of offenders released into the community.
- Number of offenders completing their period of supervision.
- Number of offenders sustaining subsequent arrests and/or convictions.

Progress: As of December 1, 2016, 136 Mandatory Supervision (MS) Offenders on supervision in Butte County, with 20.6% in warrant status. In FY 15/16, 95 MS Offenders were released onto supervision. During that same period, 27 MS Offenders were successfully discharged from supervision.

6 Month Felony Recidivism Rate for the MS Population was 3.9% (based on 206 MS Offenders who began supervision between 10/1/11 and 12/31/15, who were convicted in Butte County of a felony within 6 months of beginning supervision). This rate decreased 1.7% over last year.

12 Month Felony Recidivism Rate for the MS Population was 12.1% (based on 140 MS Offenders who began supervision between 10/1/11 and 6/30/15, who were convicted in Butte County of a felony within 12 months of beginning supervision). This rate decreased 1.8% over last year.

Goal: Provide effective supervision and programming to Alternative Custody Supervision (ACS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism.

Objective:

- 100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals.
- 100% of participants will be supervised according to their needs and risk.

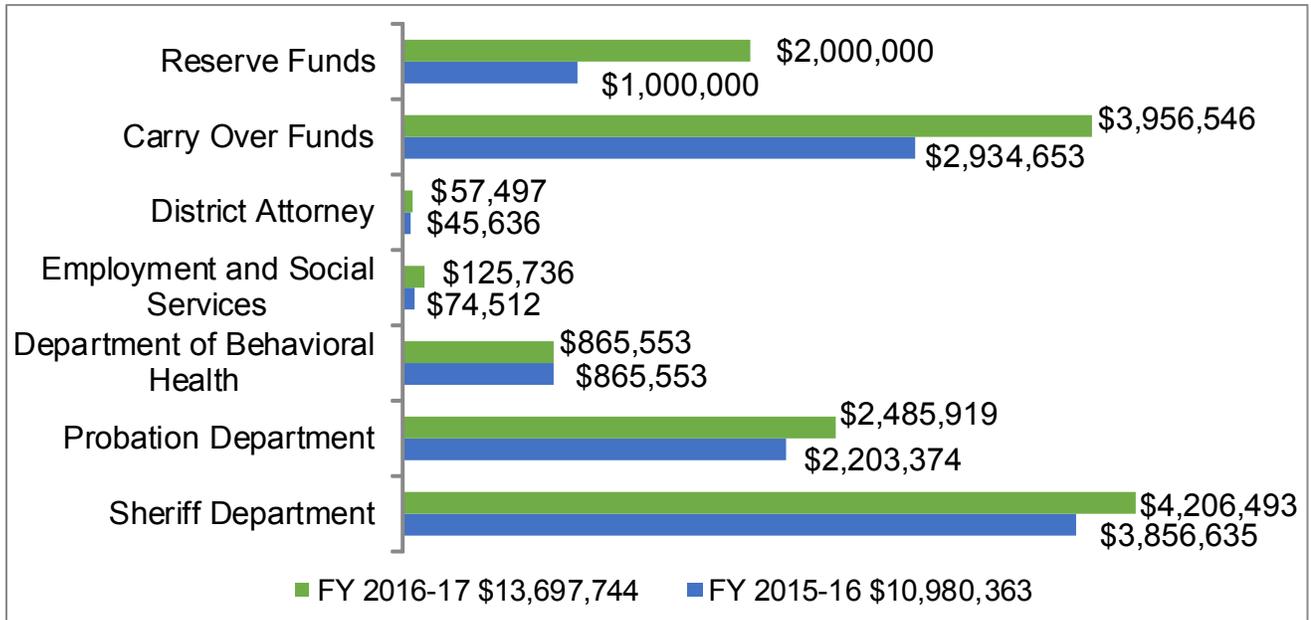
Measure:

- Number of offenders released into the community.
- Number of offenders completing their period of supervision.
- Number of offenders sustaining subsequent arrests and/or convictions.

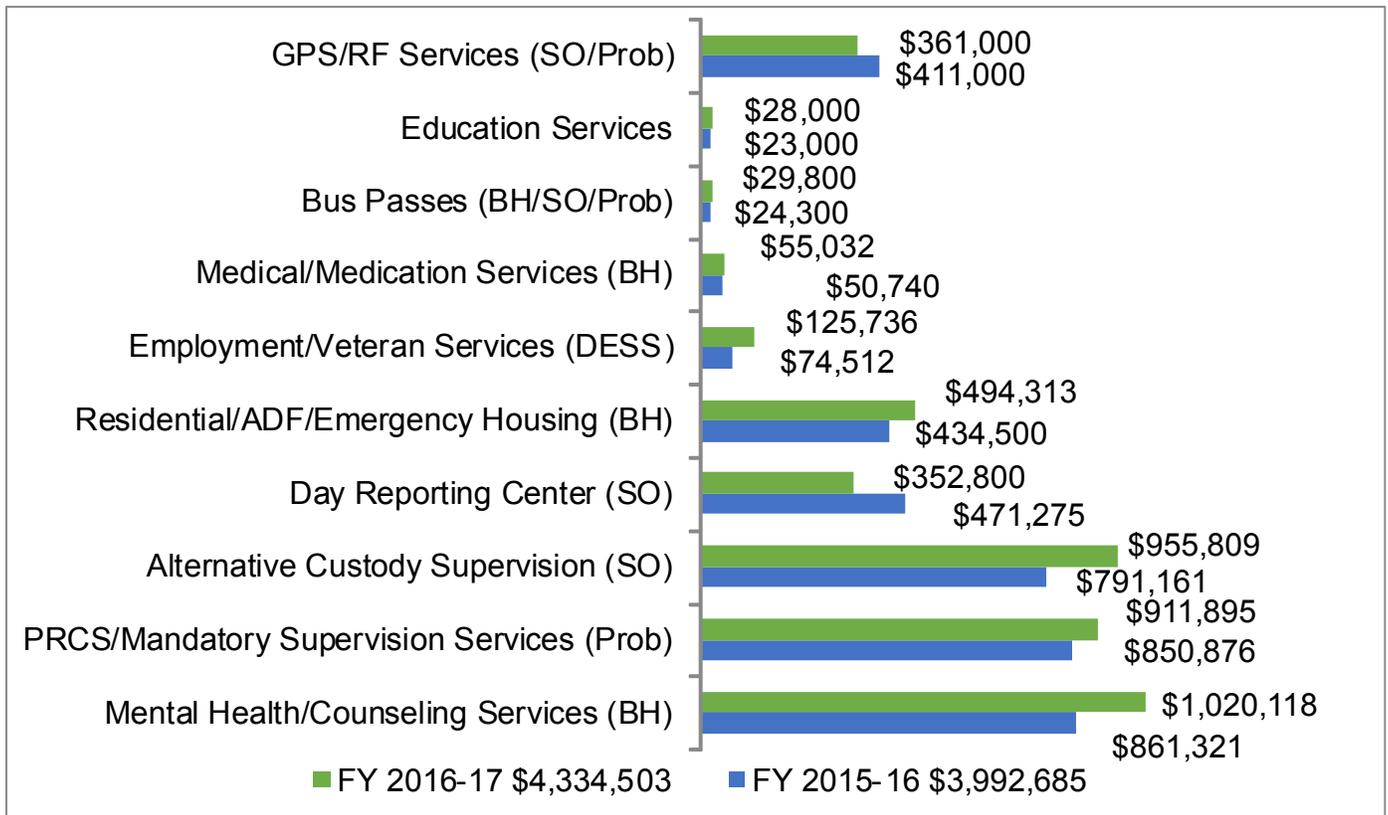
Progress: As of December 1, 2016, 72 Alternative Custody Supervision (ACS) Offenders on supervision in Butte County. In FY 15/16, 184 ACS Offenders were released onto supervision. During that same period, 104 ACS offenders were successfully discharged from supervision. Between 10/1/11 and 12/1/16, 127 ACS offenders were rearrested (including escapes) while in the program.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- Butte County does not directly allocate funding to non-public agencies for programs and services. However, once funds are allocated to the public agencies, services are subcontracted out to non-public agencies to provide programs to the realignment population. For example, Residential Substance Abuse treatment, Sober Living Housing, Day Reporting Center Services, etc.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Effectiveness of programs is evaluated by the departments providing the services (example; Recidivism rates). Chico State University has also done a study on the impacts of AB 109 in Butte County.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

No, BSCC definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

We would like to better understand your 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?

Assessment services, alternative supervision services, Post-Release Community and Mandatory Supervision services, GPS/EMP services, mental health/psychiatric assessment and counseling services, drug and alcohol assessment and counseling services, residential drug and alcohol services, wrap around services, Cognitive Behavioral Therapy services, employment/veteran and case management services, public assistance services, medical/medication services, housing services, education services, Day Reporting Center services, Community Outreach Center services, drug testing services, transportation services, clothing and food services, victim witness services, and community clean-up services.

What challenges does your county face in meeting these programming and service needs?

The Butte County CCP has continued offering outstanding service and program delivery with the funding provided in our allocation. However, additional funding is always needed to expand service delivery options (extending housing, treatment etc.).

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Within the last year, the Probation Department entered into a contract with the California Department of Corrections and Rehabilitation to run a reentry program (inmates are released from State Prison 4-6 months early and placed into the community to receive intensive services before their release onto Post Release Community Supervision (PRCS) or Parole). Early indicators are showing positive outcomes for our PRCS population that received these services.

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Community Corrections Partnership Membership
(October 21, 2016)

Samuel Leach
Chief Probation Officer

Timothy Healy
Presiding judge or designee

Shirley Ryan
County supervisor or chief administrative officer or designee

Barbara Yook
District Attorney

Scott Gross
Public Defender

Rick DiBasilio
Sheriff

Todd Fordahl
Chief of Police

John Lawless
Department of Social Services, Department of Employment, Department of Mental Health, Alcohol and Substance Abuse Programs

Kathy Northington
Office of Education

Vacant
Community-based organization

Kelli Coane
Victims' interests

The CCP meets bi-monthly

Calaveras County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Program Evaluation.

Objective: • The CCP will evaluate the impact of evidence-based programming on re-arrest rates and risk of recidivism.

Measure: • Impacts of evidence-based programming on re-arrest rates and risks of recidivism.

Progress: The evidence-based programming successful completion rate has increased to over fifty percent. Only 18% of those who successfully complete programming were re-arrested within 1 year of program completion.

Goal: Continue to implement and improve evidence-based programming.

Objective: • The DRC and the Jail Re-entry program will become fully staffed during the 2015-2016 fiscal year. The CCP will focus on training, program fidelity, and comprehensive delivery of services.

Measure: • Staffing levels should reach 100% prior to June 30, 2016 and staff should receive evidence-based programming training.

Progress: The DRC and Jail Re-entry program were fully staffed by the deadline.

Goal: Coordinate services for victims.

Objective: • The District Attorney's Office, in coordination with the CCP, will hire a Program Coordinator for victim services. This position will assist with restorative justice efforts to increase offender accountability and make victims whole again.

Measure: • Successful recruitment for the Program Coordinator position and a functional restorative justice program by June 30, 2016.

Progress: Recruitment for the Program Coordinator position was successful and development of the restorative justice program is continuing as a goal for the 2016-2017 fiscal year.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Develop Work Program.

- Objective:**
- Increase participation of County Jail inmates in the Work Program.
 - Increase participation of supervised individuals at the Day Reporting Center in the Work Program.
 - Identify potential revenue sources.

- Measure:**
- Number of inmates participating in the Work Program.
 - Number of Day Reporting Center individuals participating in the Work Program.
 - Maximum theoretical program revenue.

Progress: Inmates are currently participating in the Work Program.

Goal: Create Restitution Program.

- Objective:**
- Create a program that increases offender restitution payments.

- Measure:**
- Number of restitution programs in place.
 - Amount of annual restitution payments.

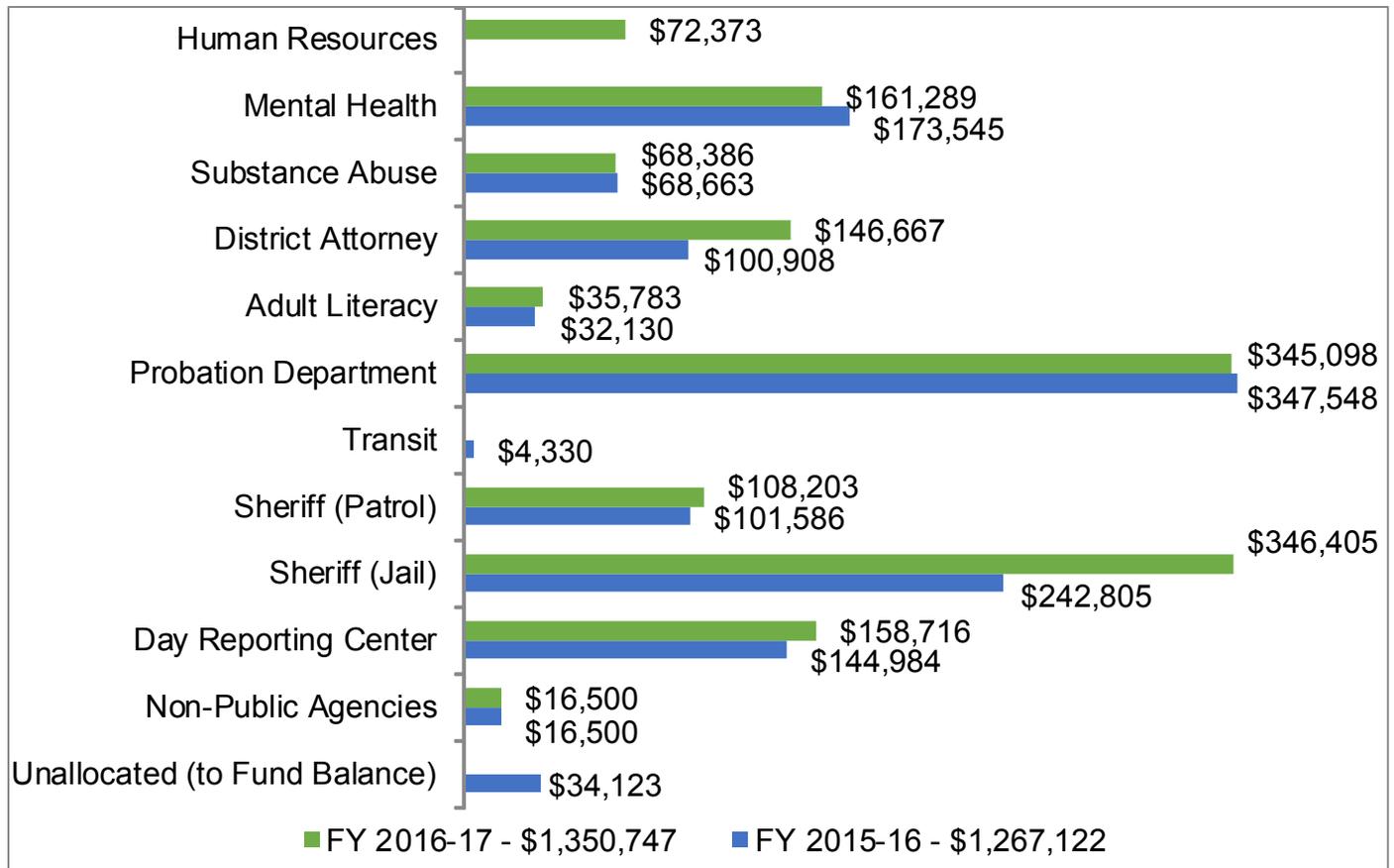
Progress: \$43,000 in restitution payments were made during the 2015-2016 fiscal year.

Goal: Emergency Housing Program.

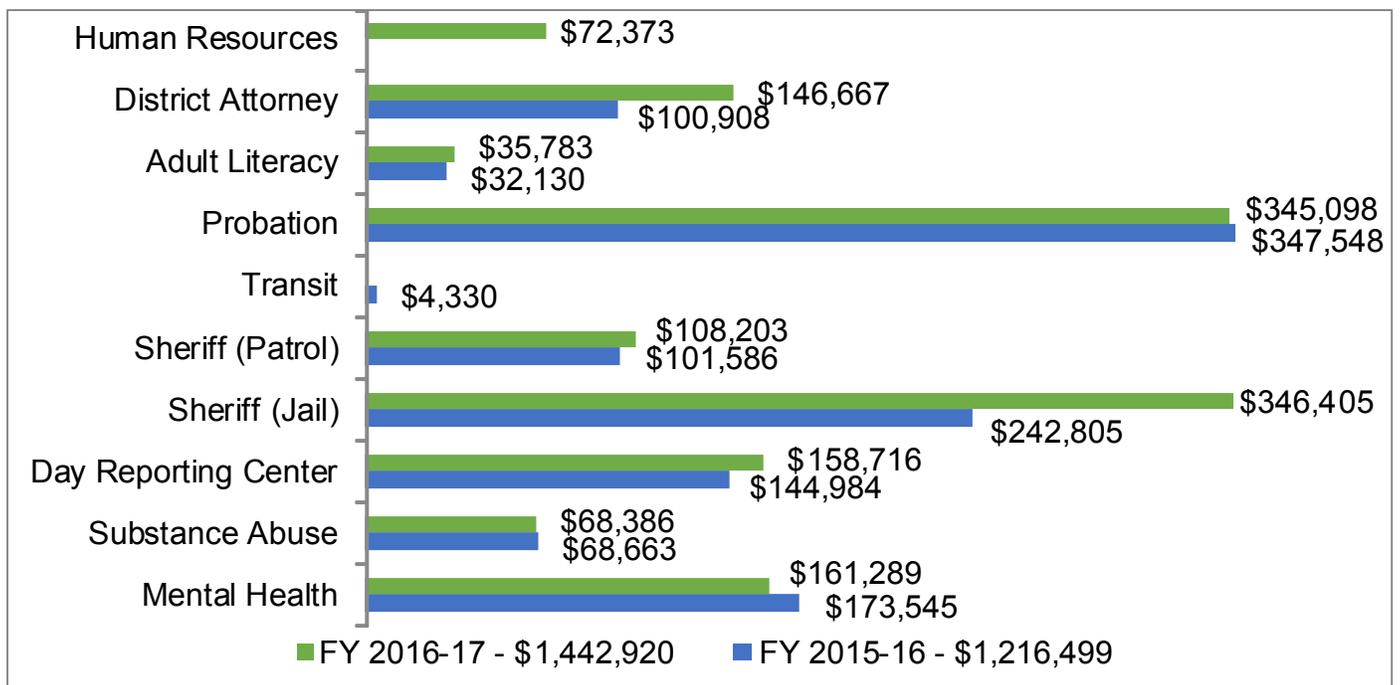
- Objective:**
- Identify solution to lack of emergency housing and transitional housing options in Calaveras County.

- Measure:**
- Number of emergency and transitional housing options in Calaveras County.
-

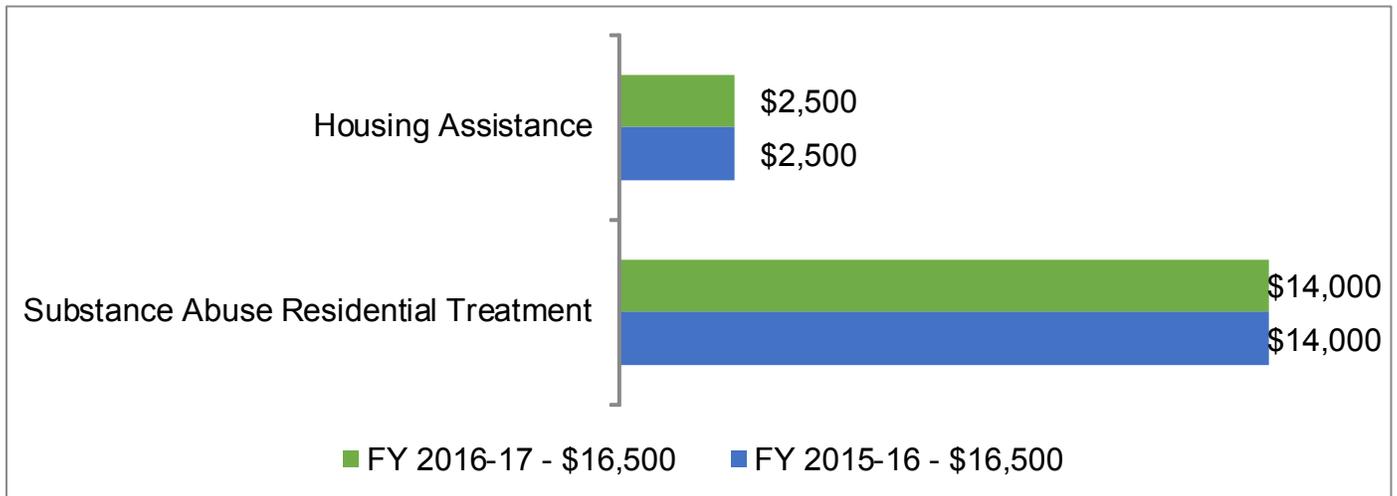
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CCP members are committed to inter-agency data sharing and have an in-house analyst for evaluating program efficacy.

Does the county consider evaluation results when funding programs and/or services?

Yes. The county did not provided an answer to the “how” portion of the question.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

The CCP has an in-house clinician and substance abuse counselor at the Day Reporting Center and a clinician in the jail providing therapy to incarcerated individuals. Additionally, Calaveras County has joined the Stepping Up initiative to address the number of people with mental illness in jail.

What challenges does your county face in meeting these programming and service needs?

The county declined to respond to this question.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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**Community Corrections
Partnership Membership**
(October 21, 2016)

Colusa County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

William E. Fenton
Chief Probation Officer

Jason Galkin
Presiding judge or
designee

Wendy G. Tyler
County supervisor or
chief administrative
officer or designee

John R. Payner
District Attorney

Albert Smith
Public Defender

Joe Garofalo
Sheriff

Josh Fitch
Chief of Police

Elizabeth A. Kelly
Department of Social
Services

Cindy Lovelace
Department of
Employment

Terence Rooney
Department of Mental
Health and Alcohol and
Substance Abuse
Programs

Michael P. West
Office of Education

Lora Ceccon
Community-based
organization

Mary Godinez-York
Victims' interests

The CCP meets quarterly

Goal: Continue utilization of Moral Reconciliation Treatment (MRT) (Cognitive intervention around criminal thinking) in-custody and at the Day Reporting Center (DRC).

- Objective:**
- Enroll all eligible AB 109 probationers into MRT within the first month they are out-of-custody, thereby reducing recidivism by 40%.
 - Assist all AB 109 probationers who require assistance (i.e., bus passes, etc.), and offer a variety of classes scheduled on various days and times to achieve 100% attendance.
 - Achieve 80% graduation rate for all enrolled MRT participants.

- Measure:**
- 100% of all eligible probationers (36) were enrolled in MRT in FY 2015-16, 9 graduated the program. 38% of the enrolled eligible probationers in MRT were enrolled in Thinking for Good in the same time period with 11 graduating. An additional 14 probationers were enrolled in Staying Quit (optional). 92% of the MRT and 100% of the Think for Good (T4G) clients had no new convictions based on the BSCC definition of recidivism.
 - An enhanced incentive program, and varied class schedules, including evenings, resulted in an 85% probationer attendance rate for both MRT & T4G classes.
 - Of the 36 probationers enrolled in MRT, 9 graduated, and 24 continued attending MRT and/or T4G without a new conviction. 100% of the 56 eligible (some carry-overs from FY 2014-15) probationers enrolled in T4G did not have a new conviction.

Goal: Provide In-custody (jail) and out of custody Day Reporting Center (DRC) Behavioral/Mental Health services to all of the AB 109 clients in Colusa County.

- Objective:**
- All AB 109 clients will be assessed by a Behavioral/Mental Health professional and provided with appropriate services.
 - Provide assessed and documented Behavioral/Mental Health services to those clients who require individual and/or group counseling, medication management, Substance Abuse Program, etc.

- Measure:**
- 36 new and 84 carry-over clients or 100% were seen and assessed by a Behavioral/Mental Health Therapist for appropriate needs and services at the jail and/or DRC.
 - The 120 clients assessed received 512 Behavioral/Mental Health follow-up contacts were at the jail and DRC and appropriate services provided based on each individuals assessment.
-

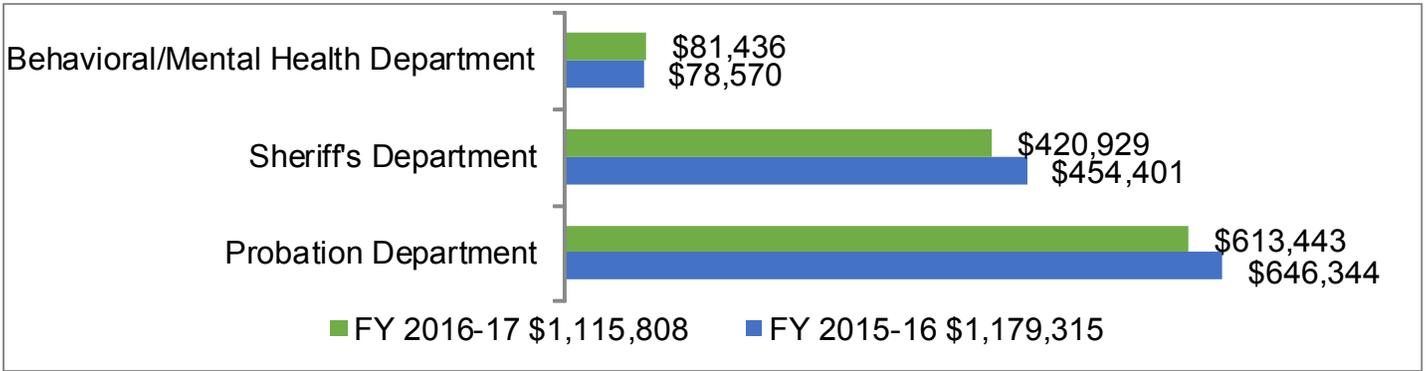
Goal: Refer and provide employment assistance, and education programs to all AB 109 clients In-custody (jail) or at the Day Reporting Center (DRC).

- Objective:**
- Provide online GED courses to all eligible clients.
 - Assist all eligible clients in the completion of resumes, how to answer interview questions, and referrals to available jobs.

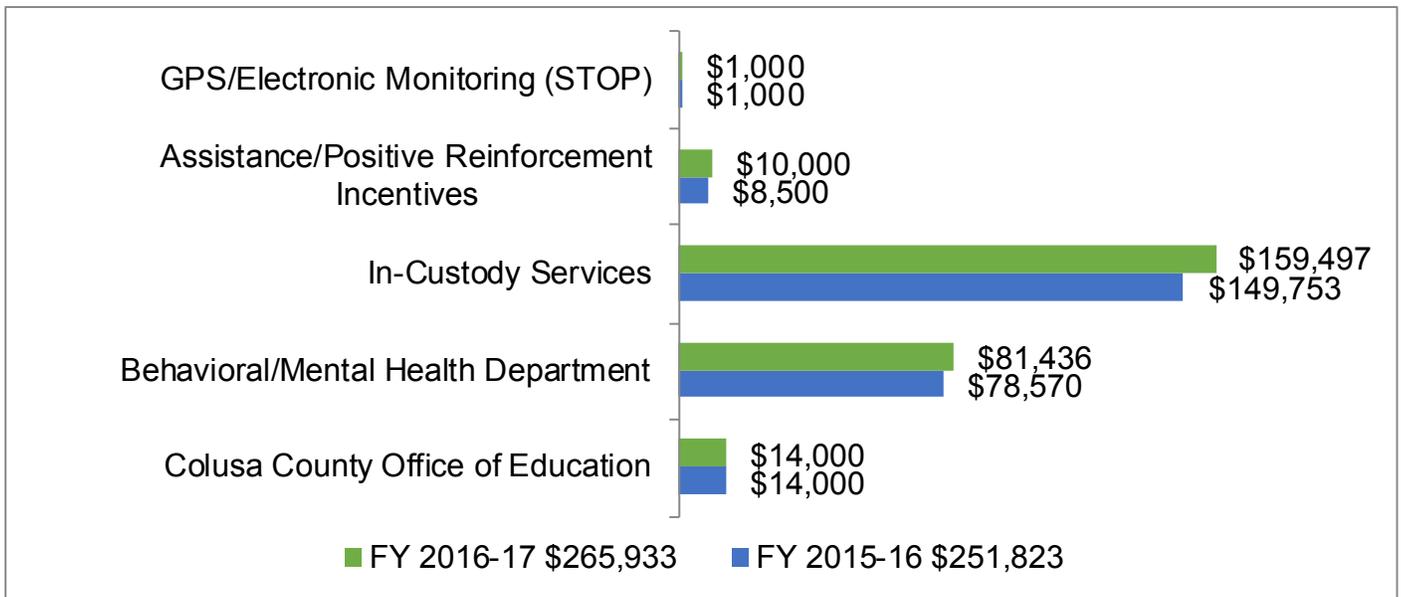
- Measure:**
- 103 probationers (10 new and 93 carry-over) were provided with educational programming at the jail and DRC through the Colusa County Office of Education. 31 of those clients received HiSET courses in FY 2015-16. No clients successfully completed their HiSET degree, however 15 continue to work on receiving their HiSET degree.
 - 44 of the 83 clients receiving assistance in completing their job resumes and who were actively searching for employment found jobs. This represents a 108% increase over FY 2014-15 when 20 clients received assistance in finding and obtaining jobs.
-

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

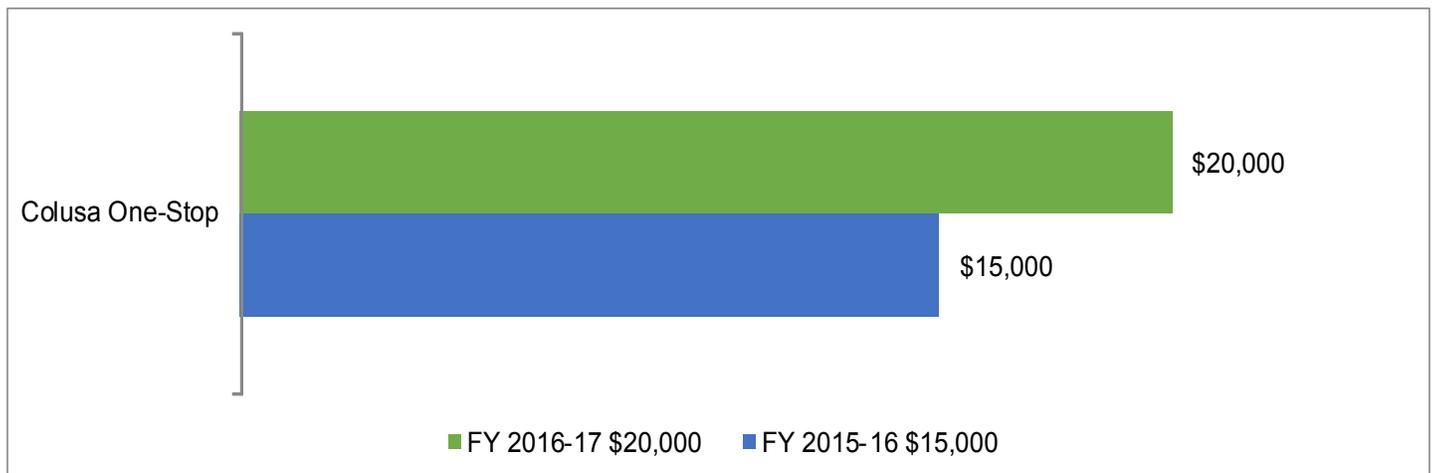
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CCP and Probation Department internally evaluate the effectiveness of the programs and/or services provided and funded by the county's Public Safety Realignment allocation on a quarterly basis.

Does the county consider evaluation results when funding programs and/or services?

Yes. The Probation Department evaluates results of funded programs and/or services then the CCP and subsequently County Board of Supervisors approves or disapproves the recommended programs and services based on quarterly internal evaluation outcomes of every program offered based on the previous year's outcomes (What Works).

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, and Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

We would like to better understand your 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?

Behavioral/Mental Health treatment programs are limited in Colusa County and only available through the County Behavioral Health Department at the jail, DRC and/or at the Behavioral/Mental Health Department.

What challenges does your county face in meeting these programming and service needs?

Lack of appropriate and specific CBO's; lack of Behavioral/Mental Health services for clients who are not eligible for Medical; lack of phone accessibility and public transportation in various areas throughout the County for this clientele population.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Implementation and expansion of the Day Reporting Center services in conjunction with HSS, Behavioral Health, Sheriff, DA, PD, Court, and Colusa County Office of Education partnerships thereby providing appropriate offender services for these probationers (i.e. Cognitive interventions, education, substance abuse, Mental/Behavioral Health, employment assistance, financial assistance, etc.). These collaborations have resulted in a 60% success rate for mandatory supervision clients and a 65% success rate for PRCS clients over the past three years based on the BSCC definition of recidivism. Assist all eligible clients in the completion of resumes, how to answer interview questions, and referrals to available jobs.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

MRT for all eligible clients resulted in a 92% success rate and Thinking for Good for those clients who are not able to work at the MRT level resulted in a 100% success rate based on BSCC definition of recidivism for both programs.

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Community Corrections Partnership Membership
(October 21, 2016)

Todd Billeci
Chief Probation Officer

Steven Nash
Presiding judge or designee

David J. Twa
County supervisor or chief administrative officer or designee

Mark A. Peterson
District Attorney

Robin Lipetzky
Public Defender

David O. Livingston
Sheriff

Allan Cantando
Chief of Police

Kathy Gallagher
Department of Social Services

Vacant
Department of Employment

Cynthia Belon
Department of Mental Health

Fatima Matal Sol
Alcohol and Substance Abuse Programs

Karen Sakata
Office of Education

Roosevelt Terry
Community-based organization

Deborah Levine
Victims' interests

The CCP meets bi-monthly

Contra Costa County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Pretrial Program: Following arrest, better identify persons who can safely be released and those who should be held in physical custody pretrial.

Objective: • Fund a comprehensive pretrial services program that uses an evidence-based assessment tool.

Progress: Implementation of the County's Pretrial Services (PTS) pilot program began in March 2014, with a County workgroup working with the Crime and Justice Institute of Community Resources for Justice (CRJ) for program technical assistance and training. The Virginia Pretrial Risk Assessment Instrument (VPRAI) was selected as the PTS risk assessment tool. CRJ was provided data to determine how well the VPRAI, and the information it considers, predicts both a person's failure to appear for court and their likelihood to be arrested for new criminal activity.

Goal: Establish and Maintain an Entry Point to an Integrated Reentry System of Care Pre-Release.

Objective: • Establish a formal pre-release assessment and planning process to ensure more successful reentry.
• Prior to release, establish a plan to connect the individual with transitional services that foster social networks and attitudes.

Progress: The County initiated the development of a Pre-Release Planning Pilot program, approved by the CCP in May 2016. AB 109 funds have been used since 2014 to support jail-to-community services, including documentation/ID retrieval.

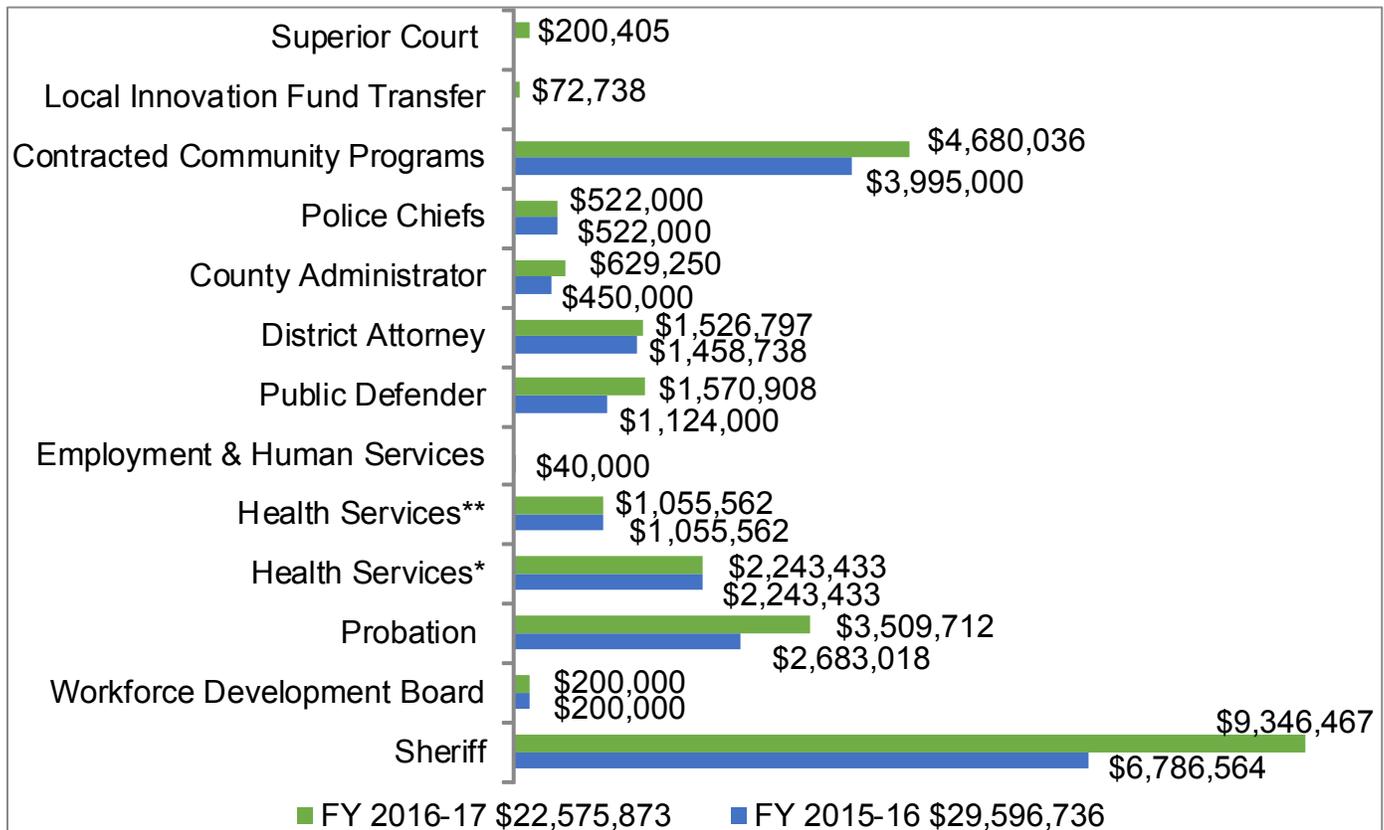
Goal: Reentry: Assist in providing access to a full continuum of reentry and reintegration services.

- Objective:**
- Support planning and implementation of an integrated system of services that may include co-located, site-based resources and services.
 - Improve access to, and effectiveness of, employment support and placement services for the reentry population.

Progress: The County opened the Reentry Success Center in the west region of the County in Oct. 2015 to provide the formerly incarcerated and their families access to a set of co-located reentry services. The Reentry Network System of Services was made operational in the Central and East regions of the County to provide access to a coordinated set of reentry services. The County also leveraged the award of AB 2060 funds to the Workforce Development Board into a SOARS program that not only increased access to employment resources for the supervised populations of the County but also seeks to inform and educate potential employers to develop job placement opportunities for the reentry population. The County teamed with the Superior Court on a Clean Slate day initiative to hold a weekend court session where local residents were not only able to achieve dismissals of past convictions but also have a variety of traffic issues addressed for the purpose of lifting existing holds on driver's licenses.

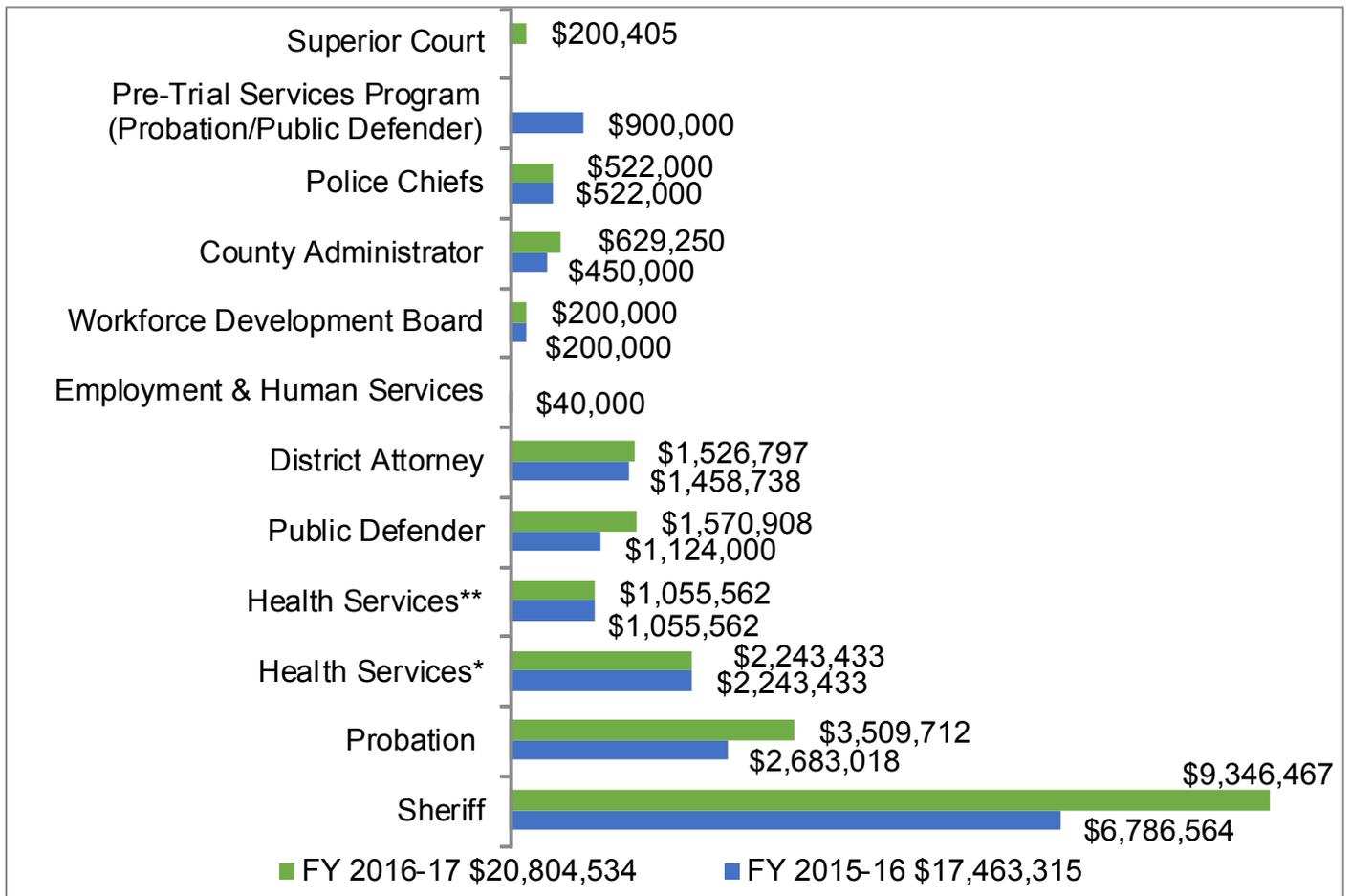
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



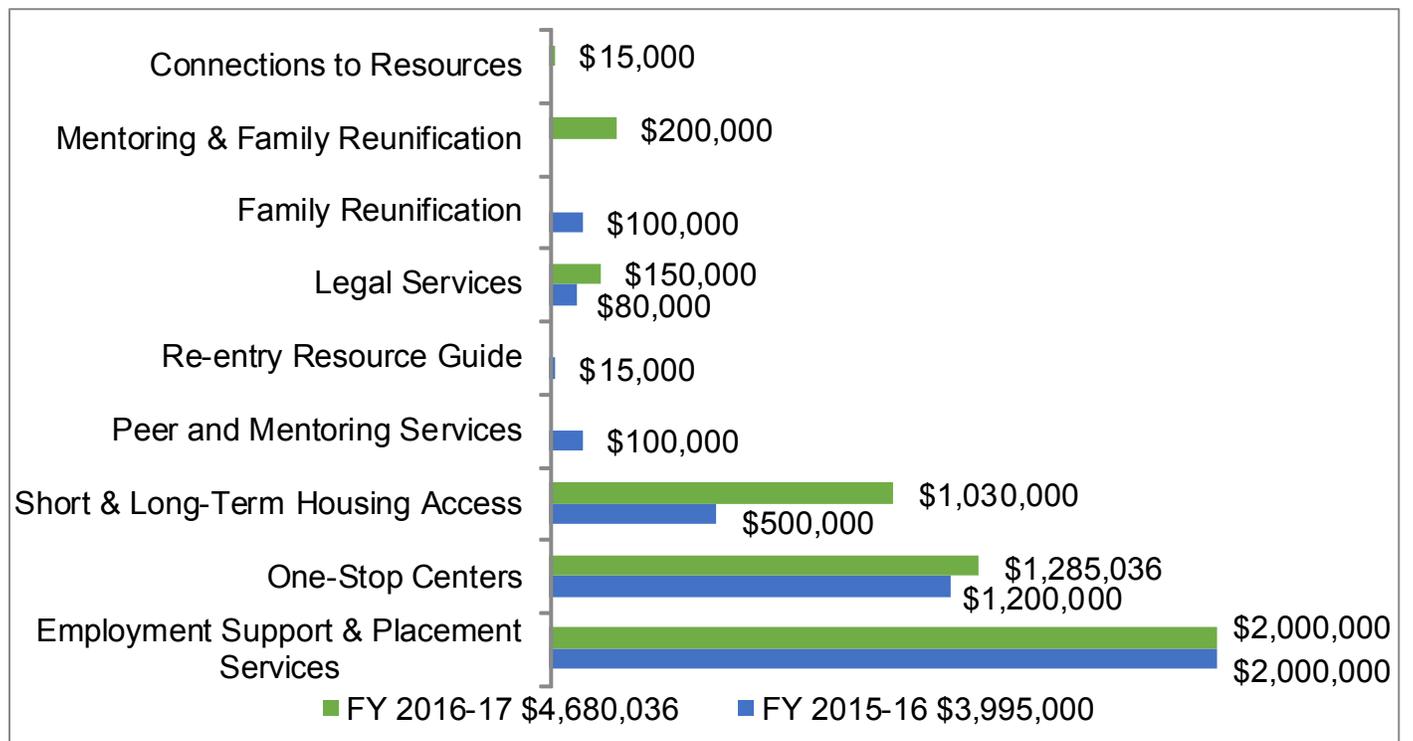
FY 2016-17 - Reserve Funds for On-going Programs and Services (\$1,181,435), Reserve Funds for Capital Projects (\$1,800,000), * Behavioral Health Division, ** Detention Health Division

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



* Behavioral Health Division, ** Detention Health Division

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CAO's office contracted with Resource Development Associates (RDA) to provide data collection and program evaluation services from Dec. 2013 through June 2016. RDA provided evaluations of County and community based organizations' services to the AB 109 population; developed 4 data dashboards; conducted a preliminary recidivism analysis; and developed Quarterly Summary reports for all AB 109 funded agencies.

Does the county consider evaluation results when funding programs and/or services?

Yes. The CCP are provided the AB 109 Annual Report, evaluation reports, and Quarterly Summary reports in advance of their Budget discussions.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

For individuals with SUDs, the County currently offers individual counseling by a treatment specialist, along with outpatient and inpatient treatment services. For those leaving inpatient programs, there is also access to a short term transitional recovery residence. Presently, we offer medication assisted treatment services with individual and group counseling to individuals with psychiatric conditions. This team also works to connect individuals to a primary care provider. Other services we offer to this population include homeless services and housing placement assistance, vocational development and placement programs, civil legal services, peer mentoring, resource navigation, and family reunification.

What challenges does your county face in meeting these programming and service needs?

We need to add intensive outpatient support for substance use treatment services with connections to Sober Living Environments (SLE)s. We are still only able to get about half of our AB 109 population to volunteer for the provided services. Many assert they don't need help, even when the evidence suggest otherwise. The geographic layout of the County also poses a challenge for many to find adequate and reliable transportation to needed services.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We have moved from funding master-leased transitional housing to recovery-centered housing with supervision. We have also expanded the eligible population for the AB 109 funded reentry services utilizing a prioritization process. And we have consolidated our administrative functions into a new Office of Reentry and Justice, a pilot program of the County Administrator.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We have developed a small automotive repair training program provided by a local small business that trains up to 10 participants on domestic car repair. Students often work on their own vehicles that are in need of repair (completed 4 projects), and find employment in the auto industry.

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Community Corrections Partnership Membership
(October 21, 2016)

Lonnie Reyman
Chief Probation Officer

William Follett
Presiding judge or designee

Jay Sarina
County supervisor or chief administrative officer or designee

Dale Trigg
District Attorney

Rebecca Linkous
Public Defender

Erik Apperson
Sheriff

Ivan Minsal
Chief of Police

Heather Snow
Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs

Vacant
Department of Employment

Vacant
Office of Education

Vacant
Community-based organization

Vacant
Victims' interests

The CCP meets quarterly

Del Norte County

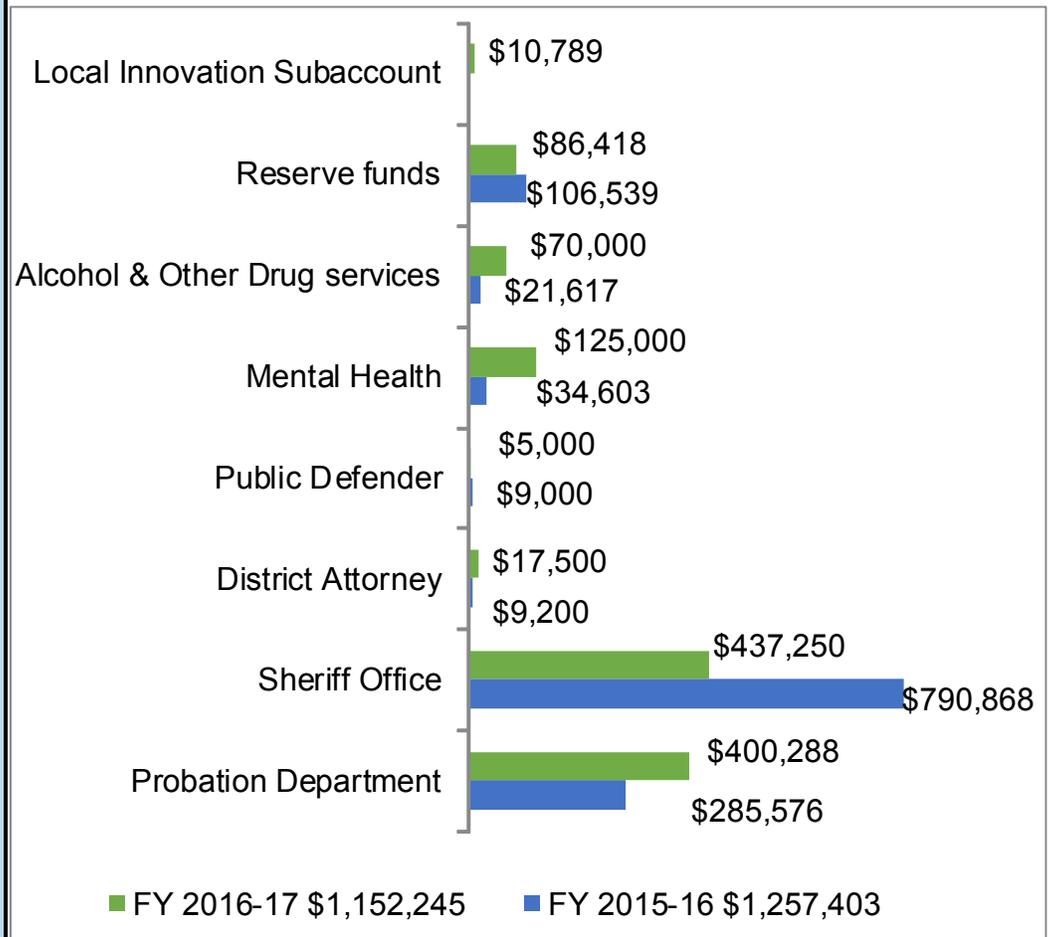
The CCP did not provide goals for FY 2015-16.

Goals, Objectives, Outcome Measures and Progress FY 2016-17

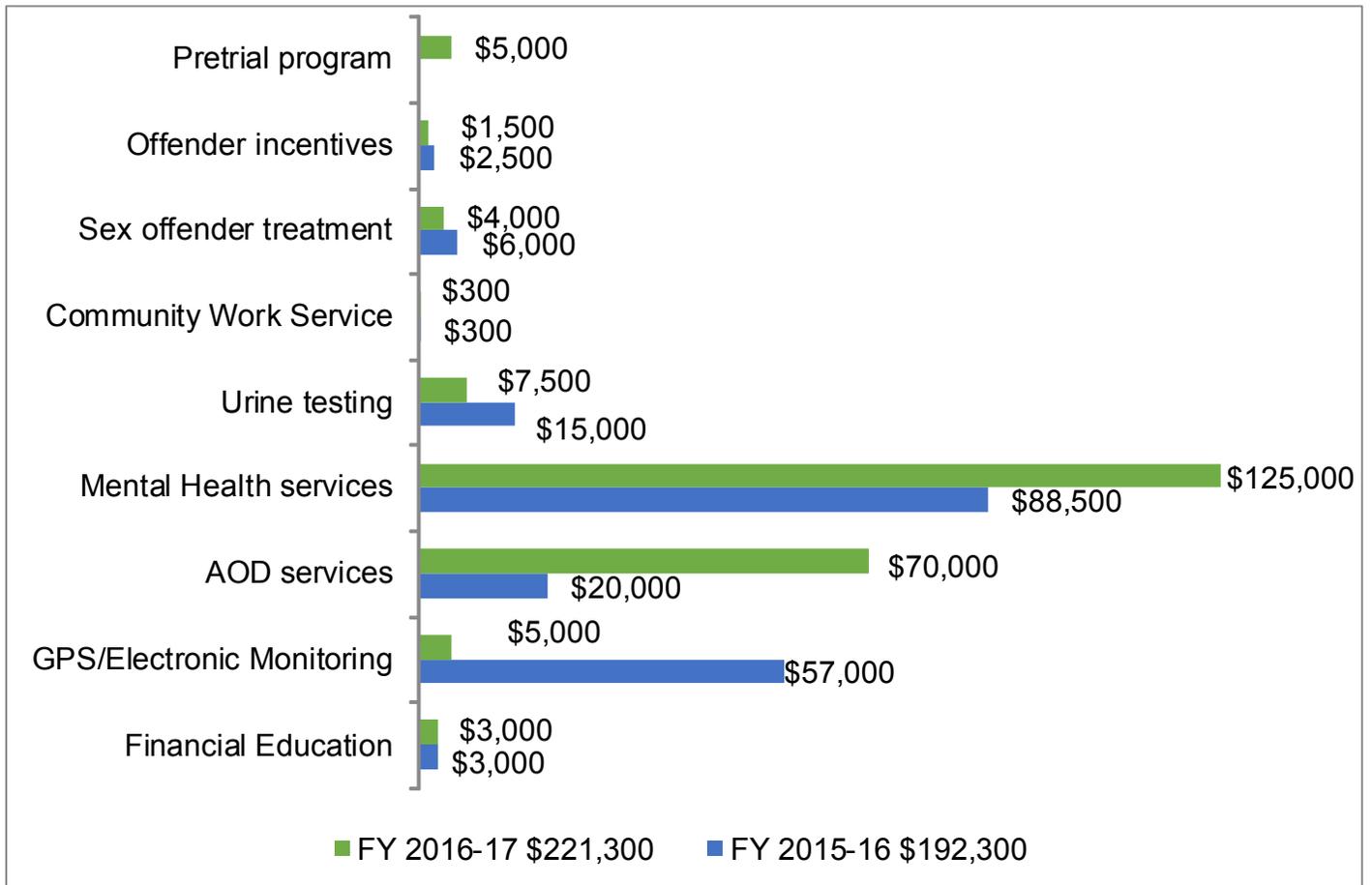
Goal: Identify one or more articulable need/s for local offenders.

Objective: • Adoption of codified goal/s by July 2017.

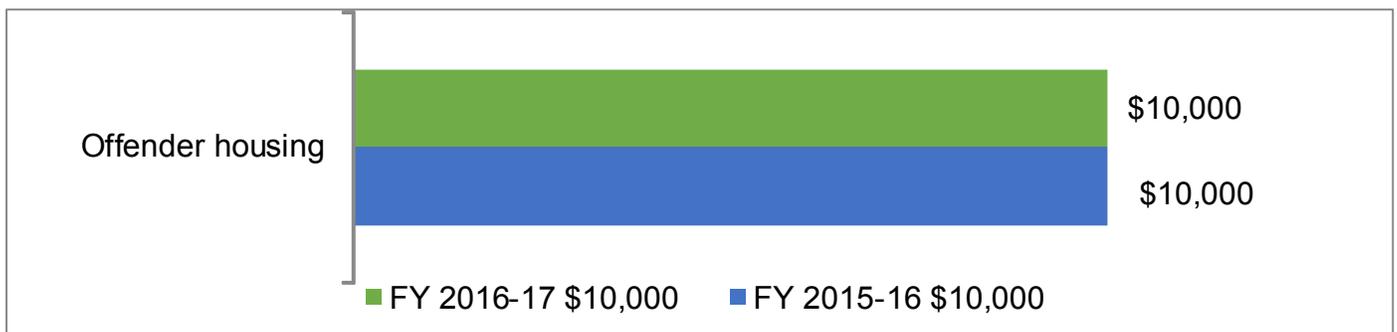
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. At the present time the CCP has not adopted goals, objectives, or outcome measures on a county-wide basis. However agencies are collecting and reporting state-mandated data. A number of these reports, specifically Probation's reports, deal directly with the impacts of SB 678 and AB 109. In addition, as limited resources allow, data has been captured during the last calendar year relating to programming such as MRT, financial education, etc.

Does the county consider evaluation results when funding programs and/or services?

No. The practice of data capture has been too recent to provide a basis for evaluation at this time. Implementation of programs such as MRT, AOD services, and financial education have been based on results achieved by other agencies and entities. Local evaluation will begin with the FY2017/2018.

Does the county use BSCC definitions when collecting data? If so, which?

No, BSCC definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Currently Del Norte County DHHS AOD Programs provides the following services to local offenders:

1. Perinatal Intensified Outpatient Treatment for mothers and women with substance use disorders.
2. Dual Diagnosis Services for co-occurring disorders.
3. Drug Court Programs in collaboration with Del Norte County Superior Court and Probation.
4. Collaboration with Del Norte Community Health for Medicated Assisted Treatment (MAT).
5. Referrals for Medical Detox, Social Model Detox, and Residential Treatment.
6. Aftercare and Continued Care Services for ongoing maintenance of substance use disorder programs.

Current challenges for AOD include finding qualified board certified professionals in the local area for AOD Programs. Also, with the increase in opioid abuse, AOD Programs may have to collaborate for additional support for (MAT).

Currently Del Norte County DHHS Mental Health provides full access to services for offenders including Mental Health Assessment, Individual Therapy, Psychiatry for medications, and Case Management. We work with offenders with serious mental illness to enroll in Full Service Partnership program through Mental Health Services Act, to address basic needs such housing for those who qualify. Mental Health has also designed a specific treatment using Moral Reconciliation Therapy to address the unique mental health needs of offenders. This treatment is done in the County Jail and as an outpatient service. Psychiatry services are also offered in the County jail for offenders who qualify for AB 109 funding.

The biggest challenge for Mental Health would be staffing. Current staffing levels of qualified therapists and psychiatrists at times can cause delay of services. Mostly though, staff is busy and these offenders tend to require monitoring and reporting back to Probation in a timely manner and sometimes that falls through the cracks when they do not show or maintain treatment compliance. There is some limited resource for clean & sober housing through a local CBO operating one male-only house. There continues to be limited infrastructure for housing of any kind.

What challenges does your county face in meeting these programming and service needs?

Del Norte has a very limited CBO presence, particularly in relation to those that offer services to adult offenders. Those that do (e.g. Workforce Center) do not offer offender-specific services.

Additionally local government agencies that offer offender services have great difficulty in recruiting and retaining staff due to non-competitive salaries and benefits. The rural and isolated nature of the county and the lack of any substantial economic base is severely limiting in developing durable and sustainable solutions for offender rehabilitation.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The lack of codified goals & objectives has contributed to an uncoordinated effort to reduce recidivism. Pursuing the establishment of these will be a needed and greatly beneficial step in coordinating local services for offenders.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The establishment of mental health and substance abuse treatment services both in custody and out of custody is a positive accomplishment. Continuity of services has long been a challenge locally and the collaboration between Probation and the divisions of DHHS has led to a very promising outcome.

Community Corrections Partnership Membership
(October 21, 2016)

Brian J. Richart
Chief Probation Officer

Jackie Davenport
Presiding judge or designee

Don Aston
County supervisor or chief administrative officer or designee

Vern Pierson
District Attorney

Teri Monterosso
Public Defender

John D'Agostini
Sheriff

Vacant
Chief of Police

Patricia Charles-Heathers
Department of Social Services, Department of Employment, Department of Mental Health and Alcohol and Substance Abuse Programs

David Publicover
Office of Education

Vacant
Community-based organization

Vacant
Victims' interests

The CCP meets semi-annually

El Dorado County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide effective supervision and programming to the Community Corrections Center (CCC) offenders to ensure public safety and use evidence-based practices in reducing recidivism.

Objective:

- 100% of offenders will be assessed to determine their individual need and reassessed at the start of each phase of the CCC.
- 100% of offenders will be supervised according to their needs and risk level.

Measure:

- Number of offenders accepted into the CCC.
- Number of offenders completing their period of supervision.
- Number of offenders convicted of a subsequent felony.

Progress: These goals were approved as of 4/1/2016 at the CCP meeting. The data implementation plan is in the final stages and data will be available by 6/30/2017.

Goal: Use Moral Recognition Treatment (MRT™) at the CCC.

Objective:

- Enroll all CCC accepted referrals into MRT™ within the first month they are accepted.
- Achieve an 80% graduation rate for MRT™ at the CCC.

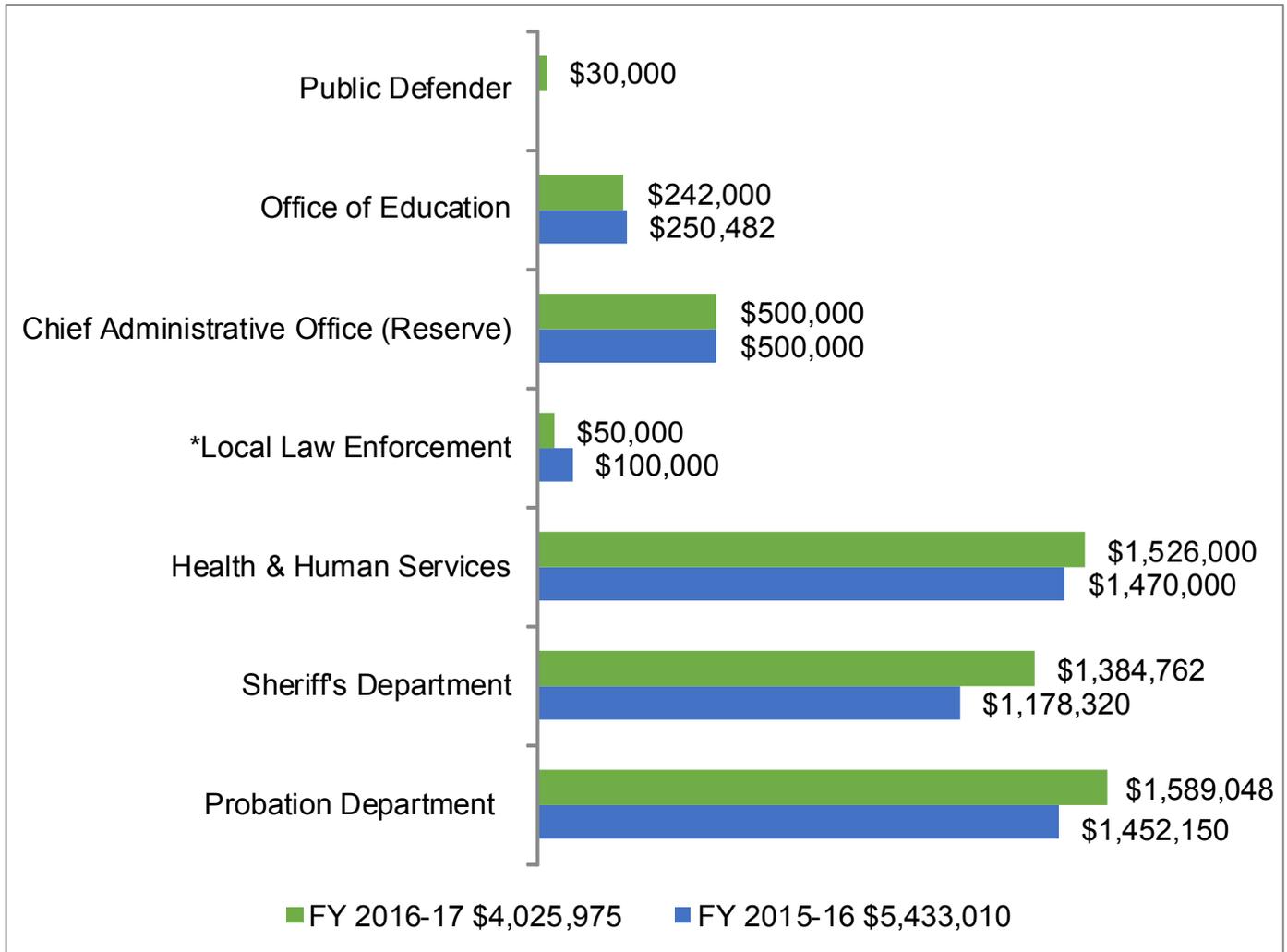
Measure:

- Number of all accepted referrals into MRT™ and the days in between the accepted date and the start date of MRT™ .
- Number of graduates from MRT™.

Progress: These goals were approved as of 4/1/2016 at the CCP meeting. The data implementation plan is in the final stages and data will be available by 6/30/2017.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

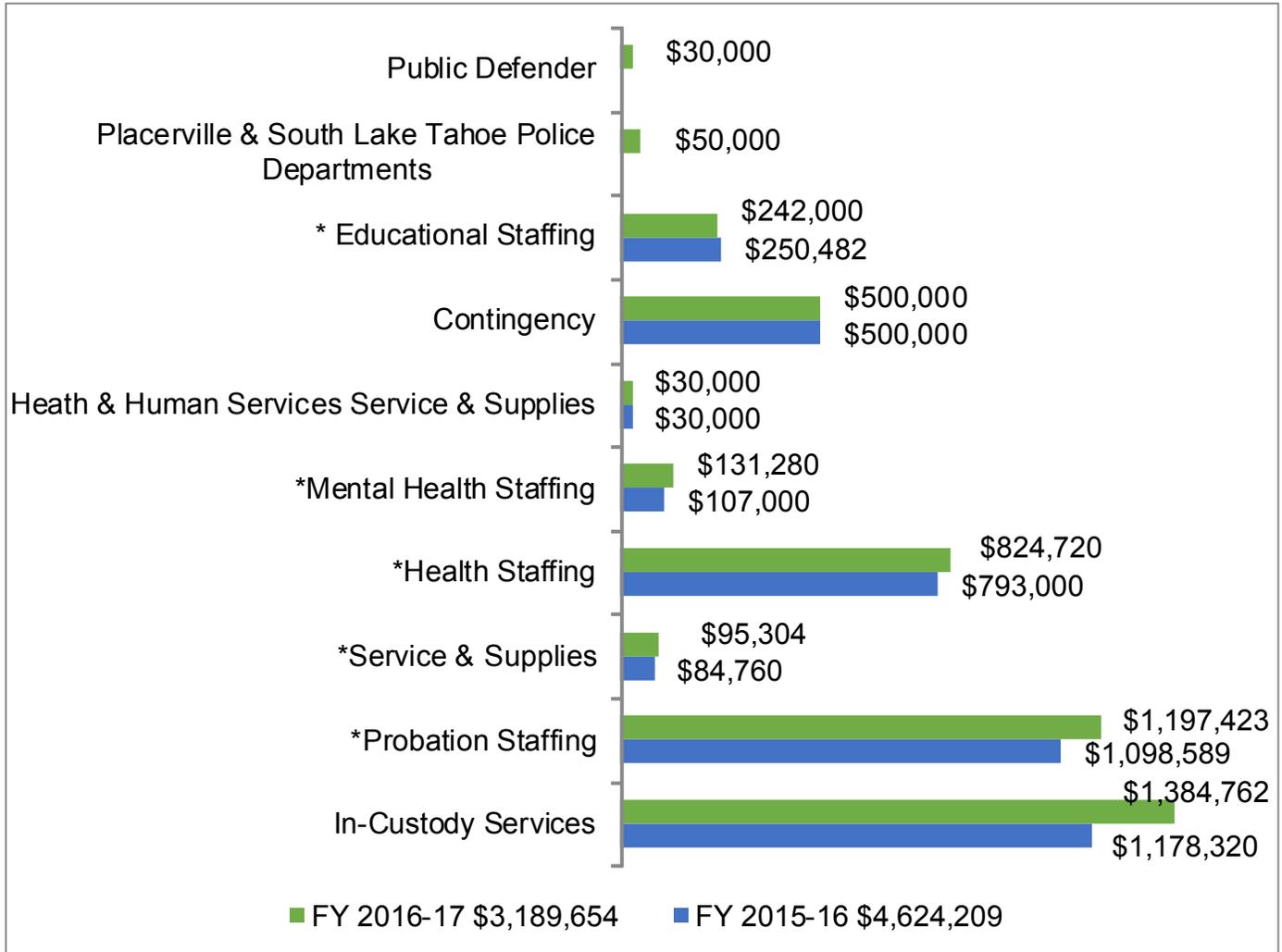


* Placerville and South Lake Tahoe Police

FY 2015-16 Carryover to Fund Balance: \$482,058

FY 2016-17 Allocation of Fund Balance for 2016-17: \$1,295,835

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services

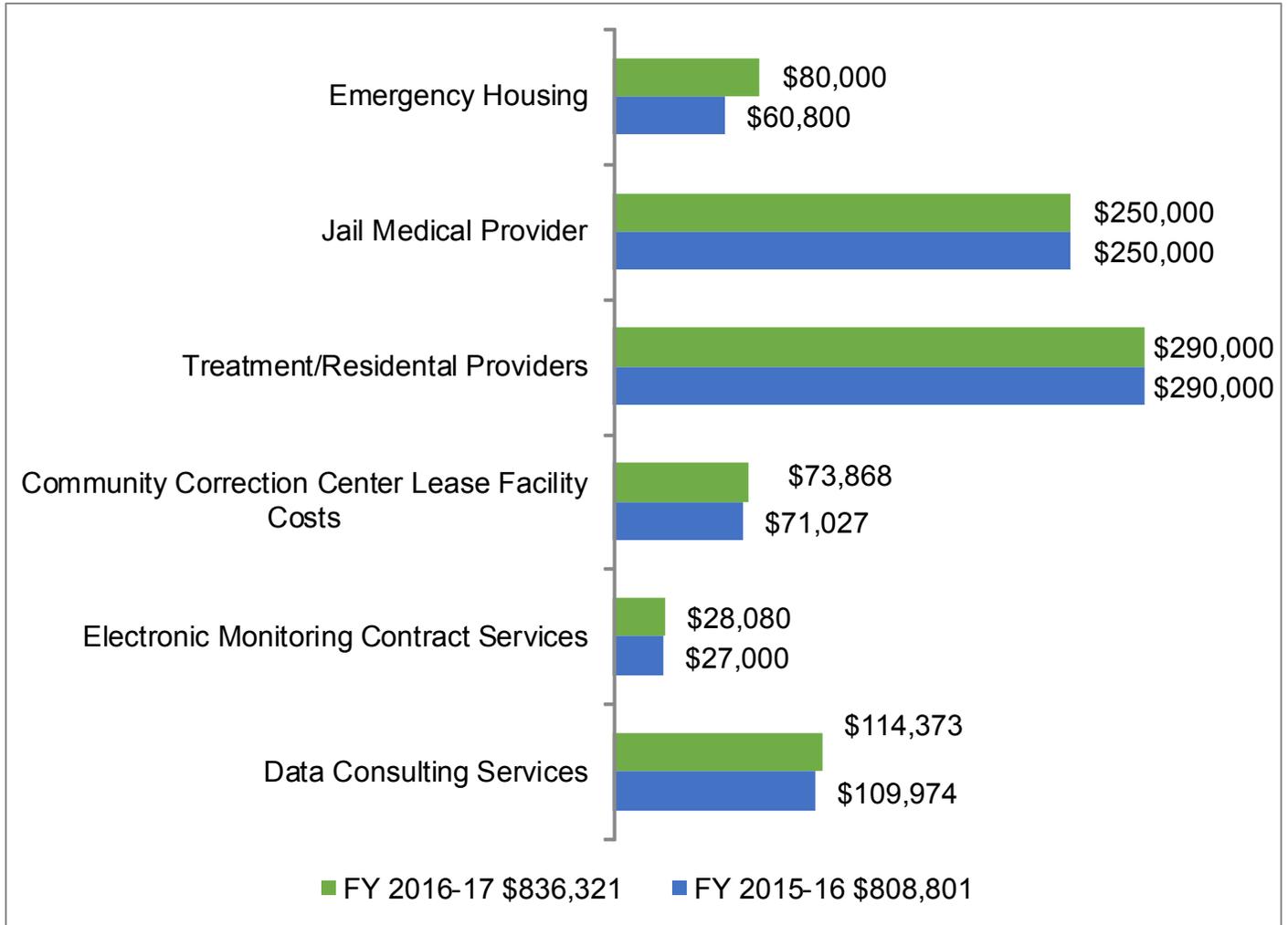


* Community Corrections Center

FY 2015-16 Carryover to Fund Balance: \$482,058

FY 2016-17 Allocation of Fund Balance for 16/17: \$1,295,835

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

COMMUNITY CORRECTION CENTER (CCC): Creates a one stop shop for the high risk probation offenders in the El Dorado County community. The CCC is designed to provide intensive treatment options, both in house services and contracted services. Below are the following list of services and the types.

PROBATION: Moral reconnection therapy, risk/need assessment with case plan focus.

TREATMENT CONTRACTS: In-patient, out-patient, residential, counseling, drug treatment, transitional housing, rehabilitation services, and mental health intervention.

MENTAL HEALTH SERVICES: Assessments, case management, short-term individual counseling (CBT programs), psychiatric services & evaluations, medication management, referrals to other county agencies.

ALCOHOL & DRUG SERVICES: Comprehensive substance use disorder assessment, comprehensive case management, individual counseling, substance use disorder treatment groups, moral reconnection therapy, dialectical behavior therapy.

EDUCATION: High school diploma, GED, basic reading, writing, and vocational/enrichment.

JAIL: There are hybrid versions of the services above. One of the main goals of the Jail services through Health & Human Services by actively promoting, educating, and assisting inmates with their Health Care Options while incarcerated. Inmates can access services through a direct referral process or an inmate self-directed referral process.

What challenges does your county face in meeting these programming and service needs?

Housing and transportation continue to be two of the greatest challenges for El Dorado County. In addition, two separate locations of county services, the West Slope and South Lake Tahoe create challenges around availability of services, availability of programs, with a dynamic environment of two court systems.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We have not made any significant changes to the previous plans approved by the CCP at this point. Data collection systems have been established to evaluate the effectiveness and impacts of realignment on the local justice systems; however, this continues to be a work in process.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Community Corrections Center (CCC) vision of “Changing Lives & Creating Safer Communities,” is doing exactly that in El Dorado County. The CCC is continually refining the cognitive behavior approach of Moral Recognition Therapy (MRT) and the data is proving the model is aligned with our vision. In addition, the location of the CCC as a one-stop location staffed with various county agencies to serve clients through interventions directly linked to their criminogenic needs and stabilization efforts continues to be El Dorado County’s best practice of services.

Success Summary

- 53% of the clients who have left the CCC for any reason remain out of the El Dorado County justice system (no new arrest/no new case).
- 75% of the clients currently enrolled at the CCC have remained out of the El Dorado justice system (no new arrest/no new case).
- 100% of the clients that have graduated the CCC have remained crime free in El Dorado County.

Community Corrections Partnership Membership
(October 21, 2016)

Rick Chavez
Chief Probation Officer

Sheran Morton
Presiding judge or designee

Jean Rousseau
County supervisor or chief administrative officer or designee

Lisa Smittcamp
District Attorney

Elizabeth Diaz
Public Defender

Margaret Mims
Sheriff

Jerry Dyer
Chief of Police

Delfino Neira
Department of Social Services and Department of Employment

Dawan Utecht
Department of Mental Health

Susan Holt
Alcohol and Substance Abuse Programs

Jim Yovino
Office of Education

Vacant
Community-based organization

Nancy Dominguez
Victims' interests

The CCP meets as needed

Fresno County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Continue hiring practices and training of staff to meet the adopted ratios in the 2011 CCP Implementation Plan.

- Objective:**
- The department will hold quarterly job recruitments for the deputy probation officer (DPO) classification until the positions are adequately filled.
 - Revised DPO job specifications from requiring a Bachelor's degree in criminology, social work, sociology or closely related field, to accepting a Bachelor's degree in any field.
 - Recruit through job fairs; accept applications from undergraduates with a condition that a copy of their Bachelor's degree and transcripts are provided prior to formal job offer.

Measure: • Number of DPOs that have been hired.

Progress: From July 2015 to December 2015, 19 permanent and extra help DPOs have been hired helping to get closer to the goal of one DPO to 50 offender supervision ratio.

Goal: Create specialized caseloads for domestic violence, sex offender and mental health populations

- Objective:**
- Modify the 3rd update to the CCP Plan for specialized caseloads by enhancing the supervision needs of three designated types of offenders. Revised DPO job specifications from requiring a Bachelor's degree in criminology, social work, sociology or closely related field, to accepting a Bachelor's degree in any field.
 - Move away from strictly caseload standard that is based on the number of offenders an officer can effectively supervise.
 - Request funding to establish a fourth AB 109 Unit for this specialized unit that will consist of one Probation Services Manager (PSM), three Deputy Probation Officer IV's, seven Deputy Probation Officer I-III's, two Probation Technicians and one Office assistant.
 - Updated CCP plan.

Measure: • Reach supervision ratios of 1 DPO to 35 offenders for specialized caseloads.

Progress: Funding was granted however this is an ongoing goal as the department works towards filling positions in the DPO classification to meet the specialized supervision ratio of one DPO to 35 offenders.

Goal: Increase services in the areas of job/vocational employment and transitional housing.

- Objective:**
- Receive Request for Proposals (RFPs) from agencies that provide job/vocational employment and transitional housing for the AB 109 population.
 - Establish committee to review RFPs from agencies that can assist and/or provide services to the targeted population.

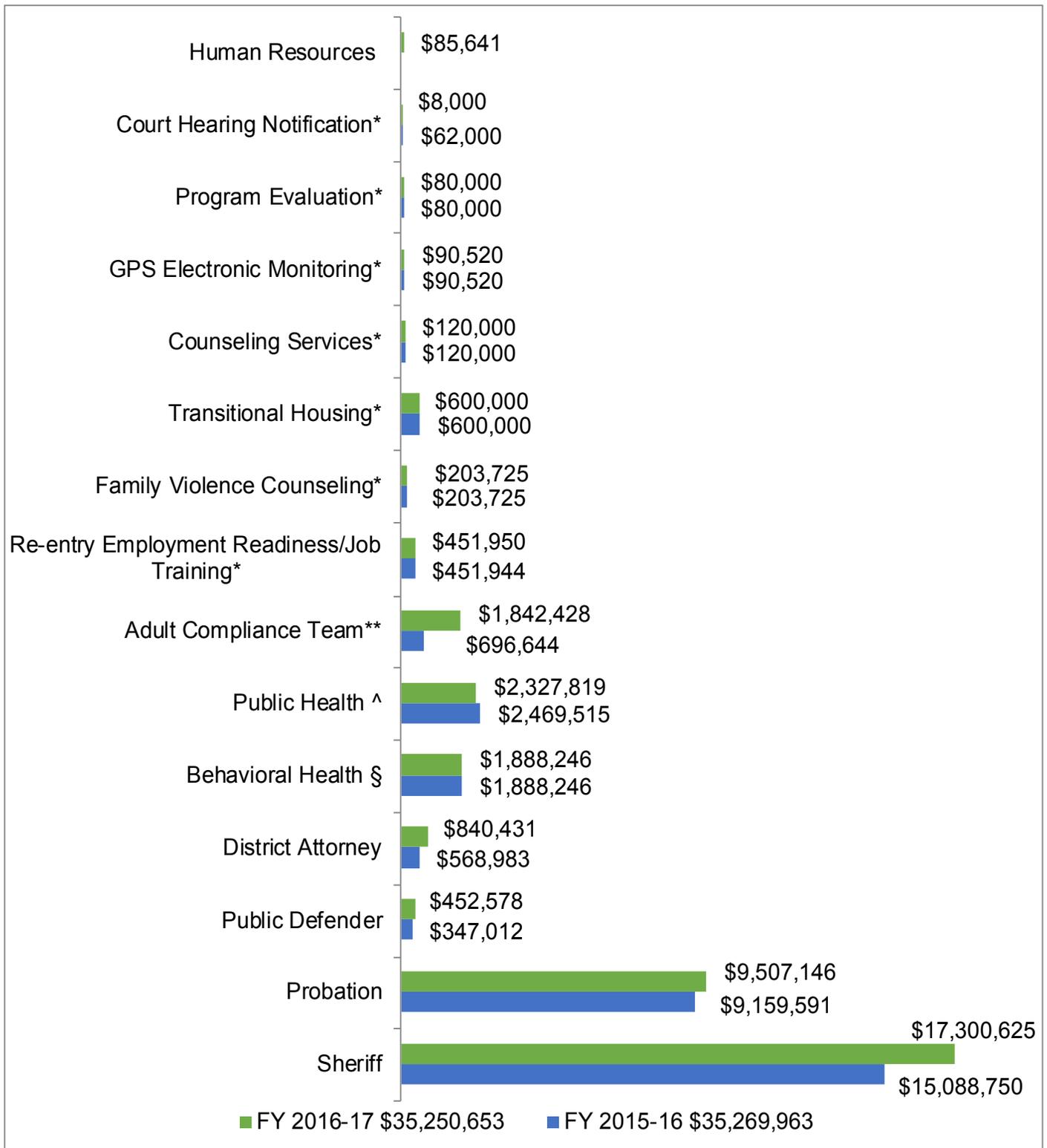
Measure:

- Contract with an employment agency and transitional housing program
- 10% increase in referrals to associated services and 10% increase in the average daily population of transitional housing.

Progress: Contracted with America Works of California for the Employment Readiness program. Services became available in April 2016. The transitional housing program is an ongoing goal as agencies/organizations that can provide these types of services are currently being sought.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

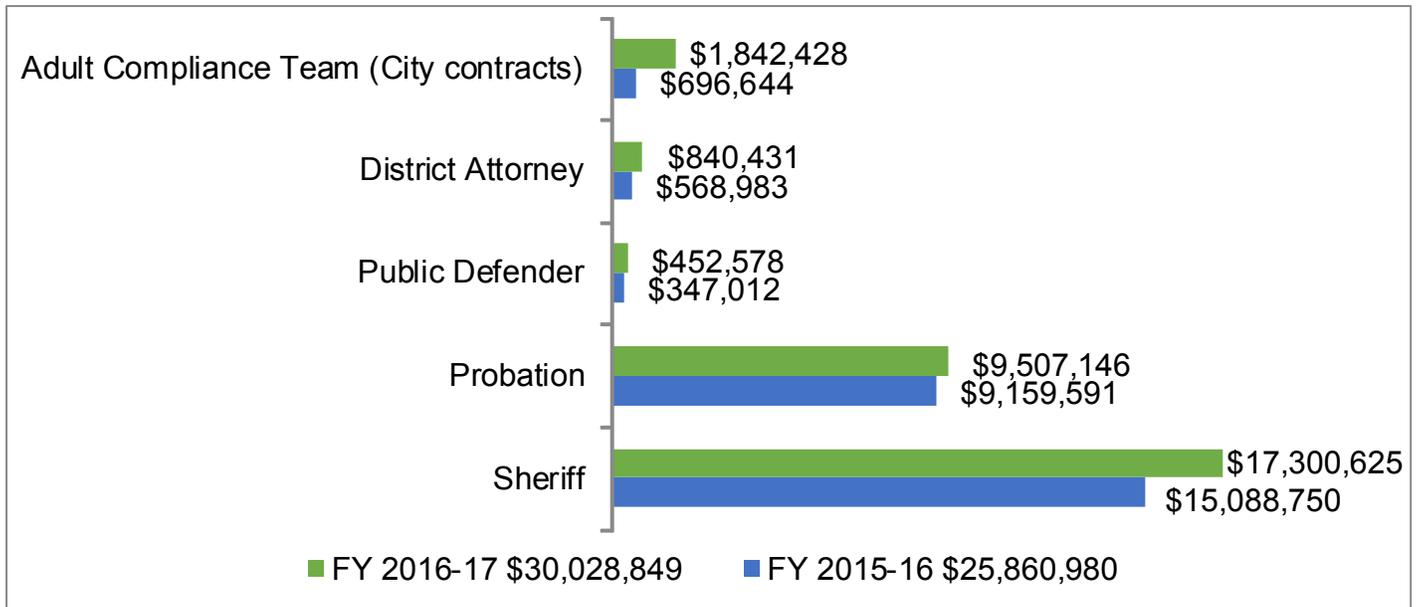


* Contracts, ** City Contracts, ^ Contracted Jail Medical Services, § Contracted Services

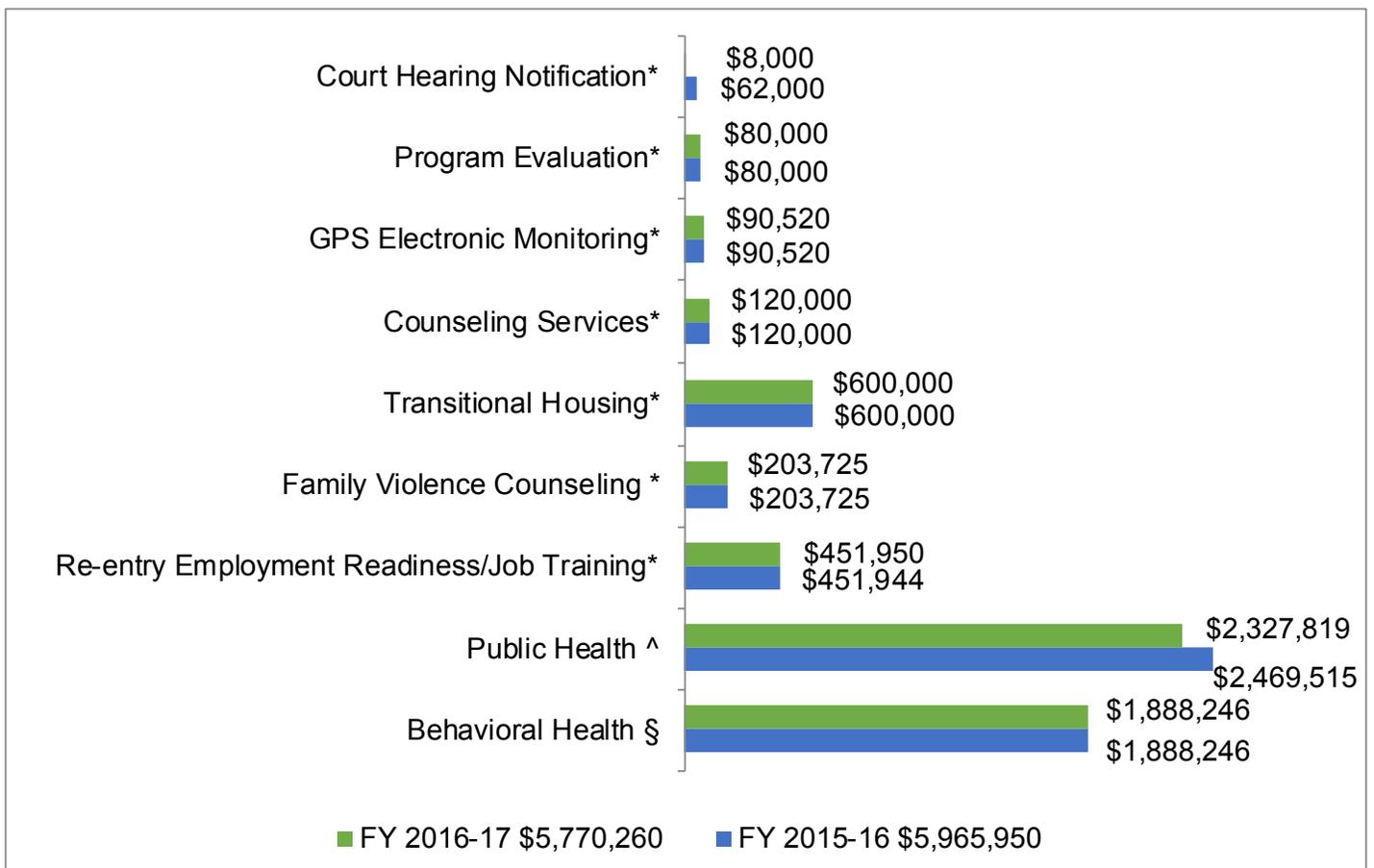
FY 2015-16 Reserve Funds: \$3,443,033

FY 2016-17 Carryover Funds: \$548,456

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



* Contracts, ^ Contracted Jail Medical Services, § Contracted Services

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CCP contracted with Owen Research and Associates to complete an evaluation of programs, services, and outcomes under AB 109. The research group presented a Data Report to the CCP in April of 2016. The contract with Owen Research and Associates expired in November, 2016. Alternatives for the evaluation of AB 109 programs will be reviewed in early 2017. In addition, the CCP has required all agencies funded by AB 109 demonstrate the effectiveness of their program.

Does the county consider evaluation results when funding programs and/or services?

Yes. The CCP continues to identify needed services for AB 109 offenders that are based on evidence based practices. The County is currently working with the PEW Research Center on the Results First Initiative to further help the County identify programs that are most likely to reduce recidivism and generate cost savings, in part, by creating the ability to report and track outcomes and to submit data for evaluation purposes.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

The county, in conjunction with public and private provider networks, is providing services that in the past have not been available to the offender populations in Fresno County. The Fresno County Superior Court, in conjunction with several County Departments, operates a Behavioral Health Court and Drug Court. This enables specialized services and caseload supervision to offenders that are mentally ill or have substance abuse issues.

Counseling services are available through a contract with Sierra Educational Regional Institute (SERI) which provides services for both the Fresno County Jail Transition Pod and supervision caseloads. Cognitive Behavioral Therapy is also available at the jail. The Probation Department utilizes the STRONG assessment tool in order to provide services based on each offender's identified needs.

Fresno County has established a Full Service Partnership (FSP) for the critically mentally ill with public and private providers which provide offenders with services, case management and housing. In addition, the county offers homeless beds and transitional services as well as a Day Reporting Center for increased services to the population. The CCP continues to look to the Resources Subcommittee to identify and recommend additional services needed to serve this population.

What challenges does your county face in meeting these programming and service needs?

The hiring of staff, specifically the DPO classification, has been a challenge in Fresno County. Although this has been an ongoing issue, the significant increase in required staffing to address the AB 109 population has made it more difficult to hire and retain the required number of staff.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Program development implementation under AB 109 required a paradigm shift for the entire justice system. The association with the Pew Research Group under the Results First Initiative will help the County implement programs that are based on evidence and research as well as being cost effective. Use of evidence based practices (EBP) represents a practical solution to Fresno County's need to manage the higher than anticipated influx of greater risk, longer stay offenders.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Fresno County CCP and the Board of Supervisors approved a contract with America Works of California (AWCA) in January of 2016 with the program becoming operational in April of 2016. AWCA provides both in-custody and post-custody re-entry employment readiness services. In-custody services include, in part, completing a variety of assessments that consider problems that frequently effect ex-offenders such as histories of substance abuse, trouble finding housing, lack of adequate food, limited access to essential documentation (i.e. valid identification, birth certificates), limited numeracy and literacy skills, and educational levels. Case plans are developed almost completely through client input and from assessments that identify individual needs. Job Readiness Training (JRT) includes 9 modules: 1) Removing Barriers, 2) Job Research and Real Interviews, 3) Self-assessment, 4) Diagnostic Testing, 5) Time Management 6) The Work Environment, 7) Self-presentation, 8) Basic Computer Skills, and 9) Resume Preparation and Mock Interviews.

Since the start of this program, a total of 91 individuals have completed the program of which 42 have obtained employment.

Community Corrections Partnership Membership
(October 21, 2016)

Brandon Thompson
Chief Probation Officer

Kevin Harrigan
Presiding judge or designee

John Viegas
County supervisor or chief administrative officer or designee

Dwayne Stewart
District Attorney

Albert Smith
Public Defender

Rich Warren
Sheriff

Jason Dahl
Chief of Police

Christine Zoppi
Department of Social Services, Department of Employment, Department of Mental Health and Alcohol and Substance Abuse Programs

Tracey Quarne
Office of Education

Vacant
Community-based organization

Teresa Pinedo
Victims' interests

The CCP meets quarterly

Glenn County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide effective supervision and programming to Post Release Community Supervision (PRCS) Offenders that ensures public safety and uses evidence-based practices in reducing recidivism.

Objective:

- 100% of Offenders will be assessed to determine their individual needs and appropriate referrals will be made.
- 100% of Offenders will be supervised based on their risk level and needs.

Measure:

- Number of Offenders (PRCS) released into the community.
- Number of Offenders completing their period of supervision.
- Number of Offenders on warrant status, as of June 30, 2016.

Progress: We had 14 Offenders released back into the community. 100% reported as required. As of June 30, 2016, he had one (1) offender on active warrant status. We had 12 Offenders complete their term of supervision. 58% were deemed unsuccessful. 29% sustained a new felony conviction, while 71% had their max term expire. 42% completed their term of supervision successfully.

Goal: Provide effective supervision and programming to Alternative Custody Supervision (ACS) Offenders that ensure public safety and use evidence based practices in reducing recidivism.

Objective:

- 100% of Offenders who meet the criteria will be assessed to determine their individual needs and will follow up with appropriate referrals.
- 100% of participants of ACS will be supervised based on their risk level and needs.

Measure:

- Number of Offenders released into the community on ACS.
- Number of Offenders completing their period of supervision.
- Number of Offenders sustaining subsequent arrest and/or new convictions while on the ACS program.

Progress: The Glenn County Sheriff's Department has implemented the program where individuals are assessed and released into alternative placements, such as residential treatment facilities, and returned home on Electronic Monitoring. Due to turnover with their supervision officers, data was not able to be obtained.

Goal: Provide in-custody and outpatient mental health services to AB109 Offenders.

Objective:

- The county declined to respond to this question.

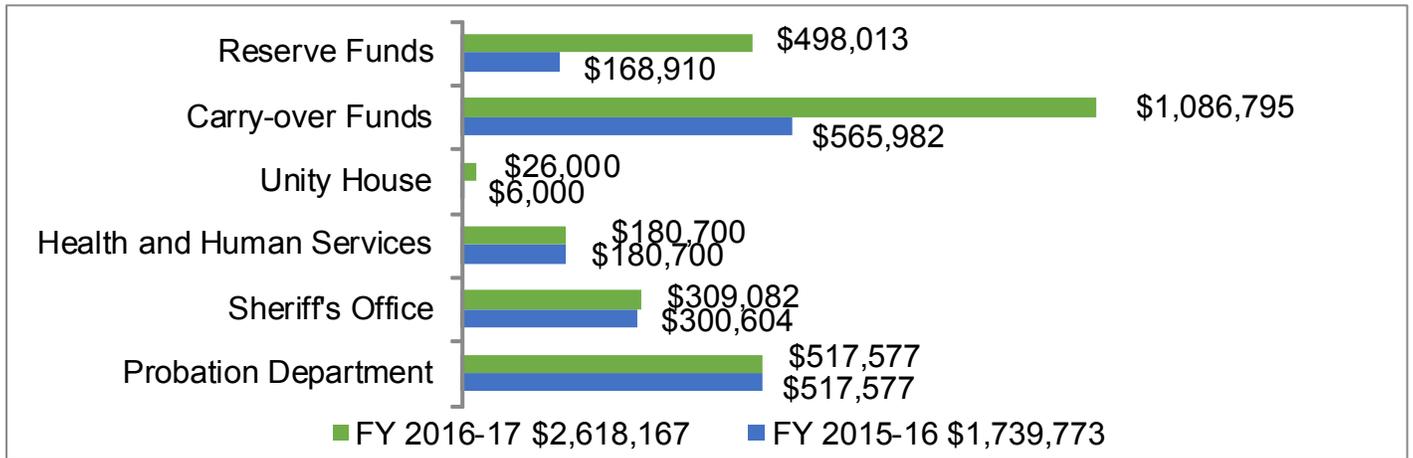
Measure:

- Number of Offenders seen at the jail.
- Number of Offenders assessed for mental health needs.
- Number of Offenders receiving mental health services.

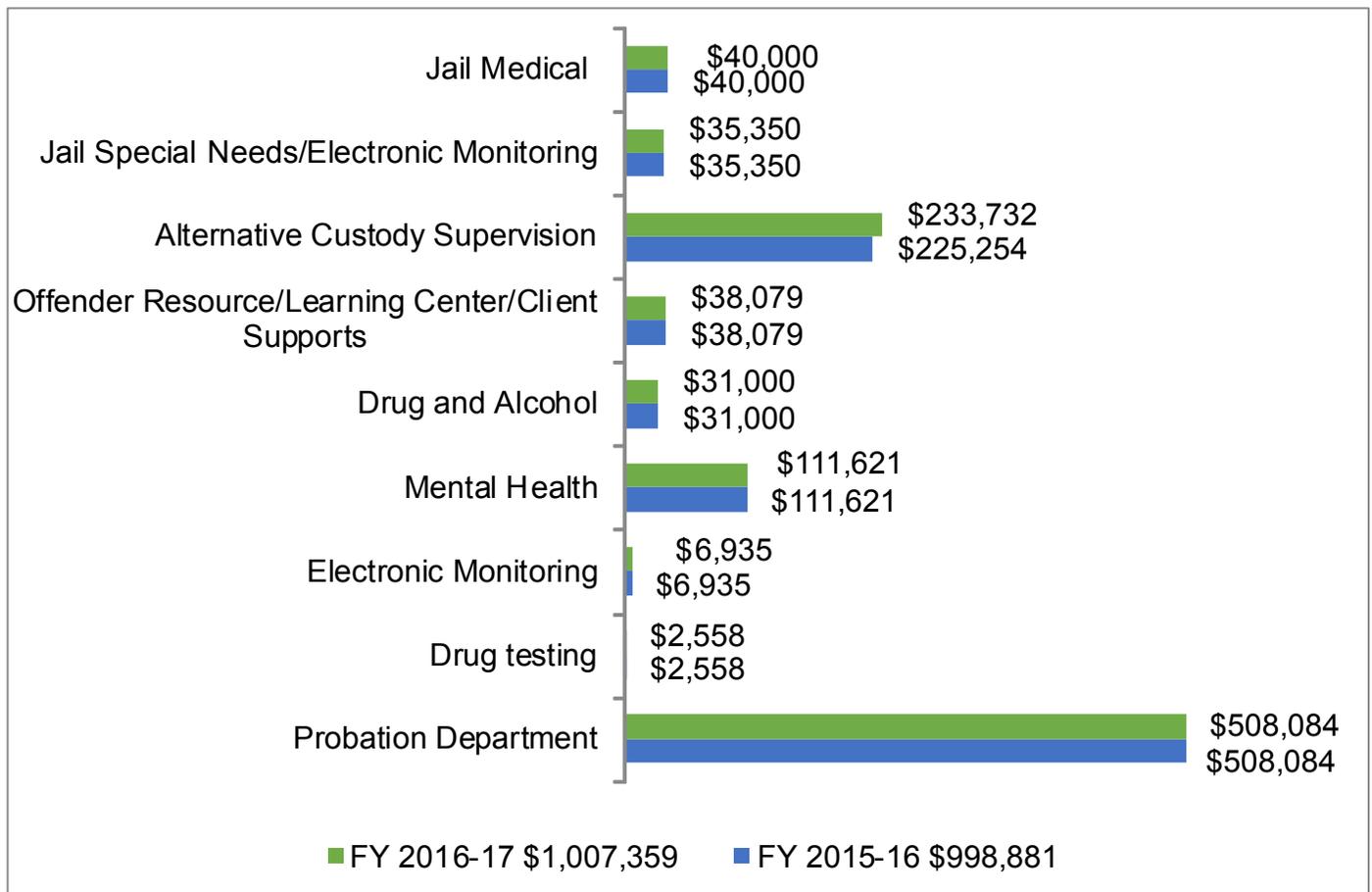
Progress: Due to limited space within the Glenn County Jail, only group sessions are being offered. AB109 Offenders are being contacted in jail, introduced to Mental Health Staff and are provided groups in areas such as Anger Management, Courage for Change, and Life Skills. Once released from custody, a full assessment is completed. During this reporting period, 20 individuals received services while in jail. In total, both out of custody and in custody, 23 individuals were assessed, 19 received mental health services, 17 completed anger management classes, and 12 completed Courage for Change.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

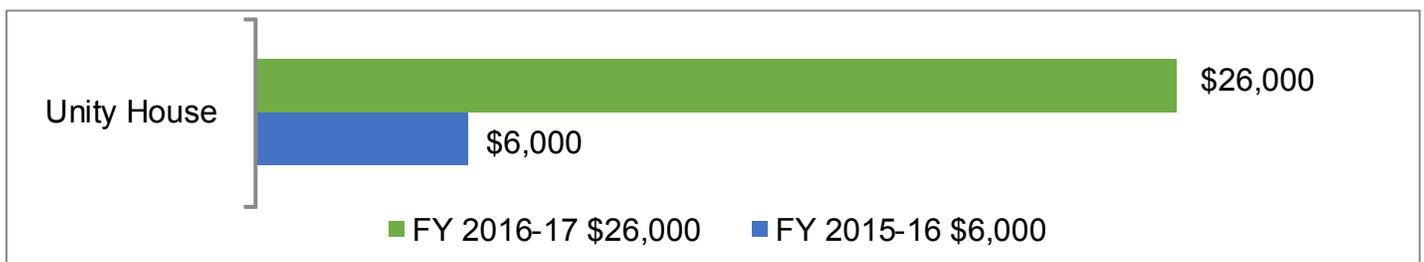
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

No.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41%-60%

We would like to better understand your 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?

- Sheriff – Alternative Custody Supervision (ACS), Pretrial Services.
- Health and Human Services – Drug and Alcohol, Mental Health Eligibility, Assessments, Cognitive Interventions, Life Skills, and Anger Management, Out-Patient Recovery (Discovery House). We utilize programs such as Salvation Army, Jordan's Crossing, and Jericho Project for Residential Treatment Programs.
- Office of Education – Assessments, Success One Charter School where an individual can earn his/her high school diploma or GED.
- Probation – Assessments, Electronic Monitoring, Cognitive Interventions, Supervision base on Risk Levels.
- Child Support Division – Assessments to determine if individual qualifies for program to earn their driver's license back on a temporary basis, while making payments towards delinquent child support. Some delinquent child support can be forgiven if the individual qualifies.

What challenges does your county face in meeting these programming and service needs?

- Lack of community based organizations that are able to provide services.
- Lack of sober and transitional living environments, vocational training, and employments placements.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Glenn County Office of Education developed an adult Charter School that emphasizes attaining a high school diploma, both in and out of custody. At the same time, the charter allows for GED studies. During this reporting period, they had six (6) individuals who obtained their high school diploma while being incarcerated in jail.

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Community Corrections Partnership Membership
(October 21, 2016)

William Damiano
Chief Probation Officer

Kim Bartleson
Presiding judge or designee

Amy Nilsen
County supervisor or chief administrative officer or designee

Maggie Fleming
District Attorney

Kevin Robinson
Public Defender

Michael Downey
Sheriff

Thomas Chapman
Chief of Police

Connie Beck
Department of Social Services, Department of Employment, Department of Mental Health and Alcohol and Substance Abuse Programs

Garry Eagles
Office of Education

Arlette Large
Community-based organization

Joyce Moser
Victims' interests

The CCP meets monthly

Humboldt County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Expand in-custody services within the jail.

Objective: • The county declined to respond to this question.

- Measure:**
- Staff hired and in place.
 - Train new staff in Moral Reconciliation Therapy (MRT) facilitation.
 - Implement MRT groups within the jail.

Progress: Hiring is ongoing. Funding for MRT training has been approved and coordination is under way and planned for after the new year.

Goal: Develop and implement interagency data management platform.

Objective: • Complete Phase 3 of data project – Build and generate reports for analysis of data.

- Measure:**
- Data warehouse completion and operational (Phase 2).
 - Relevant reports developed and regularly circulated to decision makers (Phase 3).

Progress: Data from criminal justice agencies has been mapped and programmed. Human services data is in process of being linked to criminal justice data and programmed to be extracted to the data warehouse.

Goal: Pilot Equine Assisted Growth and Learning (Horses Help) with AB 109 offenders.

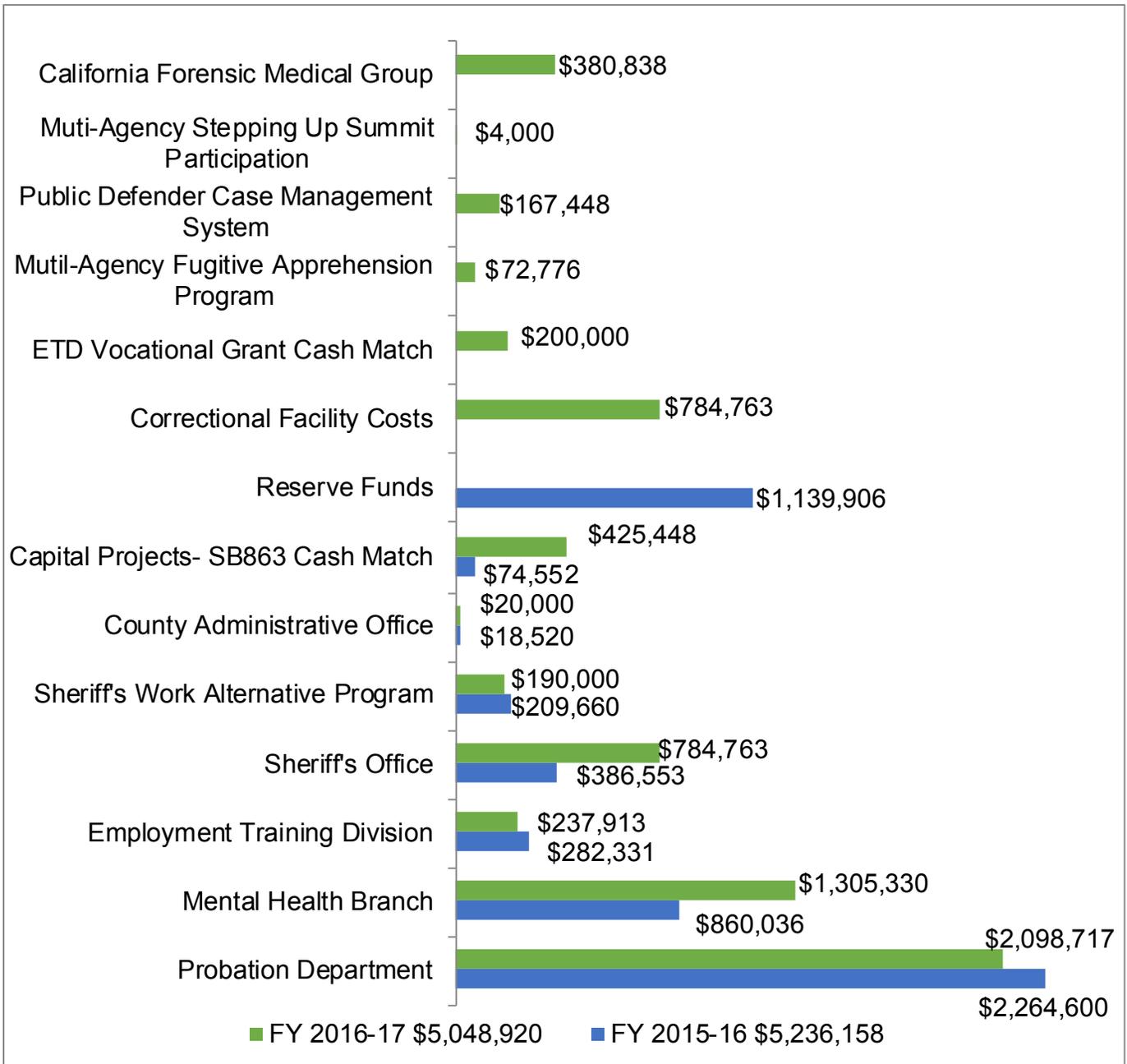
Objective: • The county declined to respond to this question.

- Measure:**
- Intake and exit questionnaires and interviews with participants.

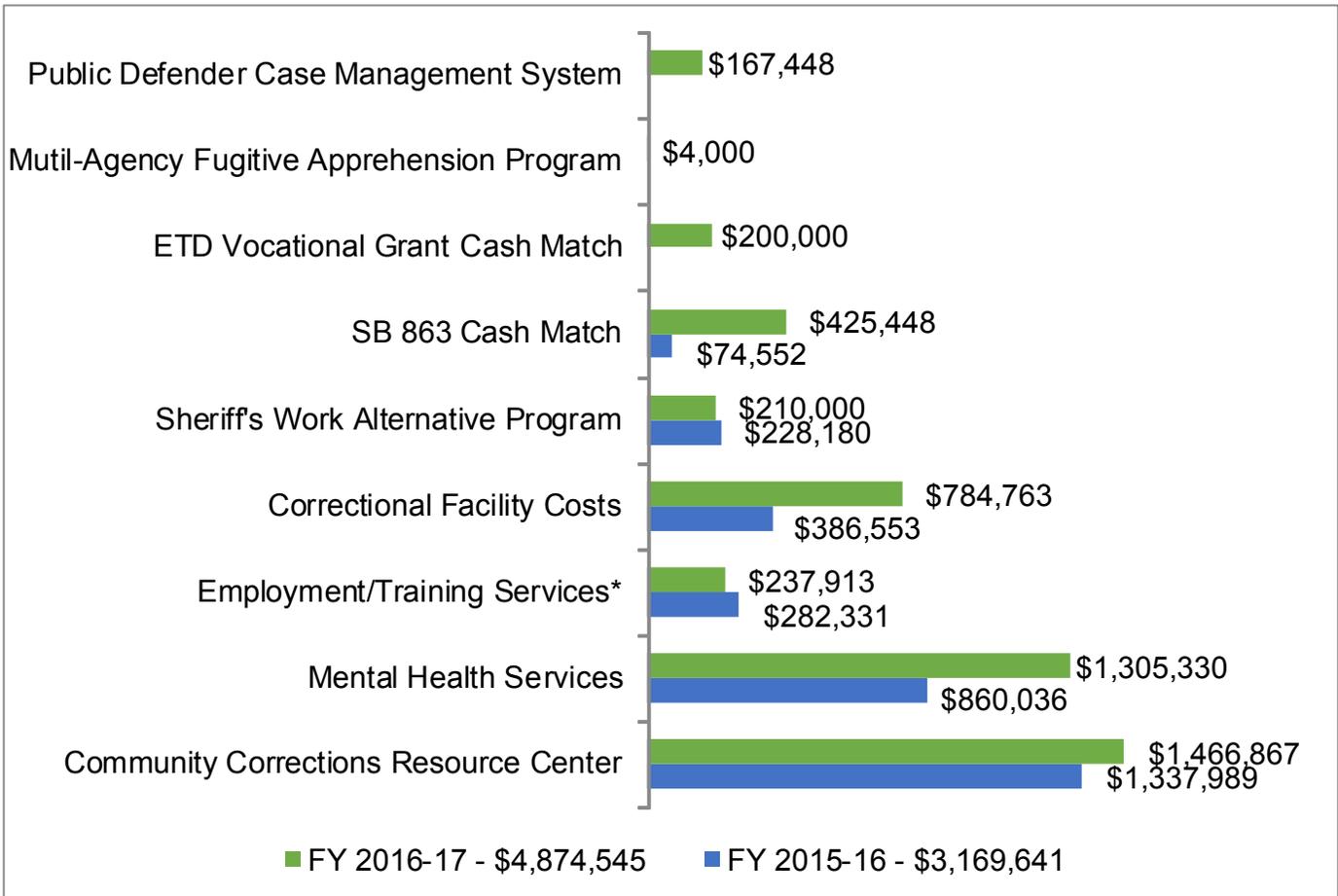
Progress: Pilot completed, outcomes reviewed with CCP Executives and authorization to continue provision under Contract Services agreement. Three graduations have taken place since the pilot project concluded. Twenty-nine individuals have participated in the program, with 25 completing all phases. Recidivism outcomes are mixed, but anecdotally offenders are engaging in more pro-social behaviors and show greater willingness to participate in other supportive services offered through the Community Corrections Resource Center.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

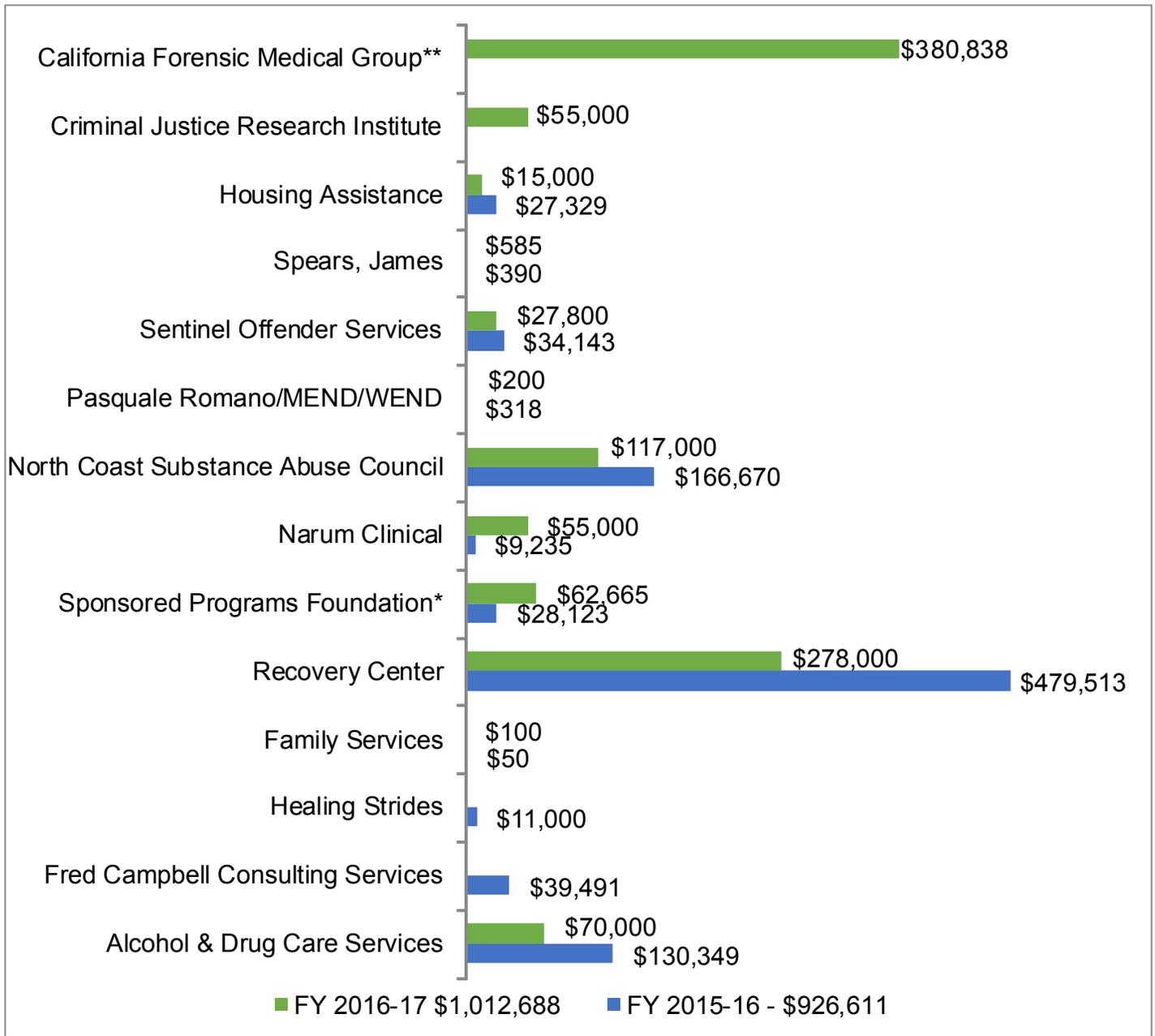


FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*Vocational counseling, etc.

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



* Department of Health and Human Services, ** In-Custody Medical Care, *** Revenue Recovery Division

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Data is collected by various corrections agencies and service providers and input into appropriate case management systems to be shared regularly with the CCP bodies. Measures of effectiveness are limited at present, but rough outcomes and units of service are reported. The county is presently integrating those data elements into a single multi-agency database for further analysis and evaluation of effectiveness.

Does the county consider evaluation results when funding programs and/or services?

Yes. Program outcomes are monitored, staff and offenders surveyed. If demonstrated to be beneficial to offenders, staff recommends continued utilization of said services or suggests additional options to better address offender needs.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41%-60%

We would like to better understand your 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?

County Mental Health services are provided within the jail and crosswalk to the Community Corrections Resource Center (CCRC) for AB109 offenders and mentally ill offenders who have no prior treatment through the County. Clinicians, case managers, behavioral health nurse, psychiatrist and medication support services are offered both in jail custody and through the CCRC or behavioral health department.

County alcohol and drug assessments and counseling services are provided in the jail, CCRC, perinatal day habilitative program, or behavioral health department. Contract services for detoxification, residential treatment, and supervised clean and sober housing are also offered, as appropriate.

What challenges does your county face in meeting these programming and service needs?

Principally, we have offender-related challenges – retention and active program participation. Programs have staffing capacity issues – inability to hire trained and qualified staff. Most programs are under maximum capacity locally.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Implementation of body and mail scanners within the jail has increased treatment retention (people are leaving custody clean/sober). Supporting staff (county and CBO) training in cognitive behavioral interventions (MRT, Seeking Safety, University of Cincinnati's Cognitive Behavioral Interventions for Substance Abuse) has increased the quality and consistency of local treatment programming offered in the county, as well as created common language and practices across disciplines.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We have a vocational counselor placed at our Community Corrections Resource Center who works with our AB109 offenders in need to assessment, soft skills training, placement in short term work experience (WEX) jobs, on-the-job training (OJT) with 50% wage reimbursement, or regular jobs. In FY15/16, the counselor had 88 new referrals for introduction to services, assisted 238 offenders with ongoing supports, conducted 28 vocational assessments, placed 31 in WEX and/or OJT programs, and helped 85 offenders enter regular employment.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Dan Prince
Chief Probation Officer

Tammy L. Grimm
Presiding judge or
designee

Ralph Cordova Jr
County supervisor or
chief administrative
officer or designee

Gilbert G. Otero
District Attorney

Ben Salorio
Public Defender

Raymond Loera
Sheriff

Michael Crankshaw
Chief of Police

Peggy Price
Department of Social
Services

Miguel Figueroa
Department of
Employment

Andrea Kuhlen
Department of Mental
Health

Don Gorham
Alcohol and Substance
Abuse Programs

Todd Finnell
Office of Education

Carlos Contreras
Community-based
organization

Deborah Owen
Victims' interests

The CCP meets monthly

Imperial County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Continue with the Inside/Out College Program.

Objective:

- Provide college courses to 15 incarcerated individuals and 15 community college students in the field of life skills and substance abuse.

Measure:

- Spring and Fall 2015 course was completed.
- Spring 2016 course was completed.

Progress: In this reporting period, 76% of incarcerated students have successfully completed the courses offered through the Inside/Out program. Also, the program coordinator will be conducting research on the continued progress of past students.

Goal: Implement a Sex Offender Containment Model.

Objective:

- Implementation will provide services to sex offenders.

Measure:

- Contracted with Masters-level Certified Sex Offender Counselor.
- Implemented polygraphing of Sex Offenders.
- Utilization of Global Positioning System (GPS) as a graduated sanction and alternative to incarceration. GPS implementation varies from 1 to 4 participants per year.
- Implement yearly Halloween Night "Operation Boo" Sex Offender Compliance checks in coordination with local, state, and federal agencies.

Progress: During this reporting period, 11 sex offender probationers underwent polygraph examinations which identified individuals that may require additional assistance; exams are conducted every 6 months. The certified counseling sessions and intensive supervision are to be a main priority as 11 participants are currently participating in counseling sessions with 2 participants successfully completing counseling sessions.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Develop a Charter School for clients to attend and obtain their High School Diploma or GED

Objective: • The county declined to respond to this question.

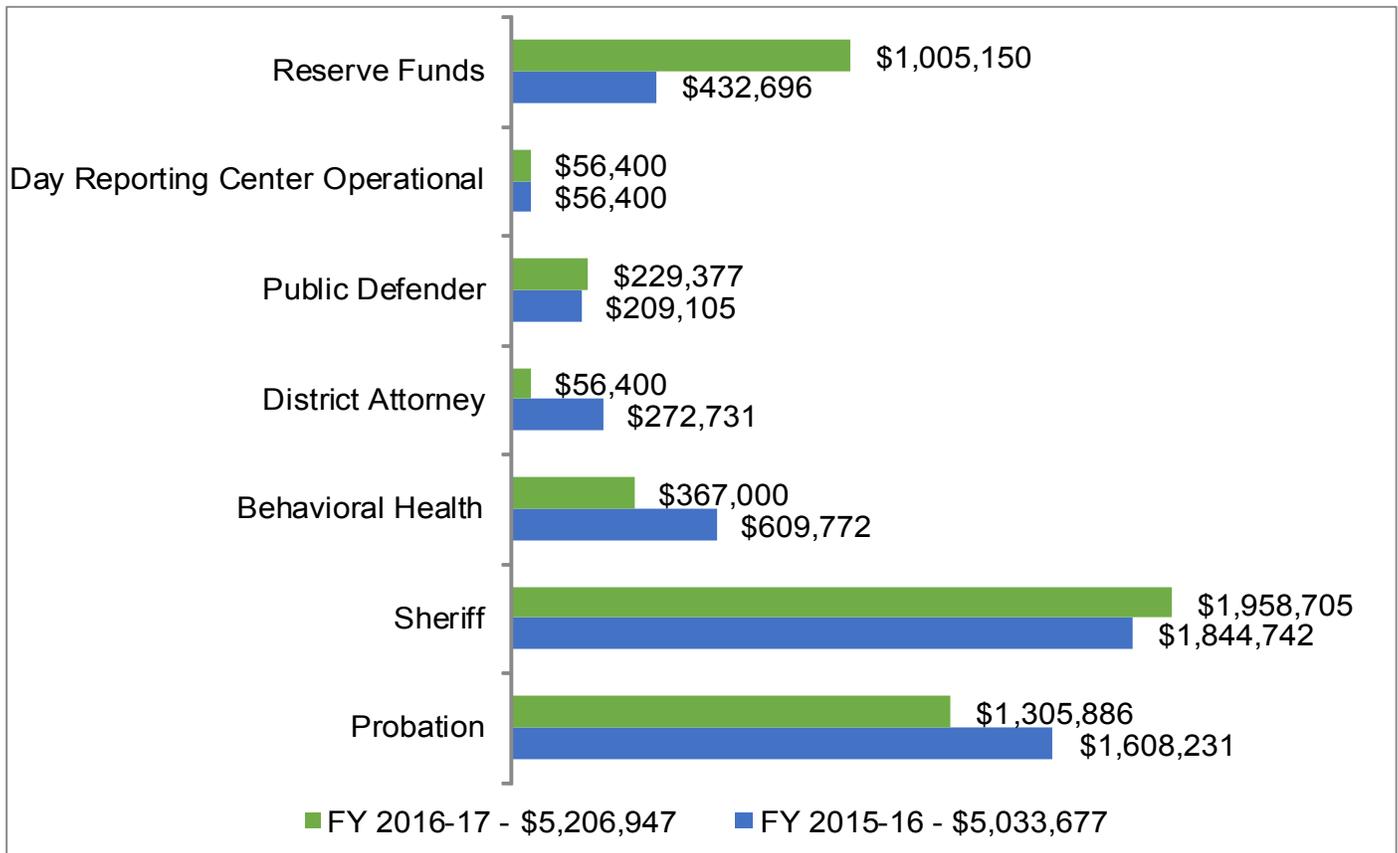
Measure: • With assistance from the Imperial County Office of Education, a full time teacher will prepare an academic case plan to help clients complete 135 required educational units to meet the requirements set by the state of California to obtain a High School Diploma.

Goal: Continue to offer services to the Veteran population

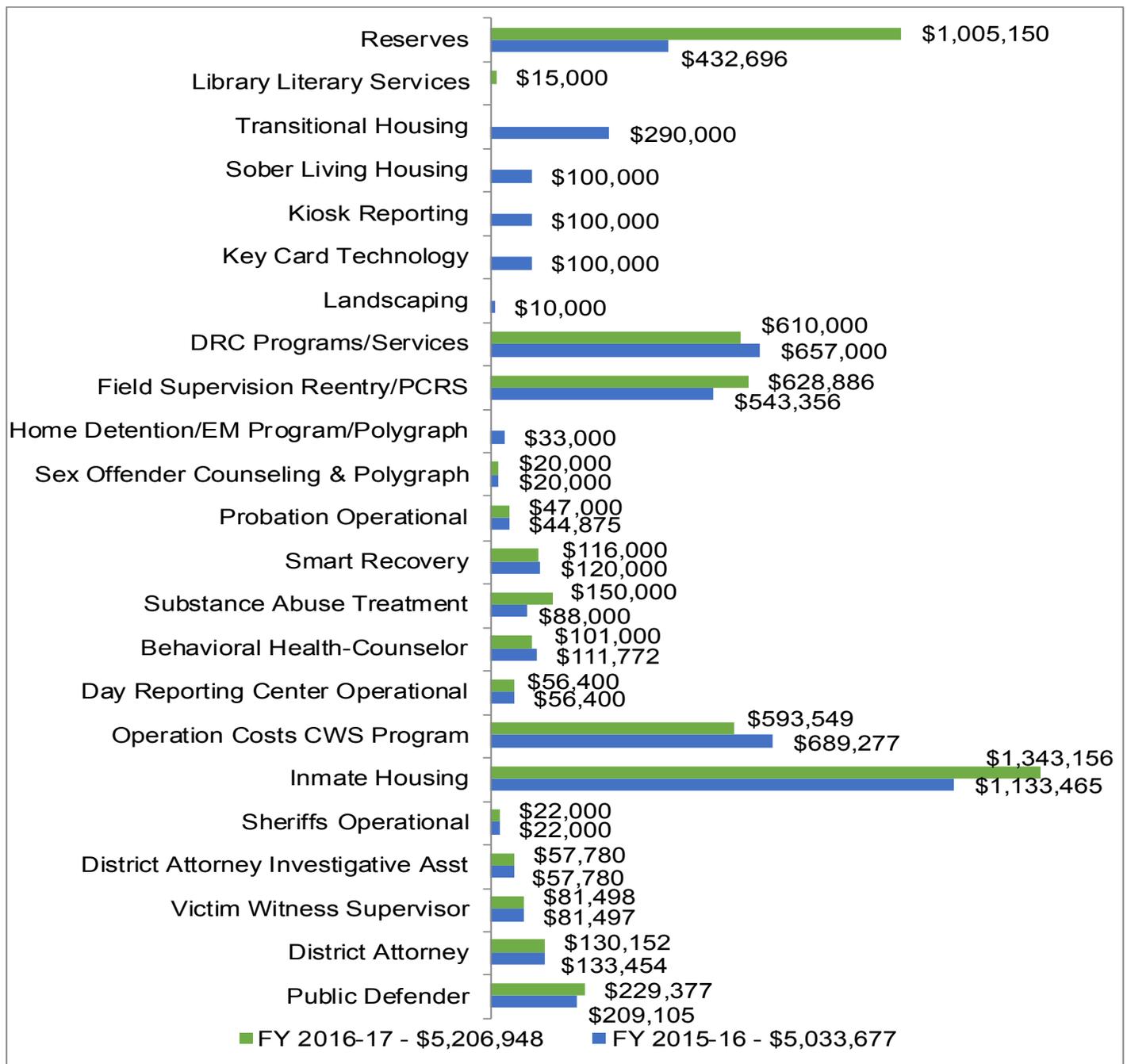
Objective: • Develop a partnership with the Imperial County Office of Veteran Affairs

Measure: • This partnership will enhance the level of services offered to the Veteran population involved in the criminal justice system.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocation to non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. GEO Reentry Services provides a bi-annual report pertaining to the outcomes of their services.

Does the county consider evaluation results when funding programs and/or services?

Yes. All previous evaluations of services are reviewed for effectiveness before any funding is approved.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

- Substance Abuse outpatient treatment and education
- SMART Recovery
- TESS jail program
- Sober living and emotional wellness homes
- McAllister Residential Treatment facility (San Diego)

What challenges does your county face in meeting these programming and service needs?

As program and services have been added, additional funding is needed to continue to develop, implement and increase services such as mental health programs, GED programs, literacy programs, along with residential and sex offender services. New programs have been identified that will enhance the ability for participants to rehabilitate and reduce their criminogenic needs.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The development of innovative services and programs has been made to improve the programmatic needs in promoting public safety. In the area of the sex offender population, specialized counseling and polygraphing is offered along with cognitive behavioral therapy to provide therapeutic services to individuals who are required to participate in a recovery program that meets their specific needs. For participants serving county prison time who have criminogenic and mental health needs, the Inmate Mental Health subcommittee has been created to identify programs and services that are responsive to the needs of clients living with a mental illness. Other programs and services continue to be evaluated to ensure that the programs are consistent with Evidence Based Practices and relevant to the needs identified in participant's assessments.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Programs providing services at the Day Reporting Center have produced positive outcomes for the population they serve:

The GEO Group Inc. has been successful in facilitating four program graduations during the last two years in which they average 18 participants completing each module. The enrollment of probationers in the GEO Program has increased to 70 participants as an effort to meet the increased need to serve the population. Added this past year through a contract with CDCR were and ten program slots for parolees released from state prison.

Employment and educational placement is currently at 40% of those enrolled in the GEO Program. A partnership with New Creations, a local faith –based organization, has been successful in enrolling 34 participants in the statutorily mandated 52 week Batterer’s Program. During their first year of operation at the Day Reporting Center, this certified program has added a second class to meet a growing number of participants. In November of 2016, New Creations celebrated their first year of conducting classes at the Day Reporting Center. Imperial County Behavioral Health Services have also been providing direct assistance to probationers in which participants are assessed and referred for services that best meet their needs and assist in increasing their opportunities for rehabilitation. This includes referrals to residential treatment facilities, counseling, and community based outpatient substance abuse services.

The Inside/Out College program is the first of its kind in the State of California. Since implementation in 2014, the program has offered five college courses with the students consisting of 15 incarcerated individuals and 15 junior college students. During the past year the Inside/Out program was awarded the prestigious 2016 CSAC Challenge award for its innovation and dedication to building success between education and corrections.

Also in 2016, the Day Reporting Center hosted their first Adult Re-entry Summit. The Summit was geared towards the adult probation and incarcerated client population. Attendees received information with regard to medical, education, and employment opportunities from local agencies. Relevant breakout sessions were also offered which included child support assistance, behavioral health assistance, and how to expunge one’s criminal record. A former major-league soccer provided a motivational message to the group on how past life struggles can assist in the rehabilitation and success towards one’s future. The second Adult Re-entry Summit is scheduled for March, 2017.

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Community Corrections Partnership Membership
(October 21, 2016)

Jeffrey L. Thomson
Chief Probation Officer

Judge Dean T. Stout
Presiding judge or designee

Kevin Carunchio
County supervisor or chief administrative officer or designee

Thomas Hardy
District Attorney and Victims' Interests

Kristine Eisler
Public Defender

William Lutze
Sheriff

Ted Stec
Chief of Police

Jean Turner
Department of Social Services

Marilyn Mann
Department of Employment and Alcohol and Substance Abuse Programs

Gail Zwier
Department of Mental Health

Lisa Fontana
Office of Education

Misti Clark
Community-based organization

The CCP meets bi-monthly

Inyo County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Implement a case management system (CMS) for Probation and District Attorney (DA).

Objective: • Implement a robust CMS to collect data, measure outcomes, and case management.

Progress: Both the DA and Probation have implemented new case management systems.

Goal: Sustain alternative sentencing programs, treatment programs, and offender supervision.

Objective: • Keep jail population under 99 inmates.
• Expand treatment programs within the jail.
• Work with re-entry coordinator for the supervision and case management of the realigned population.

Measure: • Jail population.
• Re-entry case plan.

Progress: The jail population has remained under 99 inmates. Every inmate who will be released on supervision leaves with a case plan developed by the inmate with assistance of the re-entry coordinator.

Goal: Expand the inmate worker program.

Progress: The inmate worker program was revised to include the realigned population.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Implement a re-entry court.

- Objective:**
- Work with Superior court and other stakeholders to implement a re-entry court designed similar to the existing Drug Court.
 - Develop a re-entry team consisting of Probation, HHS, Re-entry Coordinator, District Attorney, and other key stakeholders.
 - Direct appropriate offenders, who will be released from custody on supervision, to the re-entry court in order to help offenders find housing and employment in an effort to reduce recidivism.

- Measure:**
- Number of offenders ordered to re-entry court.
 - Number of new crimes committed while in the re-entry program.
 - Number of re-entry participants who become employed.

Progress: Re-entry Court was implemented in September 2016.

Goal: Integration of stakeholder case management systems.

- Objective:**
- Integrate case management systems between the DA and Probation.
 - Integrate CMS between DA and Court.
 - Integrate CMS between Probation and Court.

- Measure:**
- Timely information flow between the stakeholders.
 - Fewer court delays from initial referral to sentencing for the adult and juvenile populations.

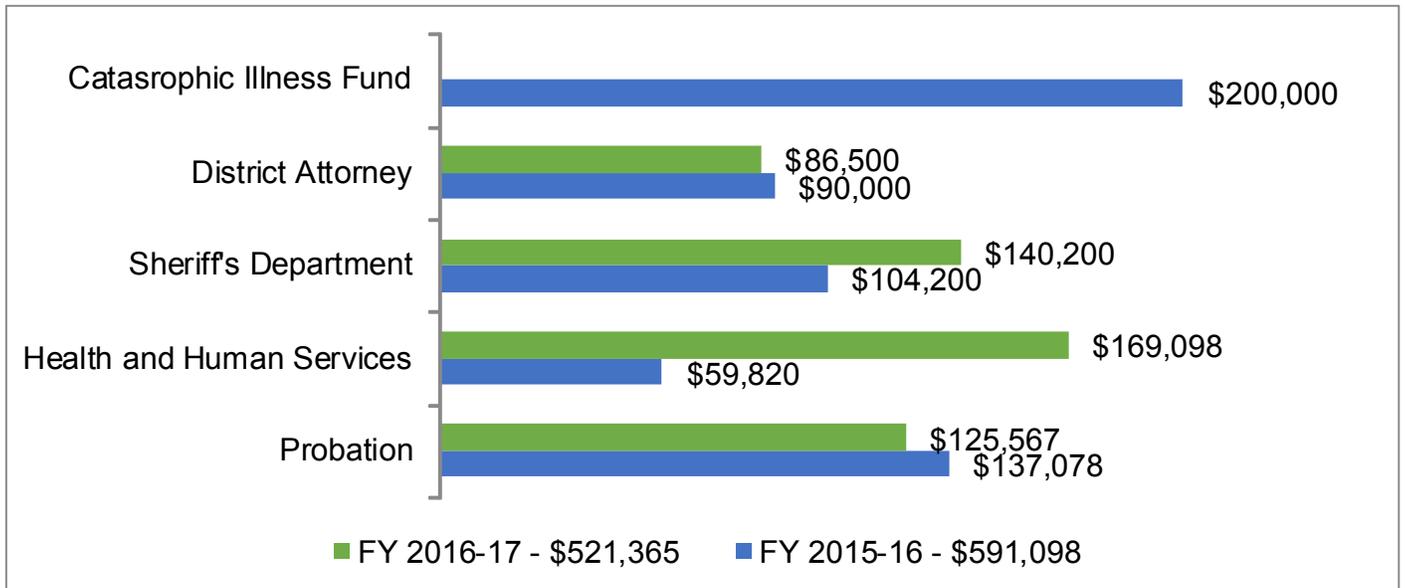
Progress: Probation, DA, and Court are in the beginning stages of integration working with the individual vendors.

Goal: Employment Program.

- Objective:**
- Work with local employers to provide jobs to the realigned population.

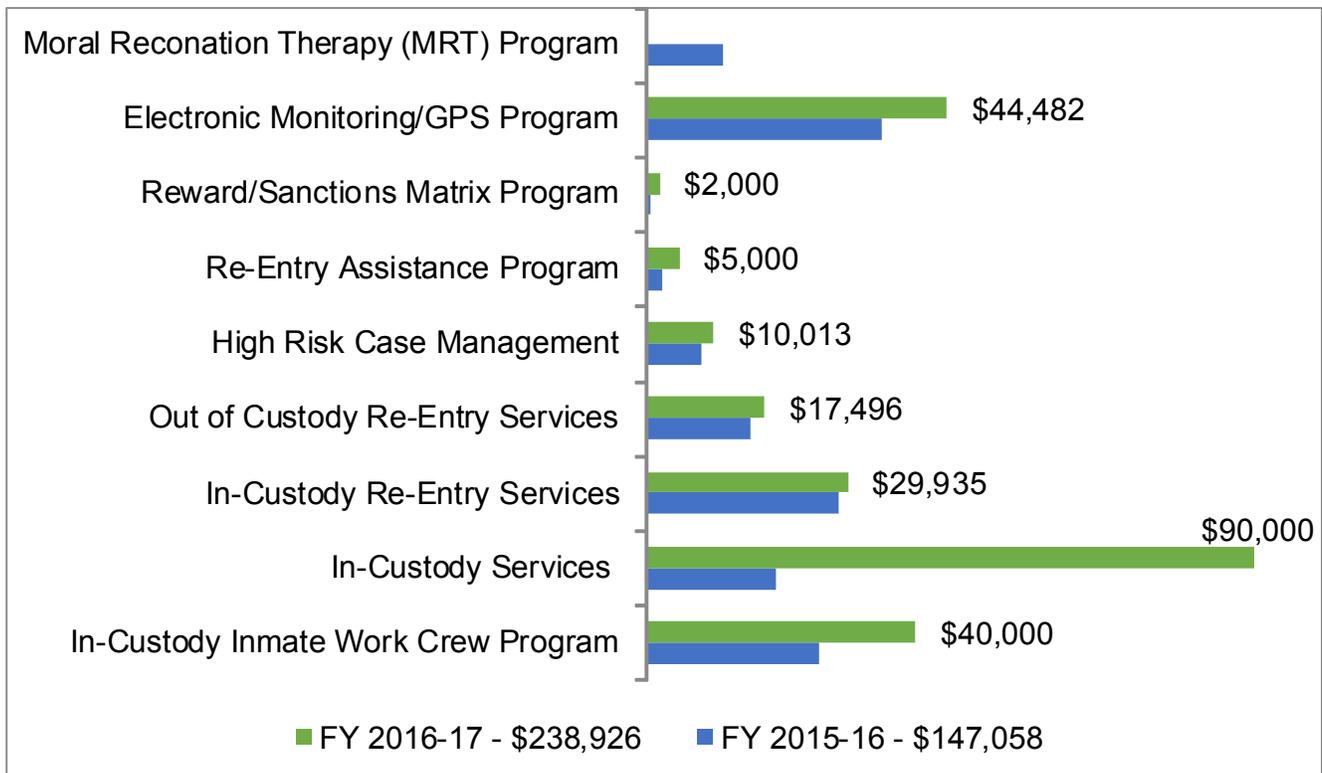
- Measure:**
- Number of jobs provided to realigned population.
 - Number of realigned population with a job for less than 6 months.
 - Number of realigned population with a job for more than 6 months.
-

FY 2015-16 and 2016-17 Budget Allocations



Inyo County does not allocate a specific amount of funds to any one Department. Instead, each Department develops a budget that is approved by the Board of Supervisors each year. Funds are distributed to each Department as expenditures are made. These expenditures are approved by the CCP Executive Committee Chair prior to disbursement.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocation to non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No. In the past we have had capacity issues to evaluate programs. As our case management systems provide better information our ability to evaluate programs will get better. If we determine that a program is not producing the results that we want, we will discontinue the use of that particular program.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

We would like to better understand your 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?

The county's Health and Human Services-Behavioral Health treatment services provide limited weekly service in the Jail to inmates. CCP currently is funding and recruiting for a jail psychotherapist who will be dedicated to the realigned population. Additionally, county Health and Human Services offer parenting classes to inmates, as well as MediCal outreach and enrollment.

What challenges does your county face in meeting these programming and service needs?

Recruitment and retention of licensed professionals willing to work in a custody setting has always been difficult. Low "actual" numbers of individuals, but with very high needs, make sustaining some programs difficult. Fewer community based organizations who work directly with the criminal justice offender population puts a heavier burden on county operations. Fewer numbers of established programs to "add" resources to instead of having to build a new program from the ground up and having the resources to do that.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Our first plan outlined some general and broad goals to accomplish. While it was a great guideline, we have come to realize that in order to make progress, we needed to develop fewer, yet specific and focused goals, that we are able to track and measure outcomes for.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Our re-entry program within the jail has been successful in preparing mandatory supervision (MSO) sentenced inmates to reintegrate in the community. They all have case plans, the opportunity to enroll in MediCal, and appointments set up with social services when needed. Every MSO has a behavior needs assessment completed prior to their release. A re-entry coordinator, funded by AB109 funds, and a probation officer are responsible for this program.

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Community Corrections Partnership Membership
(October 21, 2016)

TR Merickel
Chief Probation Officer

Terry McNally
Presiding judge or designee

Leticia Perez
County supervisor or chief administrative officer or designee

Lisa Green
District Attorney

Konrad Moore
Public Defender

Donny Youngblood
Sheriff

Greg Williamson
Chief of Police

Dena Murphy
Department of Social Services

Teresa Hitchcock
Department of Employment

Bill Walker
Department of Mental Health

Alison Burrowes
Alcohol and Substance Abuse Programs

Christine Lazard-Frazier
Office of Education

Tom Corson
Community-based organization

Linda Finnerty
Victims' interests

The CCP meets quarterly

Kern County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide funding opportunities for community-based organizations to provide re-entry services to the criminal justice population in Kern County.

Objective:

- Provide an open, fair, and competitive process for offender re-entry services.
- 100% of participants will receive screening for substance use disorder treatment.

Measure:

- Number of participants enrolled in substance use disorder treatment.
- Number of participants completing substance use disorder treatment.

Progress: Between January 2016 and October 2016, 70% of participants in substance use disorder treatment reported a decrease in the urge to use drugs. This is a 10% increase from the same period last year.

Goal: Incorporate evidence and research into program development and policymaking.

Objective:

- Develop framework for using the Kern County Results First model and national research when developing and/or expanding programs.
- Monitor investments and program outcomes.
- Evaluate currently funded programs and practices.

Measure:

- Incorporate strategies to utilize the Kern County Results First model and national research when developing and/or expanding programs into the Kern County CCP Implementation Plan.
- Incorporate strategies to conduct program evaluations, monitor programs, and monitor program outcomes into the Kern County CCP Implementation Plan.
- Periodically present findings and/or reports on the implementation of strategies outlined above.

Progress: Participation in program evaluations was incorporated into CBO contracts. In December of 2015, a presentation was made to the CCP regarding the Kern County Results First Project summarizing interim successes, the County's 6-year recidivism rate, the projected cost-effectiveness of adult criminal justice programs, recommendations, and next steps. County staff continue to work on developing a Results First full report which is expected to be completed in FY 16/17.

Goal: Begin implementing Kern County's Strategic Plan by improving/increasing the successful integration of the offender into the community.

- Objective:**
- Identify the current number of offenders who lack safe/stable housing.
 - Evaluate current risk-needs assessments to prioritize services needed to address the top criminogenic needs.
 - Develop comprehensive case plan for discharge planning to share with coordinating agencies.

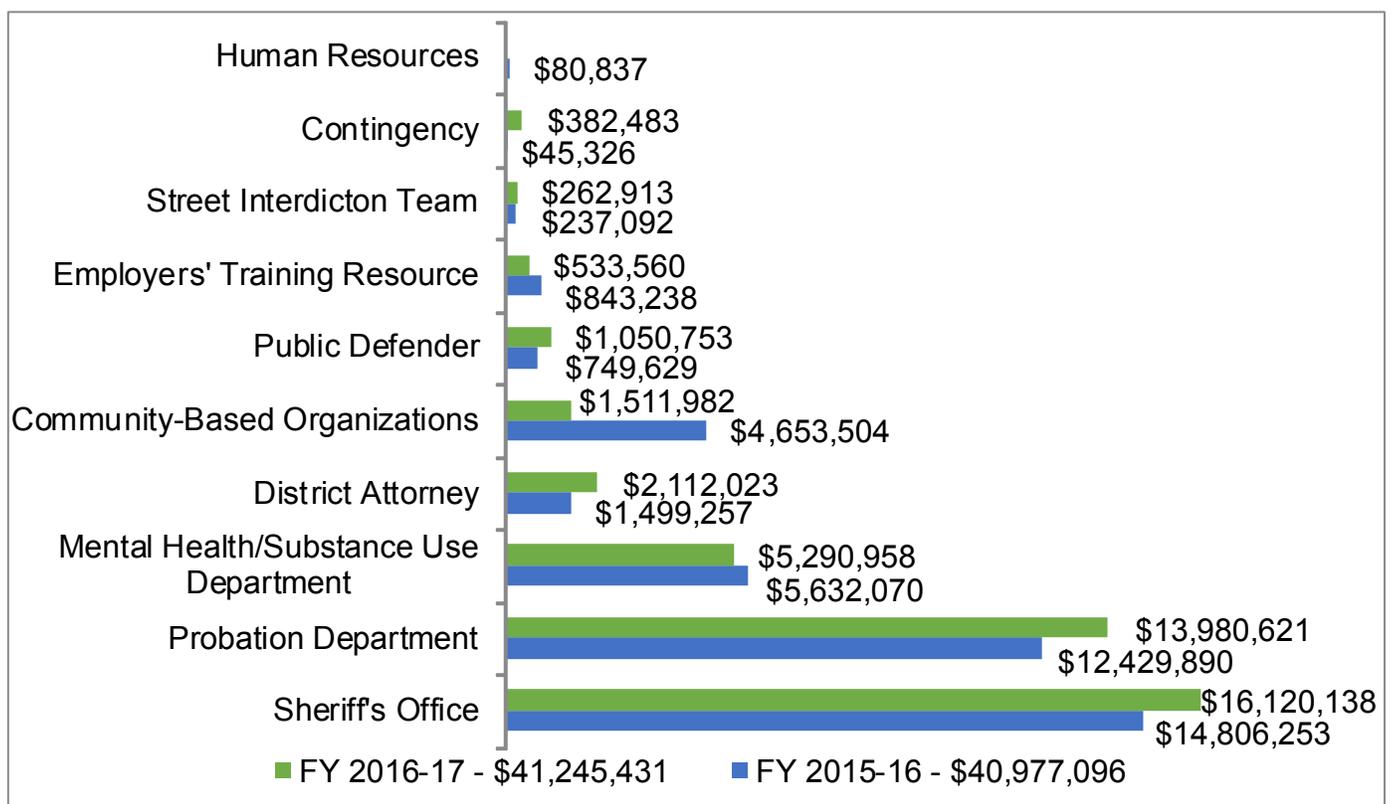
- Measure:**
- Baseline data will be defined/collected in order to measure successful outcomes.
 - Coordinating agencies, service providers and/or reentry programs will have shared assessment information.
 - Increase stable housing for offenders by 10% each year of the Strategic Plan.

Progress: Through the addition of new staff, CCP agencies are able to further the goals of program evaluations, accurate data collection, effectively monitoring community-based organizations, and an increase in searching for funding opportunities county-wide.

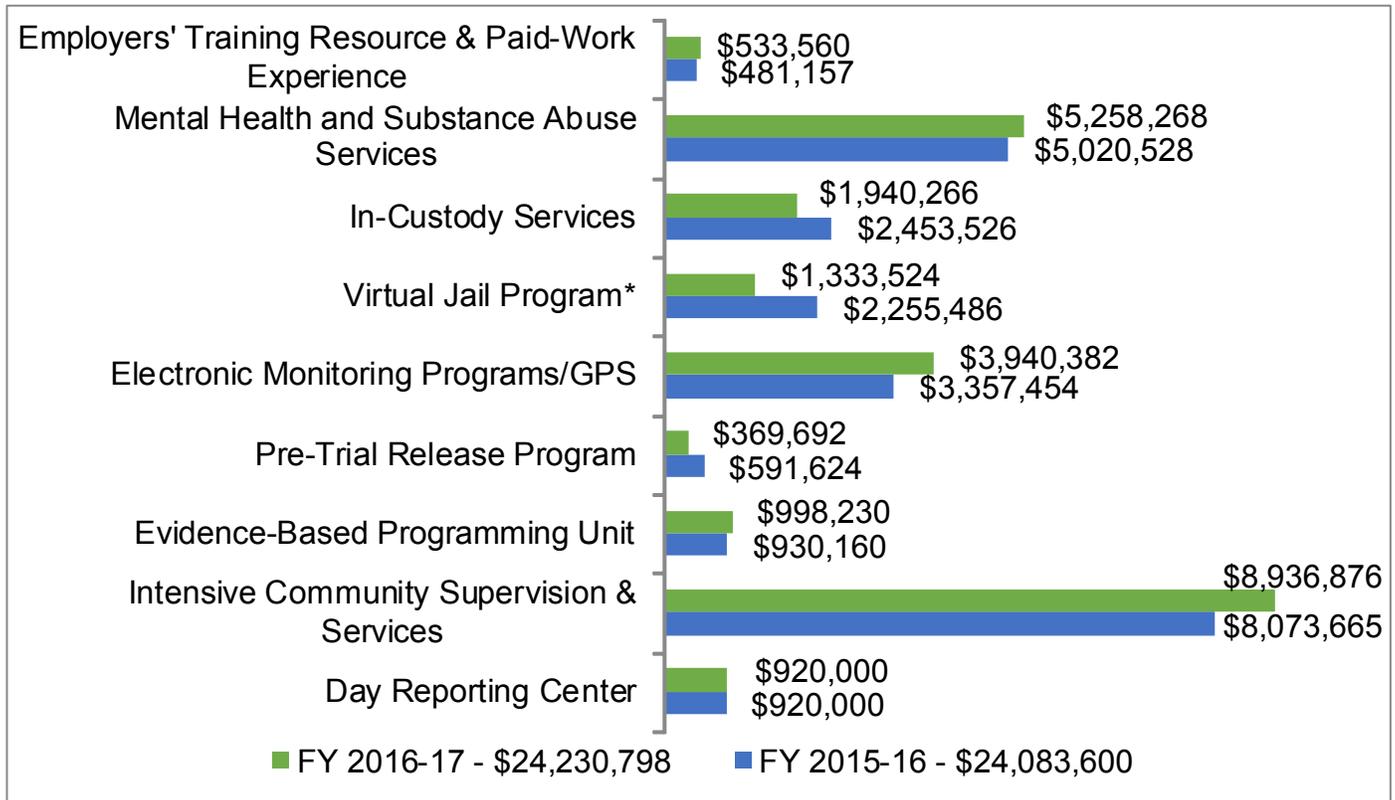
On November 30th, the CCP created an Ad-Hoc Planning Committee charged with developing an action plan to fully utilize the Strategic Plan and other significant county reports and research.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

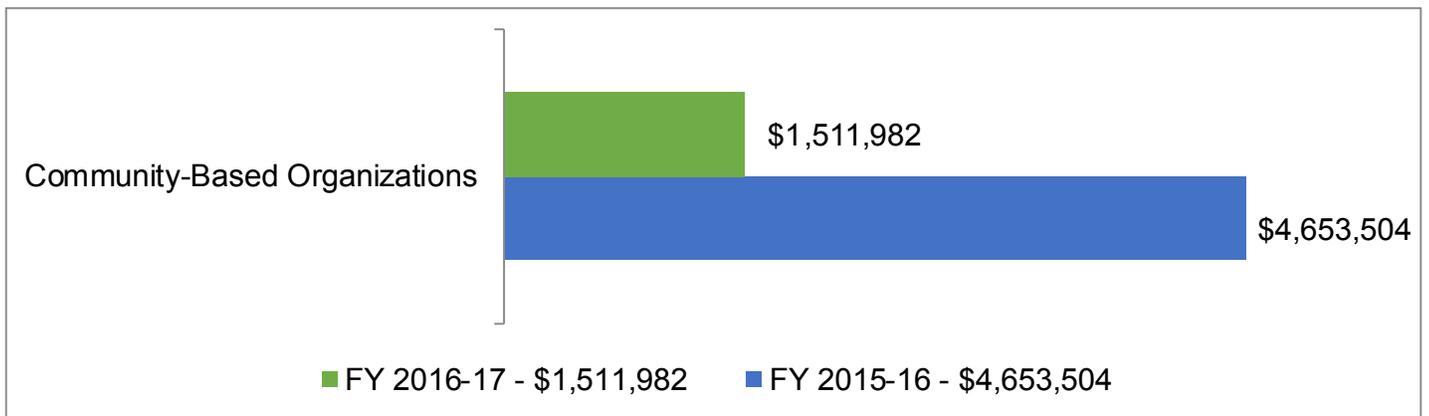


FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*Includes Sheriff's Parole and Work Release

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Day Reporting Center Evaluation Study – The recidivism rates of the Day Reporting Center (DRC) participants was investigated in a study by Kern County. The results of the study showed that the DRC program greatly reduces recidivism for high-risk offenders. In the study, three groups were examined. The groups included DRC graduates, individuals who participated in the program for at least 90 days without graduating, and a control group of individuals who did not participate in the DRC but had similar characteristics with program participants. Through the DRC, recidivism rates decrease which in turn saves a substantial dollar amount through a decrease in incarceration, prosecution, defense, courts, supervision, and victimization costs.

Results First Project – With the intent to provide information to policymakers to assist with programmatic decisions, in 2014 Kern County began participating in the Pew-MacArthur Results First Initiative (Results First). Through the Initiative, a comprehensive program inventory was developed, a cumulative Kern County recidivism rate was calculated, criminal justice costs specific to the County were generated, and this information was populated the Kern County Results First Model. Based on the results from the Kern County Results First Model, the average return on investment for Kern County evidence-based programs is \$7.43 per \$1.00.

Community-Based Organization (CBO) Monitoring – The CBO's that are contracted through the CCP provide a number of reentry services. These services include residential/transitional housing, transportation, substance abuse, vocational/educational, and case management services. The Sheriff's Office, Probation Department, and Mental Health Department coordinate to conduct CBO monitoring which involves on-site visits, monthly meetings, and CBO reviews. The development of a case management system for CBO's is currently underway. This case management system will assist with tracking participant demographics, services, outcomes, participant costs, and program quality.

RSAT Statistical Evaluation and Evidence Based Correctional Program Checklist – As part of its grant funded Residential Substance Abuse Program (RSAT), the Sheriff's Office is working with an academic partner to statistically evaluate the effectiveness of that program. Additionally, the program was evaluated in 2014 by the Board of State and Community Corrections using their Evidence-Based Correctional Program Checklist. The Sheriff's Office is working to apply the lessons learned from these evaluations to the ongoing improvement of all of its in-custody programs.

Does the county consider evaluation results when funding programs and/or services?

Yes. The results from the Day Reporting Center (DRC) Evaluation were utilized to increase services and crucial in justifying contract extension for an additional two (2) years along with doubling participant capacity from 200 to 400 per year. These results were also used to inform Probation's decision to open a Drug Day Reporting Center with a specific focus on substance use (the Drug Day Reporting Center is not funded through AB 109 funding).

Results First Benefit-Cost Analysis will be used to evaluate current and proposed programs. The purpose of the model is to determine if programs are cost beneficial and successful in increasing community safety.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41%-60%

We would like to better understand your 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?

Kern County Mental Health provides numerous services to AB 109 participants such as chronic and persistent mental illness and/or co-occurring substance use disorders, anger management, peer support systems, transitional housing needs, psychological trauma, and errors in reasoning or criminal thinking. Services also include linkages to physical health-care providers, community support systems and education/employment resources. The AB 109 programs that provide these services include both in-custody and outpatient post-release mental health and substance use disorder services. Additionally, the AB 109 Co-Response Teams, with KCSO and BPD respectively, consists of a Law Enforcement Officer and a member of MET. The MET members are senior-level, experienced members of MET. Both AB 109 Co-Response Teams spend most of their time in the field proactively visiting a prioritized list of AB109 individuals with mental health and/or substance use disorder issues. This joint response approach places the Law Enforcement Officer and the member of MET in the same vehicle for the first time in Kern County, increasing the level of collaborative crisis care services. Below are some prudent services provided to this population.

In-Custody Services:

- Stages of Change and Motivational Interviewing
- Seeking Safety
- Moral Reconciliation Therapy (MRT)
- Matrix

Outpatient Services:

- Adult Transition Team (ATT)
- Aggression Replacement Training (ART)
- In-custody Services listed above are continued in outpatient settings, maintaining a continuum of care

Crisis Services:

- Mobile Evaluation Team (MET)
- Psychiatric Evaluation Center/Crisis Stabilization Unit (PEC/CSU)
- Co-Response Teams

Substance Use Disorder (SUD) Outpatient Services:

- SUD services are organized into five levels of care. Each level is defined by eligibility criteria, treatment goal, and expected service package for each individual enrolled.

What challenges does your county face in meeting these programming and service needs?

Providing services to individuals located in a large county with rural, remote and isolated areas. Inability to increase programming and services due to lack of funding. A limited selection of qualified community-based organizations to meet the needs of offenders in Kern County. Finding stable, long-term, transitional housing.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Increased communication, collaboration and rapport with partner agencies, community-based organizations, and various groups.

Gathering and disseminating information, assessments, data, and resources.

Development of a county-wide criminal justice cost/benefit analysis.

The following is news article highlighting Kern County's commitment to community-based organizations:

"Programs for Transitional Offenders Get Big Boost", November 2, 2016.

http://www.bakersfield.com/news/breaking/programs-for-transitional-offenders-get-big-boost/article_2edd7640-85a9-53a1-b652-c0b5c6ddc101.html

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Day Reporting Center – The DRC provides various services for high risk offenders which include but are not limited to: cognitive behavioral therapy, counseling, drug testing, drug education, educational service, and employment services. The DRC has shown to reduce recidivism by 23% in DRC graduates compared to a control group of similar characteristics. The results of this local study are supported by the results from the Kern County Results First Model, which project a 24% recidivism reduction for this program. Please see the Kern County DRC Study and Results First Brief for more information. <http://www.kernprobation.com/ab109ccp-realignment/plans-and-reports/>

Matrix – The Matrix Model provides treatment for individuals with substance use disorders. The Model utilizes interventions such as cognitive behavioral therapy and motivational interviewing for treatment engagement and assisting in maintaining a substance-free lifestyle. The course teaches participants regarding issues surrounding addiction and relapse, receiving direction and assistance from a certified counselor, and familiarizing oneself with self-help programs. In addition, participants are drug tested to ensure sobriety. In Kern County, substance use disorder treatment requires outpatient, intensive, and residential services. In FY15/16, the Mental Health/Substance Use Department provided the Matrix Model to 2,170 participants.

Of this population, 245 individuals received Matrix services in-custody through collaborative programs between the Sheriff's Office and the Mental Health/Substance Use Department.

In-Custody Programs – In-custody programs like those provided by the Sheriff's Office have been demonstrated to have a positive impact on recidivism. The Results First model has projected that in-custody educational programs can reduce recidivism by 19%, in-custody vocational programs by 18%, and intensive, in-custody drug treatment by 14%. The in-custody programs that the Sheriff's Office provides include GED preparation, Life Skills, Parenting, Anger Management, Domestic Violence, Substance Abuse, Health, Art, Auto-body, Cafeteria and Food Services, Computer classes, and a Veterans' program. The Sheriff's Office also provides evidence-based programs such as Matrix, Thinking for a Change, and Moral Recognition Therapy. Validated assessment tools are used to place inmates into programs that directly address their criminogenic needs. Many of the programs previously listed are grant funded along with AB 109 funding for staff, supervision, supplies, and administrative costs for the programs. In FY15/16 these programs served a combined total of 4,238 participants.

Community-Based Sober Living Environments – The thirteen (13) Community-Based Sober Living Environments that are contracted with Kern County provide drug testing, require counseling, and aid participants in educational and employment attainment, all while providing a drug and alcohol free living environment. In FY15/16, these organizations saved 48,274 jail bed days and had 359 Program Completions while maintaining an 87% success rate.

In FY 15/16, 473 referrals were made by Sheriff and Probation for additional services. These services included Vocational training, Mentoring, Medi-Cal sign ups, GED education courses and a "Get your license back" program. These programs assist participants in overcoming barriers to self-sufficiency and help them in the achievement of their reentry plan goals.

Inter-department collaboration within the county is a valuable asset that is greatly utilized, particularly regarding CBO monitoring. The Sheriff's Office, Probation Department and Mental Health work in conjunction to execute monthly CBO meetings, monthly on-site visits, as well as individual meets between the three departments and CBO's to examine program successes and areas where greater support and services are needed.

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Community Corrections Partnership Membership
(October 21, 2016)

Kelly Zuniga
Chief Probation Officer

Jeffrey E. Lewis
Presiding judge or designee

Doug Verboon
County supervisor or chief administrative officer or designee

Keith Fagundes
District Attorney

Marianne Gilbert
Public Defender

David Robinson
Sheriff

Darryl Smith
Chief of Police

Sanja Bugay
Department of Social Services

John Lehn
Department of Employment

Mary Anne FordSherman
Department of Mental Health and Alcohol and Substance Abuse Programs

Tim Bowers
Office of Education

Jeff Garner
Community-based organization

Julia Patino
Victims' interests

The CCP meets annually

Kings County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Continue to implement a system of alternative to incarceration for pre- and post-convictions.

Objective: • Increase alternatives to incarceration programs for both pre- and post-convictions.

Measure: • Recidivism rates for non-sex offenders, the non-violent offenders, and non-serious offenders.
• Continue to track the data to measure the success of the alternative programs.

Progress: Expansion of live-in rehabilitation beds from 18 to 49 and the Day Reporting Center (DRC) is allowing Kings County to explore viable options to incarceration.

Goal: Collaborate with local agencies to provide local resources to Post-Release Community Supervised offenders.

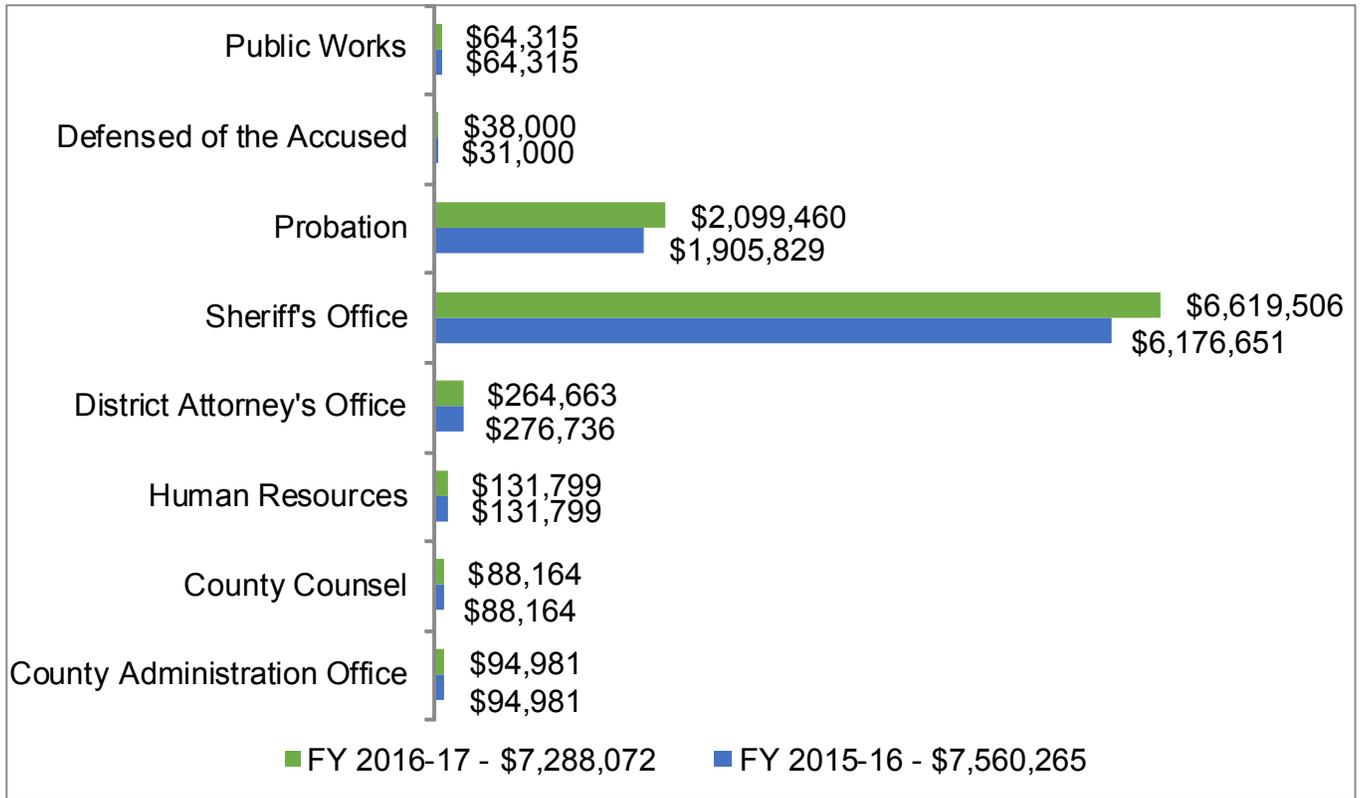
Objective: • Identify and establish increased collaboration with local agencies.
• Increase the local resources for Post-Release Community Supervised offenders.

Measure: • Number of offenders sentenced to alternative and probation programs.
• Number of offenders sent to state prison and local custody.

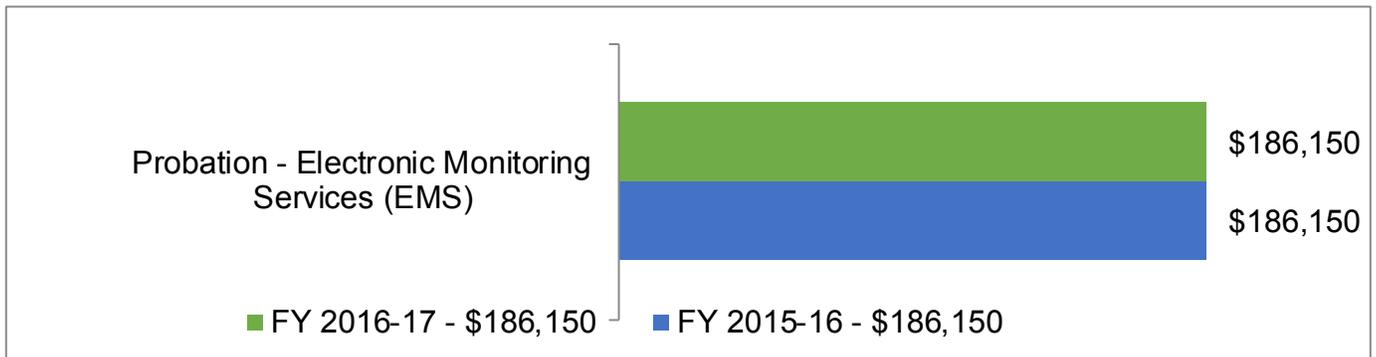
Progress: 432 Offenders were on electronic monitoring. 108 offenders are in residential treatment program, and attended the Day Reporting Center.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocation to non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

Yes. Providers providing outcome data are preferred when funding programs.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average Daily Population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than %20

We would like to better understand your 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?

Mental Health services are provided by Kings View through a contract with Behavioral Health. There are now 49 live-in substance abuse treatment beds that are provided by a Community Based Organization (CBO), which is an increase from 18 beds. A DRC provides treatment to both male and female participants, and there were 108 offenders participated in FY 2015/16.

What challenges does your county face in meeting these programming and service needs?

There are insufficient live-in programs. There is a lack of ability to properly track outcomes, therefore limiting our ability to build the programs effectively.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

N/A

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

N/A – We are entering into an evaluation phase.

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Community Corrections Partnership Membership
(October 21, 2016)

Rob Howe
Chief Probation Officer

Stephen O. Hedstrom
Presiding judge or designee

Carol Huchingson
County supervisor or chief administrative officer or designee

Don Anderson
District Attorney

Angela Carter
Public Defender

Brian Martin
Sheriff

Brad Rasmussen
Chief of Police

Kathy Maes
Department of Social Services

Vacant
Department of Employment

Kevin Thompson
Department of Mental Health and Alcohol and Substance Abuse Programs

Brock Falkenberg
Office of Education

Dr. Robert Gardner
Community-based organization

Debbie Wallace
Victims' interests

The CCP meets semi-annually

Lake County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Increase the number of clients receiving, participating in, and completing evidence-based programming services.

Objective:

- Improve the effectiveness of programs offers by expanding access to clients.
- Add and expand offered programs.

Measure:

- Number of clients enrolled, attending and completing programs.
- Recidivism rates of clients completing program versus clients either not enrolled in programs or not completing them.

Goal: Improve the continuum of services from in-custody, to supervised, to discharge.

Objective:

- Continue to add and improve in-custody services.
- Increase the use of full residential programs as part of the continuum.

Measure:

- Success and recidivism rates of clients receiving services throughout custody and supervision versus those whose services were interrupted at any point.

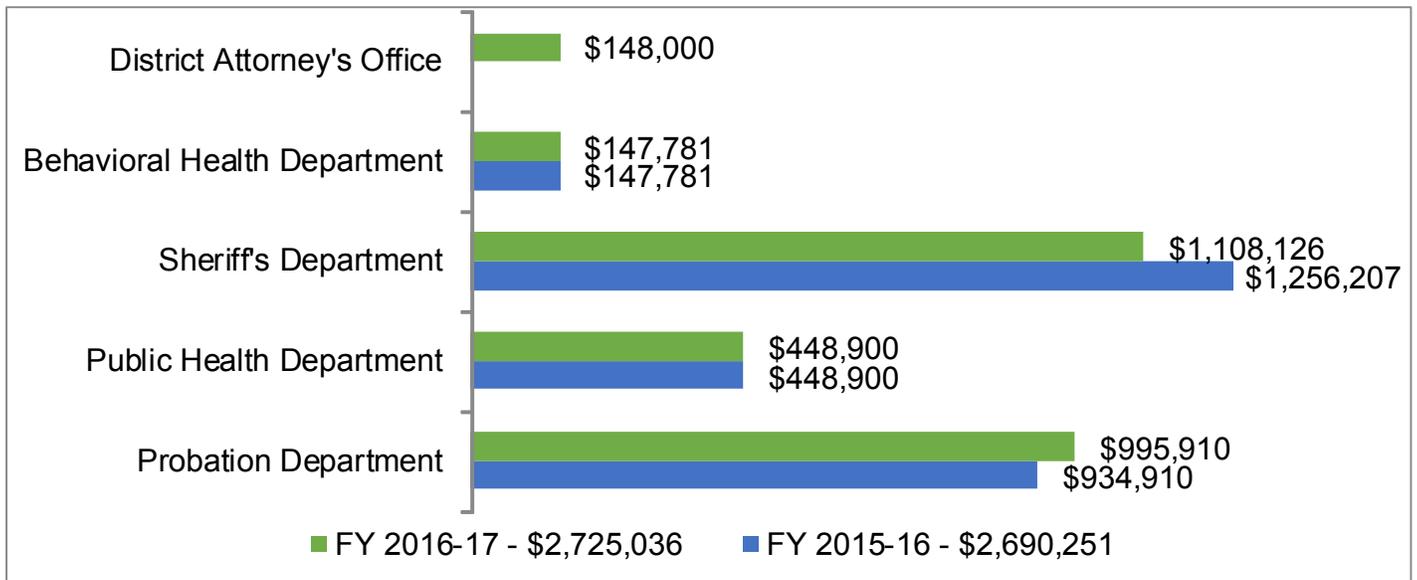
Goal: Improve supervision through the use of electronic monitoring.

Objective:

- Increase the use of electronic monitoring in the Alternative Work Program.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

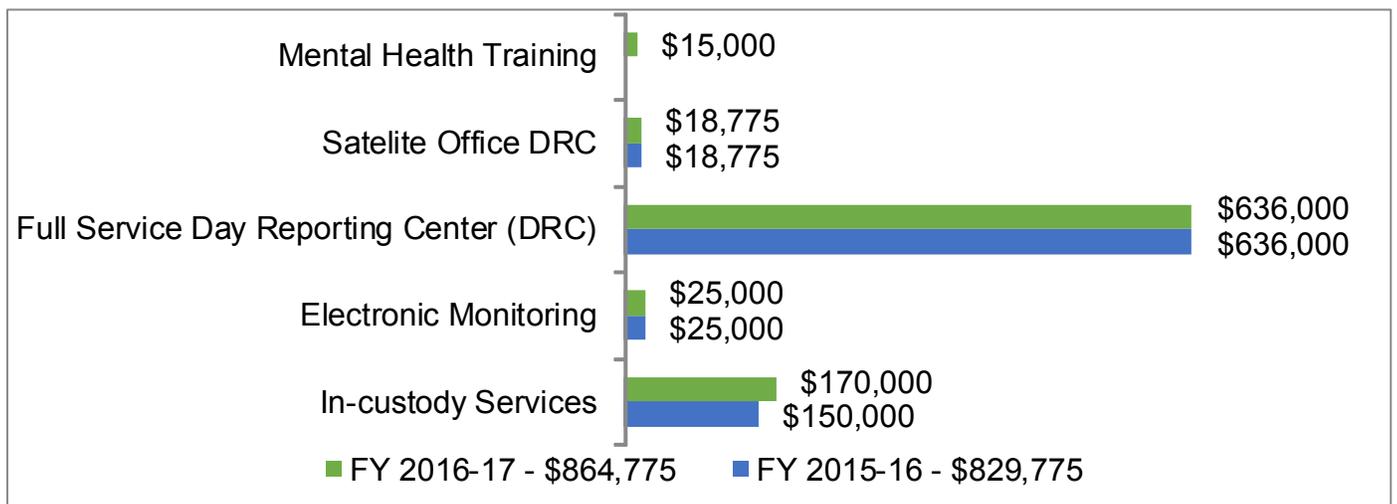
FY 2015-16 and 2016-17 Budget Allocations



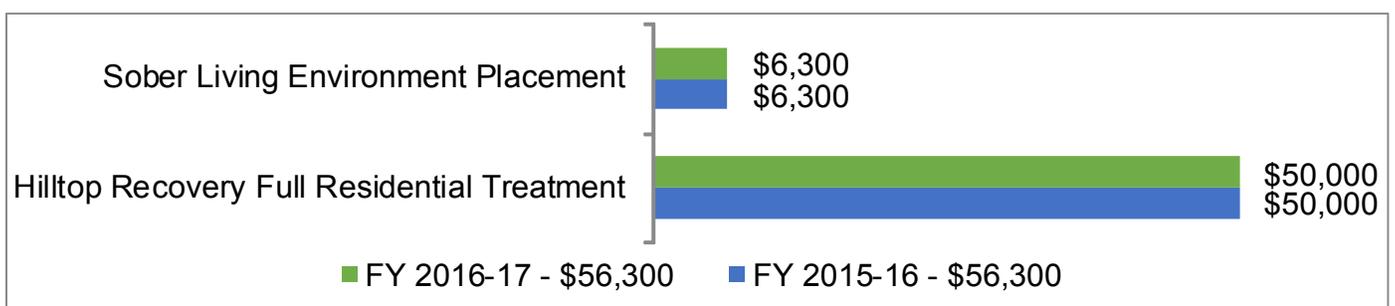
FY 2015-16 Allocated from carry-over funds: \$97,547

FY 2016-17 allocated from carry-over funds: \$123,681

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. By statistically tracking the successes of those clients that participate versus those that do not.

Does the county consider evaluation results when funding programs and/or services?

Yes. Proposed services are evaluated by the CCP Executive Committee prior to approval of funding of those programs.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population and Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41% to 60%

We would like to better understand your 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?

Public Safety Realignment provides funding to Behavioral Health for a Mental Health Specialist, Substance Abuse Counselor and a portion of a Staff Psychiatrist. These positions are dedicated exclusively to clients either in-custody or at our DRC. Funding is also provided for full residential treatment, substance abuse sober living environment, a full service DRC and a remote check-in DRC.

What challenges does your county face in meeting these programming and service needs?

Our Challenge continues to be getting our clients to participate and take full advantage of the programs we offer.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We are still in the process of growing our own, Probation managed, DRC. This has allowed us to tailor our programs to our clients while increasing our own staff.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We believe our, Probation Managed, Day Reporting Center (DRC) is our most promising program. Since January 1, 2016, we have had 32 individuals enrolled in the DRC and of the 32 enrollees; we currently have a group of 11 steady participants. Our targeted growth plan is to have 30 consistent participants within the first 5 years. We offer Moral Reconciliation Therapy (MRT), Alcohol and Other Drug Services (AODS) counseling, Dialectical Behavior Therapy (DBT), Mental Health Counseling, Anger Management, Job Readiness and Behavioral Health Trauma Groups.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We believe our, Probation Managed, Day Reporting Center (DRC) is our most promising program. Since January 1, 2016, we have had 32 individuals enrolled in the DRC and of the 32 enrollees; we currently have a group of 11 steady participants. Our targeted growth plan is to have 30 consistent participants within the first 5 years. We offer Moral Reconciliation Therapy (MRT), Alcohol and Other Drug Services (AODS) counseling, Dialectical Behavior Therapy (DBT), Mental Health Counseling, Anger Management, Job Readiness and Behavioral Health Trauma Groups.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Jennifer Branning
Chief Probation Officer

Hon. Michele Verderosa
Presiding judge or
designee

Richard Egan
County supervisor or
chief administrative
officer or designee

Stacey Montgomery
District Attorney,
Community-based
Organization and Victims'
interests

Rhea Giannotti
Public Defender

Dean Growdon
Sheriff

Jim Uptegrove
Chief of Police

Melody Brawley
Department of Social
Services and Department
of Employment

Pam Grosso
Department of Mental
Health and Alcohol and
Substance Abuse
Programs

Patti Gunderson
Office of Education

The CCP meets monthly

Lassen County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Restructure and maintain a DRC for use by offenders referred by Probation and the Sheriff's Office.

- Objective:**
- To provide efficient and adequate services for offenders at the DRC.
 - To increase the number of offenders participating in the DRC.
 - To increase the number of offenders from Probation and the Sheriff's Office who are referred to the DRC.

- Measure:**
- The number of offenders referred to the DRC.
 - The number of new convictions the DRC participants receive.
 - The number of new services the DRC participant is receiving since participating in the DRC.

Progress: The DRC is open and accepting referrals. There have been 22 new referrals since January 2016. The DRC is linking participants to other service agencies and participants are receiving services within the DRC.

Goal: Establish a data committee and develop a local plan for data collection with data definitions.

- Objective:**
- Establish a data work group.
 - Establish data points and methods for collection.
 - Establish process for compiling data.

- Measure:**
- Local data points and measure identified.
 - Local data collection methods identified.
 - Local data collection plan completed.

Progress: Established a data workgroup that met monthly to discuss and establish data collection methods. Currently working towards Release of Information to be able to collect data and a database to store it.

Goal: Expand use of alternatives to incarceration.

- Objective:**
- Use assessment tools in determining eligibility and to maintain public safety.
 - Use electronic monitoring for low-risk offenders to reduce job loss and offenders entering and leaving the facility each day (work/school furlough and trustees).
 - Use inpatient treatment programs for low-risk offenders to reduce recidivism and increase vocational training opportunities for offenders serving an alternative sentence.

- Measure:**
- Number of electronic monitoring days rather than jail bed days.
 - Number of inpatient treatment bed days rather than jail bed days.
 - Number of violations of the terms of participation in alternative programs.

Progress: Sheriff's Office alternative custody personnel are utilizing the Ohio Risk Assessment System (ORAS) to screen offenders for alternative to incarceration program eligibility. During FY 2015/2016, 34 people served their jail sentences in alternative to incarceration programs, including electronic monitoring, residential drug treatment programs, and other residential programs. The number of jail bed days avoided by the program is approximately 3,880. Of those, approximately 620 were spent in residential treatment programs. The number of program failures during that period were 5.

**The Lassen County Probation Department is utilizing the ORAS to assess pre-trial offenders for pre-trial release.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Maintain and improve the Lassen County Day Reporting Center and the provided services for those referred by Lassen County Probation and the Sheriff's Office.

- Objective:**
- To provide efficient and adequate services for offenders at the DRC.
 - To establish a multiagency database and collect data within the data workgroup.

- Measure:**
- The number of offenders referred to the DRC.
 - To have clearly defined data definitions.
 - The number of successful participants discharged from the DRC (i.e., have a job, successfully released from Alternative Custody Supervision, successfully terminated from Probation, etc).
-

Goal: To implement evidence-based practice and supervise the PRCS caseload using those methods.

- Objective:**
- To maintain current ORAS assessments on the PRCS caseload and develop case plans to lower risk to recidivate and achieve the desired outcomes.
 - To implement the Behavioral Matrix and utilize the different levels of sanctions and incentives.
 - Increase successful completion of PRCS supervision with minimal violations.

- Measure:**
- The number of current assessments for the PRCS caseload.
 - The number of incentives versus the numbers of sanctions.
 - The number of formal violations, new charges, and successful versus unsuccessful terminations for the PRCS caseload.
-

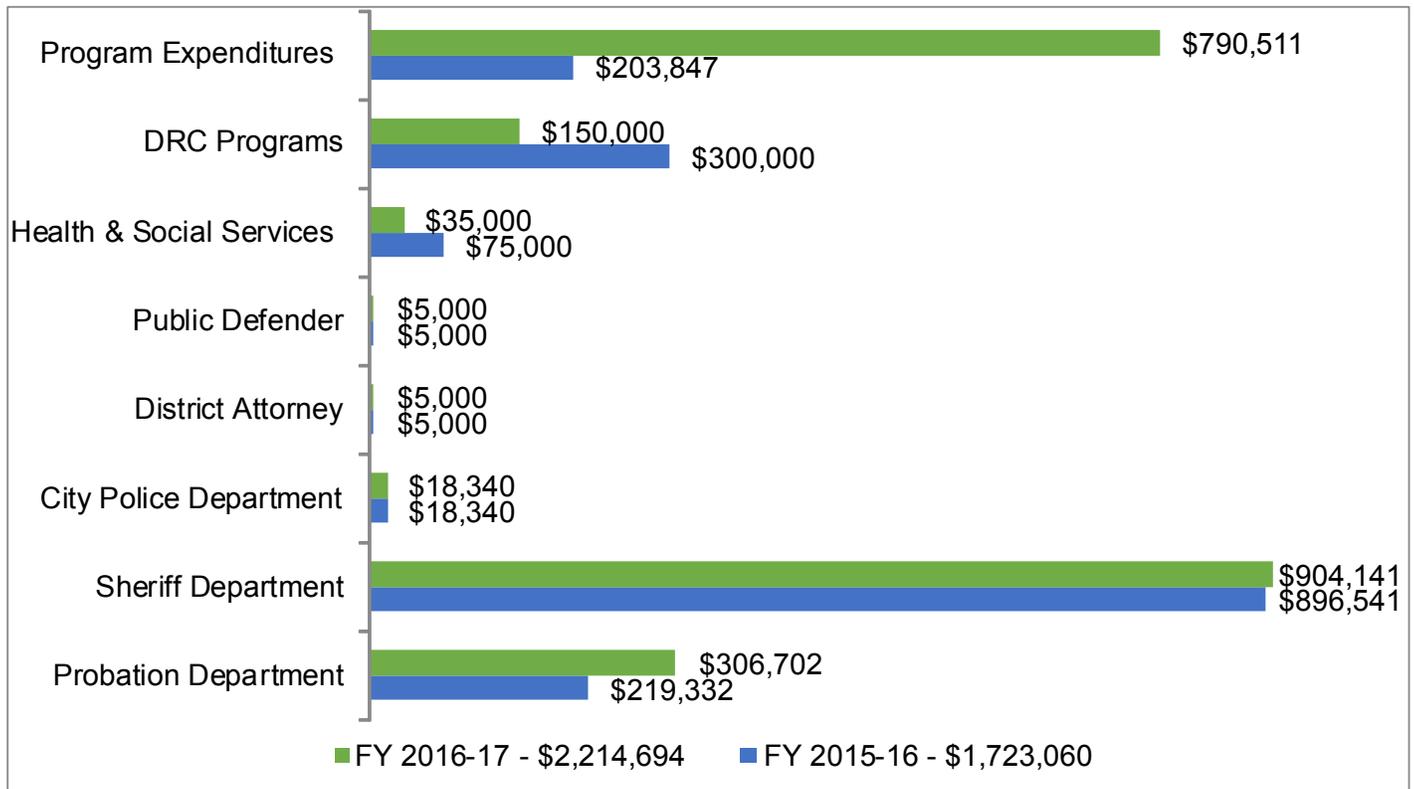
Goal: To reduce recidivism rates of offenders sentenced to serve time in the Lassen County Jail.

- Objective:**
- Continued expansion of alternative to incarceration programs, to include electronic monitoring, residential treatment, and agreements with agencies in other jurisdictions.
 - The addition of a full time Program Coordinator in the Jail will expand the program and treatment opportunities for the incarcerated, and improve the transition from custody, to the Day Reporting Center, and to the community.
 - Improve the employment rates of the incarcerated upon release. Vocational training and job skills training will be expanded.

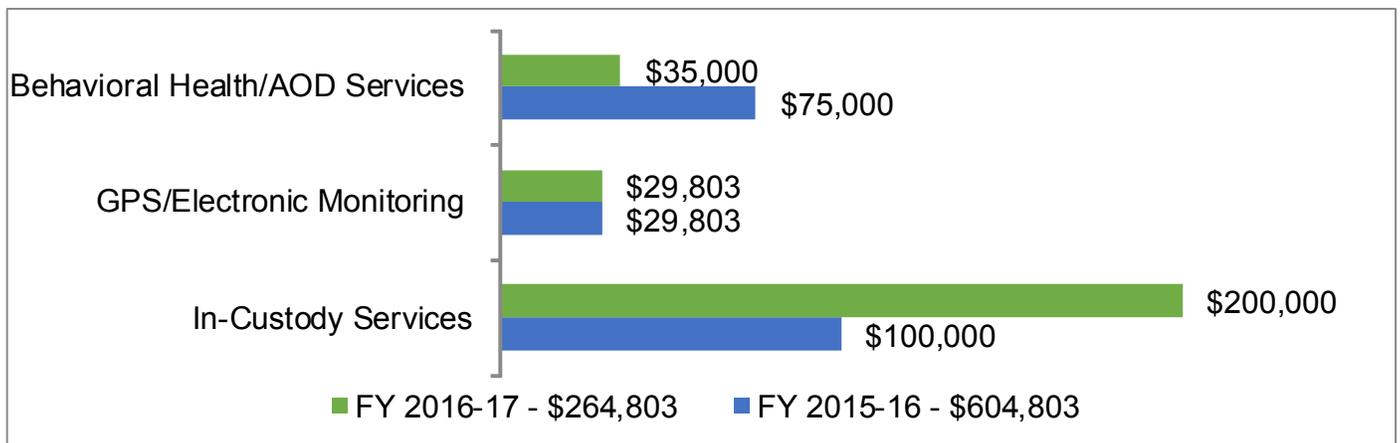
- Measure:**
- Number of alternative to incarceration days vs. jail bed days.
 - The number of program and treatment hours completed by the jail population.
 - The number of vocational and job training hours completed by in-custody offenders.

Progress: We have a county motor-pool program, in which offenders learn basic vehicle maintenance, as well as a culinary program that provides basic culinary skills. These programs will be more structured with the addition of the Program Coordinator. Additional vocational programs will be added.

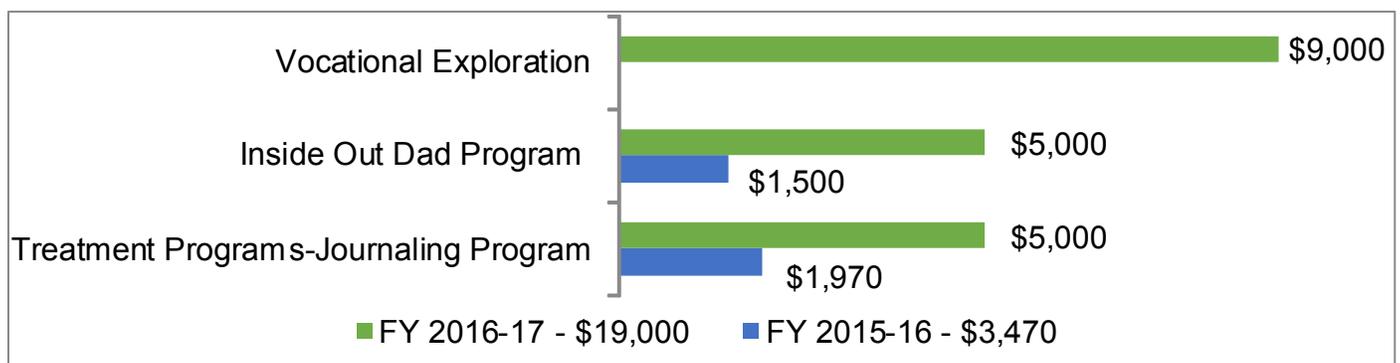
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Evidence-based programs come with evaluations to measure the effectiveness of the program. Data is collected to evaluate the effectiveness of the other programs that are not evidenced-based.

Does the county consider evaluation results when funding programs and/or services?

Yes. Data is assessed and effectiveness is evaluated. Ineffective programs are improved or removed and replaced by effective programs that meet the same needs.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Lassen County Behavioral Health has integrated our mental health and substance use disorder services in a whole person approach to meet the multiple needs of individuals and families in the community. Our "no wrong door" philosophy is meant to create more access to services and offer appropriate levels of care. Walk In registration and screening helps eliminate waiting lists.

Our Crisis and Care Team is available to assist clients, social services, and community law enforcement agencies with urgent mental health needs. Medical staff, therapists and case management staff respond to crisis calls including assessments for voluntary and involuntary (5150) hospitalization for severe symptoms of mental illness. LCBH has contracted with 4 tele-psychiatrists providing services to adult, children, and substance use disorder clients diagnosed with moderate to severe mental illness and addictive disorders. Individual psychotherapy is provided by licensed and licensed eligible professionals. Outpatient co-occurring (mental health, physical health and substance use diagnosis) services are available as well as referrals to higher levels of care, including detox and residential substance use recovery services. Psych Medications are monitored and clients are assigned case managers for increasing stabilization and engagement. A 24/7 crisis access and language line is maintained as well as the availability of afterhours crisis contracted providers. LCBH services are provided within multidisciplinary teams in order to address complex mental health needs with evidence based practices that are trauma-informed, gender specific and culturally competent. Individual and group sessions are designed for specialty services. Children and Families, Adults, Senior Adults, Women, Veterans, Substance Use Disorders, Adolescent, Perinatal/ Postpartum Women services Teams are developed to offer strength based and individualized approaches based on multi-dimensional assessments.

Services can be covered by some insurances, however most clients are Medi-Cal eligible beneficiaries. Substance Use Assessments are comprehensive and recovery services provided include outpatient, intensive outpatient, Medication Assisted Therapy and Withdrawal Management based on ASAM levels of care. Court Related Services, (Drug Court, Prop 36, PC 1000) Health, Parenting, Prevention and Early Intervention are also integral to an effective Substance Use Disorder Programs.

What challenges does your county face in meeting these programming and service needs?

Lassen County is a large geographic rural area to provide mental health services within. Transportation, poverty and cultural barriers exist like in many frontier communities and counties. Complex needs are met by referring or placement of clients and transporting them to distant larger cities or counties sometimes several hours away. Generational issues continue to be a challenge with a need for more prevention programs. Prisons located in the county bring into focus the social needs of families who have relocated here to be near loved ones or relatives. As in many rural communities disparate healthcare and lack of employment and stable housing complicate and affect the mental wellness of the families who live here.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We try to make sure our programs are constantly reviewed and revised as needed, once implemented. We like to ensure our programs are successful and we have the data to prove it. It is also important for us to have a strong partnership with other county, city and community based agencies to ensure the targeted population is getting the assistance they need and we are providing consistent care. In a rural community with limited resources, it is important for us to maximize the usage of the resources we have available. It is critical for us to match this population with the services that will meet their needs.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

There are a number of programs being implemented that are showing positive results in Lassen County. Change Company journaling series are being utilized with a number of different populations with positive results. Lassen Family Services, a non-profit community based agency, provides an effective parenting program to our population. The Batterer's Intervention and Child Abuse Prevention program that we used for much of the year met the requirements and also provided positive results. The Day Reporting Center and Alternative Custody Supervision programs are also showing positive results. The Day Reporting Center has a 57% success rate.

Community Corrections Partnership Membership
(October 21, 2016)

Calvin Remington
Chief Probation Officer

James Brandlin
Presiding judge or designee

Sachi Hamai
County supervisor or chief administrative officer or designee

Jackie Lacey
District Attorney and Victims' interests

Ronald Brown
Public Defender

Jim McDonnell
Sheriff

Charlie Beck
Chief of Police

Sheryl Spiller
Department of Social Services

Cynthia Banks
Department of Employment

Robin Kay
Department of Mental Health

Cynthia Harding
Alcohol and Substance Abuse Programs

Debra Duardo
Office of Education

Troy Vaughn
Community-based organization

The CCP meets monthly

Los Angeles County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Incorporate Substance Use Disorder (SUD) education and treatment into the Sheriff Department's Education-Based Incarceration (EBI) programming for N3 (Public Safety Realignment- i.e., non-serious, non-violent, non-sex crime) inmates.

Objective:

- Select contracted provider(s) to deliver education and SUD treatment services at Los Angeles County jails.
- Implement an education and SUD treatment program for female inmates at the Los Angeles County Century Regional Detention Center.

Measure:

- The number of adult N3 female inmates receiving drug education and SUD treatment services.

Progress: In February 2016, the Department of Public Health (DPH) and the Los Angeles County Sheriff's Department implemented an education and SUD treatment program to serve 50 female inmates on any given day at the Los Angeles County Century Regional Detention Center.

Goal: Maintain the same level of absconder arrests in FY 2015-2016 as FY 2014-2015.

Objective:

- Coordinate with other County Departments and law enforcement agencies to identify and apprehend absconders with active arrest warrants.
- Utilize new investigative methods to locate the longest offending absconders.

Measure:

- The number of absconders who are arrested in comparison to that of the previous year.

Progress: The Los Angeles County Sheriff's Department Parole Compliance Unit (PCU) uses all available investigative tools to locate absconders who have Los Angeles County warrants. When the absconders are found to be out of the state, PCU contacts and works with the local law enforcement in that state to apprehend the absconder. Once the absconder is apprehended, PCU works with the Los Angeles County District Attorney's Office to extradite the absconder. There were 446 Post-Release Supervised Person (PSP) Parolee-At-Large (PAL) arrests in FY 2015-2016, which is a 12.6% increase over the 396 PSP PAL arrests in FY 2014-2015.

Goal: Develop the Justice Automated Information Management System (JAIMS), a centralized system to facilitate Public Safety Realignment data analysis and reporting between departments.

- Objective:**
- Add the Microsoft Power BI reporting software in JAIMS architecture to develop a dashboard system for real time data analytics on AB 109 data for the user community.
 - Migrate the database platform of JAIMS from Oracle to SQL Server to improve interoperability and development flexibility.

- Measure:**
- Implementation of JAIMS in the Power BI Government cloud to provide dashboard capabilities and new reporting dynamics.
 - Complete migration of JAIMS from Oracle database to SQL Server.

Progress: The County Information Systems Advisory Body (ISAB) is working with Microsoft on a proof of concept for the implementation of JAIMS in the Power BI Government cloud. A template for the project has been created. The migration of JAIMS from Oracle database to SQL Server is in development.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Expand Substance Use Disorder (SUD) education and treatment within the Sheriff Department's Education-Based Incarceration (EBI) programming for N3 (Public Safety Realignment) inmates.

- Objective:**
- Conduct/Execute Master Agreement Work Order Solicitation (MAWOS) to provide/expand education and in-custody SUD services to 500 inmates on any given day within the Los Angeles County jail system during Fiscal Year 2016-2017 (FY 2016-17).
 - Expand drug education and SUD treatment services to both female and male inmates by FY 2016-17.

- Measure:**
- Execution of MAWOS and selection of contracted provider(s) to deliver education and SUD treatment services at Los Angeles County jails.
 - Development of an implementation plan to deliver services to 500 adult inmates in Los Angeles County jails in FY 2016-17.

Progress: In February 2016, the Department of Public Health (DPH) and the Los Angeles County Sheriff's Department implemented an education and SUD treatment program to serve 50 female inmates on any given day at the Los Angeles County Century Regional Detention Center.

The MAWOS process has been initiated and executed agreements are targeted for early 2017.

Goal: Maintain the same level of absconder arrests in FY 2016-2017 as FY 2015-2016.

- Objective:**
- Coordinate with other County Departments and law enforcement agencies to identify and apprehend absconders with active arrest warrants.
 - Utilize innovative investigative methods to locate the longest offending absconders.

- Measure:**
- The number of absconders who are arrested in comparison to that of the previous year.

Progress: The Los Angeles County Sheriff's Department Parole Compliance Unit (PCU) uses all available investigative tools to locate absconders who have Los Angeles County warrants. When the absconders are found to be out of the state, PCU contacts and works with the local law enforcement in that state to apprehend the absconder. Once the absconder is apprehended, PCU works with the Los Angeles County District Attorney's Office to extradite the absconder.

There have been 160 Post-Release Supervised Person (PSP) Parolee-At-Large (PAL) arrests thus far in FY 2016-2017.

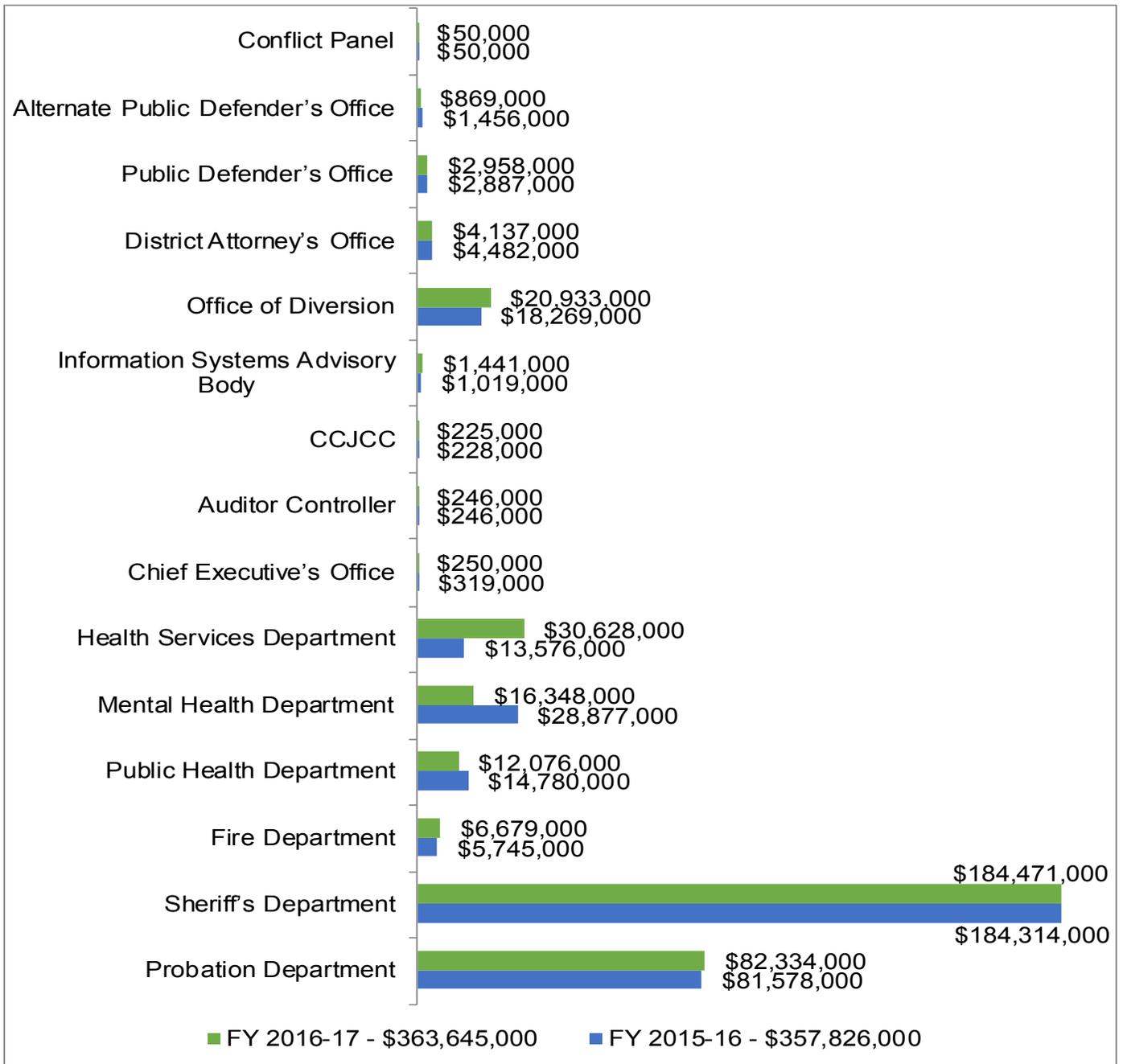
Goal: Implement a Cognitive Based Intervention (CBI) program in order to address criminogenic needs (e.g., anti-social thinking, anti-social personality pattern, etc.) and reduce recidivism.

- Objective:**
- By March 30, 2017, purchase and install electronic CBI program at Probation staff workstations.
 - By March 30, 2017, the Probation Department will issue a policy/directive to guide the use of the CBI.
 - By June 30, 2017, at least 85% of supervision Deputy Probation Officers/ Supervising Deputy Probation Officers will be trained in the use of the CBI curriculum.

- Measure:**
- By June 30, 2017, the CBI program will be implemented with AB 109 participants.

Progress: The Probation Department is in the process of purchasing electronic licenses. It is also developing a statement of work and proceeding with the authorization procedures necessary for selecting an outside contractor that will provide training services.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services

Probation Department: \$81,578,000 - 1) Community Supervision of PSPs and N3s \$68,678,000
1a) Direct Supervision \$53,145,907, 1b) HUB/Custody Liaison \$6,521,707, 1c) Pre-Release Center \$4,430,050, 1d) Local Law Enforcement Partnership \$4,580,336; 2) CBO Services and Fixed Assets \$12,900,000

Sheriff's Department: \$184,314,000 - 1) Custody Operations \$163,255,000; 2) In-Custody Programs \$7,601,000; 3) Valdivia \$1,494,000; 4) Parole Compliance Unit \$11,164,000; 5) Fire Camps \$800,000

Fire Department: \$5,745,000 - 1) Fire Camp Training \$537,000; 2) Fire Camp Operations \$5,208,000

Public Health Department: \$14,780,000 - 1) Community-Based Services \$8,753,504
1a) Community Assessment Services Center (CASC) \$2,068,294, 1b) Treatment Activity \$6,685,210; 2) Jail Health Substance Use Disorder \$3,602,920; 3) Administrative Oversight \$2,423,576

Mental Health Department: \$28,877,000 - 1) Community-Based Services \$33,941,413, 1a) Direct Services \$7,746,506, 1b) State Hospital \$525,000, 1c) IMD Contracts \$1,290,000, 1d) Non-Medi-Cal Contracts \$3,927,677, 1e) General Outpatient Contract Services \$18,800,230, 1f) Medications \$1,652,000; 2) In-Custody Services \$6,329,817, 2a) Mental Health Court Program (MHCP) \$831,666, 2b) Men's Jail Mental Health Services (JMHS) & JMET \$3,955,438, 2c) Women's Jail Mental Health Services (JMHS) \$1,542,713; 3) Other Revenue (\$11,394,230)

Health Services Department: \$13,576,000 - 1) Inmate Medical Services at LAC+USC \$11,118,000; 2) PRCS Medical Care Coordination \$213,000; 3) Integrated Jail Health Services \$186,000; 4) Community Health Worker Program \$2,059,000

Chief Executive's Office: \$319,000 - 1) Program Oversight \$319,000

Auditor Controller: \$246,000 - 1) Claims Processing \$246,000

CCJCC: \$228,000 - 1) Public Safety Realignment Team (PSRT) \$228,000

Information Systems Advisory Body: \$1,019,000 - 1) Justice Automatic Information Management Statistics (JAIMS) \$1,019,000

Office of Diversion & Re-Entry: \$18,269,000 - 1) Community-based Treatment and Housing Programs \$18,269,000

District Attorney's Office: \$4,482,000 - 1) Restitution Enhancement Program \$439,000; 2) Prosecution \$4,043,000

Public Defender's Office: \$2,887,000 - 1) Legal Representation \$2,887,000

Alternate Public Defender's Office: \$1,456,000 - 1) Legal Representation \$1,456,000

Conflict Panel: \$50,000

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- All Funding is allocated to public agencies. However, several departments receiving funding subsequently contract with a non-public agency or agencies for services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Los Angeles County assesses the effectiveness of programs and/or services funded with its Public Safety Realignment allocation. Reports on Public Safety Realignment are submitted to the County Board of Supervisors on a semi-annual basis. These reports provide updates on Public Safety Realignment objectives and whether they are being met. The reports also discuss programs and services that are being offered and how effective they are.

Included with the semi-annual reports on Public Safety Realignment are Quarterly Performance Measures Reports and a Monthly Data Report. The Performance Measures Reports are updated by departments and track the progress that the departments are making throughout the fiscal year in meeting their stated goals. The Monthly Data Report provides information on relevant numbers concerning Public Safety Realignment and their trends over time.

In addition, the County of Los Angeles is currently participating in a multi-county study by the Public Policy Institute of California (PPIC). This study is examining the implementation of Public Safety Realignment in participating counties and the effectiveness of various programs and services.

Finally, the County is in the process of contracting with a researcher to conduct an AB 109 Evaluation. This evaluation will cover the entire extent of Public Safety Realignment in Los Angeles County since its inception. Among other tasks, this project will evaluate the effectiveness of programs and services that are funded with the Public Safety Realignment allocation.

Does the county consider evaluation results when funding programs and/or services?

Yes. Yes, the effectiveness and results of programs and/or services – in addition to programmatic needs identified by departments – are considered when funds are allocated. As noted previously, the County Board of Supervisors is kept informed about the programs and services related to Public Safety Realignment through reports submitted on a semi-annual basis. In addition, individual departments may separately report on specific programs and services.

Does the county use BSCC definitions when collecting data? If so, which?

No. Data is collected in a manner that can support measurements as defined in many different ways. While county definitions may not be identical to those established by BSCC, data collection efforts are intentionally flexible to support multiple definitions, including the BSCC's.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

\$81% or higher. All programs and/or services funded by Public Safety Realignment funds are evidence-based.

We would like to better understand your 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?

Through the Department of Mental Health (DMH), the following levels of mental health treatment are available and funded with AB109:

State Hospital, Institution for Mental Disease (IMD), Enriched Residential, and Intensive Outpatient Services. The Intensive Outpatient services include Full Service Partnership-like (FSP-like), Field Capable Clinical Services-like (FCCS), Wellness-like, and traditional outpatient (Mental health services and Co-Occurring Disorder [COD] services). In collaboration with the Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC), DMH provides COD services to 20 individuals in residential treatment.

DPH-SAPC oversees the provision of substance use disorders (SUD) services for the AB 109 population. SUD treatment services include the following:

- **Outpatient Counseling Services:** Alcohol and/or drug treatment and recovery services that are provided in a drug-free, non-drinking environment, involving participation of no more than nine hours of structured programming per week directed towards alleviating and/or preventing alcohol and drug problems.
- **Intensive Outpatient Treatment Services (Day Care Habilitative Service):** A minimum of nine hours (three hours per day, three days per week) and maximum of 19 hours of structured programming per week, based on a participant's treatment plan, including assessment, counseling, crisis-intervention and activity therapies or education.
- **Narcotic Treatment Program Services:** Provides methadone (or levoalphacetylmethadol [LAAM] if available and prescribed) as a narcotic replacement drug, when ordered by a physician, as medically necessary to alleviate the symptoms of withdrawal from opioids.
- **Residential Treatment Services:** A 24-hour residential program in which recovery services and/or specialized recovery services are made available to participants who have alcohol and/or drug problems.
- **Medication Assisted Treatment (MAT):** Medication in combination with counseling and behavioral therapies, to provide a whole-person (or biopsychosocial) approach to the treatment of SUD. MAT is clinically driven with a focus on participants' care.
- **Residential Medical Detoxification Services:** The care and treatment of participants including, but not limited to, homeless participants suffering from the toxic effects of alcohol, narcotics and/or dangerous drugs.

In February 2016, the Sheriff's Department, DMH, and DPH-SAPC launched an Alternative to Custody (ATC) pilot program. Through this program, qualifying offenders spend the final 90-120 days of their sentences in community-based mental health and substance abuse treatment instead of custody. Housing and employment services are provided to the AB 109 supervised population by the Probation Department through a contract with HealthRight 360. The contract provides for aftercare services, case management, and incentives to participants for job retention. The contract also provides for temporary housing for AB109 clients experiencing homelessness and establishes rates for Skilled Nursing and Board & Care. The Sheriff's Education Based Incarceration (EBI) unit is responsible for all inmate educational and Career Technical Education (CTE)/Life Skills programs within the Custody Division. The programs provided by EBI are designed to provide inmates with life changing skills and education to promote successful reentry and reduce recidivism.

Such programs include:

- Adult Basic Education –This series of courses features a systematic “building block” approach to development of improved reading, writing and math skills and may also include English as a Second Language (ESL) instruction. The goal of Adult Basic Education is to prepare students for the rigor of high school-level curriculum that leads to college and/or career readiness.
- General Education Development – For those who have not yet achieved a high school diploma, this program offers high school-level courses designed to support students in earning a high school diploma and/or preparing for an alternate diploma in the form of a State-approved equivalency test such as the HiSET or GED exam.
- Maximizing Effort Reaching Individual Transformation (MERIT) – The MERIT program is facilitated by EBI personnel and Merit Masters. A Merit Master is an inmate who has successfully completed the MERIT Program and has offered to be a peer mentor to other inmates.
- Life Skills classes – Classes that address parenting, anger management, domestic violence counseling, substance abuse and general life skills are provided. Once such program is the Moral Reconciliation Therapy (MRT) course. MRT is a systematic, cognitive behavioral, step by step treatment strategy designed to enhance self-image, promote growth of a positive productive identity and facilitate the development of higher stages of moral reasoning.
- Back on Track (BOT) – The BOT Pilot Program is a collaborative program between Los Angeles County and the California Department of Justice. The BOT Program provides evidenced-based programs and cognitive behavioral therapy to medium- and high-risk male AB 109 inmates. The BOT Program is a nine-month in-custody program followed by an voluntary post-release support services. Its primary goal is to give participating inmates both the academic and vocational skills needed to re-enter society and to avoid a return to custody.
- Fire Camp – Through the Fire Camp program, inmates learn skills needed to support California's wilderness fire-fighters in their temporary locations. The primary mission of the California Department of Corrections and Rehabilitation (CDCR) Conservation Camp program is to provide the cooperative agencies with an able-bodied, trained work force for fire suppression and other emergencies, such as floods and earthquakes. In addition, fire crews work on conservation projects on public lands and provide labor on local community services projects.
- Vocational/Employment Services – The Sheriff's Department also offers a wide variety of industrial training courses designed to increase the likelihood of employment in specific vocations after release, such as cement and concrete block masonry, commercial welding, residential construction, computer operations, and pet grooming.
- Tattoo Removal Services – The Sheriff's Department offers all inmates tattoo removal services.

What challenges does your county face in meeting these programming and service needs?

Some of the challenges to meeting programming and service needs are as follows:

- Long term treatment care infrastructure needs: DMH continues to address the challenge of meeting the treatment and long-term treatment care needs for supervised persons with severe mental health issues coupled with chronic medical issues, serious sex offenses, and arson convictions. Furthermore, expanding employment opportunities and residential substance abuse services for supervised individuals continues to remain an ongoing challenge.

-
- Substance Use Disorder (SUD) treatment services for people who are registered sex offenders while under AB 109 supervision continues to be a challenge in our existing system. Residency restrictions placed on this group limit the access to community-based SUD treatment services. Other difficulties may include employment conflicts and transportation limitations. DPH-SAPC is exploring options for SUD treatment agencies to conduct field-based services, which will result in connecting more individuals to treatment by bringing services to clients who face residency restrictions.
 - Jail bed funding: AB 109 funding is insufficient to maintain the jail beds for the current population of 3,500 N3 inmates. This funding shortage limits the Sheriff Department's ability to greatly expand its programming options.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Public Safety Realignment implementation in Los Angeles County is continually evolving. Some of the programmatic changes that have been made since implementation have included the following:

- Since the implementation of Public Safety Realignment, Los Angeles County DMH has had to increase the number State Hospital as well as IMD beds allocated to this population. Furthermore, there are ongoing trainings geared towards staff and clinicians working with this population.
- Beginning in January 2014 and continuing through this current fiscal year, on-going evidence-based courses have been offered to treatment providers and DMH staff. They include the following: Assessment and Treatment of AB 109 population; Co-occurring Disorders Assessment with the Forensic Population; High Fidelity Cognitive Behavioral Treatment/evidence-based programs (EBP); Seeking Safety (Trauma focused and Substance Abuse Treatment/EBP); Complex World of Anti-Social Personality Disorders; Crisis Oriented Recovery Services/EBP Model; SSI and Benefits Training for the AB 109 Population; Treatment and Management of Sex Offenders; Moral Reconciliation Therapy; Field Safety Considerations and the Forensic Population; Motivational Interviewing and Co-Occurring Disorders; Harm Reduction; Risk of Violence; Burnout Prevention; Overview of Working with Forensic Consumers in the Community; and Risk, Need and Responsivity.
- In response to the evolving legislative changes to the criminal justice system, DPH-SAPC expanded the target populations to be served under AB 109 contracts, including individuals classified as straight-sentenced under Penal Code Section 1170(h); Proposition 47, including those re-sentenced and/or released from County jails under the provisions of Proposition 47; and Proposition 36 (2012), which reformed sentencing guidelines for "Three Strikes" offenses.
- The Co-Occurring Integrated Case Network (COIN) program was implemented in 2013 as a collaboration between the Department of Public Health, Department of Mental Health, Los Angeles County Superior Court, and the Probation Department. The COIN program addresses the needs of PSPs with chronic SUD and severe and persistent mental illness. COIN provides residential mental health and co-occurring disorder treatment for PSPs referred by the AB 109 Revocation Court.
- Deputy Probation Officers (DPOs) are now co-located with local law enforcement agencies to conduct compliance checks on PSPs.
- CCP Subcommittees were created to assist with technical issues involving treatment services, law enforcement, and parole revocation/legal questions.

-
- For the Probation Department, the focus of this past year has been on the implementation of evidence-based practices, including motivational interviewing, continuous assessments of risks and needs, and the development of individualized case plans to address criminogenic risk/needs.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The County has implemented a number of best practice and promising programs. These include the following:

- On-going Assessment, Crisis Intervention, Trauma Treatment (ACT); Critical Time Intervention (CTI); Motivational Interviewing; Dialectical Behavioral Treatment; Risk, Need and Responsivity (RNR); and Recovery Centered Clinical System (RCCS) interventions continue to be effective in working with this population.
- DPH-SAPC has shown positive outcomes through co-located assessment services at dedicated Probation HUBs, with the aim of improving engagement into SUD treatment. The implementation of co-located assessment services has increased the show rate for assessment to 96%. Prior to the co-location of the Community Assessment Services Center (CASC), the show-rate for assessments was approximately 50%. The one-stop approach has provided AB 109 supervised individuals with the ability to be assessed, engaged, and referred to SUD treatment services upon their initial check-in with Probation.
- The Skid Row Project was developed in 2015 and continues to successfully facilitate mobile office visits with supervised persons that reside in the skid row area. This program co-locates two DPOs and local law enforcement in the “skid row” area of downtown Los Angeles. Twice a month, the teams set up the mobile resource center to enable homeless persons residing in the area with the opportunity to report for supervision and be connected with services such as housing, employment, substance abuse treatment, and mental health treatment. The project has displayed positive results in that we have seen a reduction in the number of warrants issued in the area and we have moved several supervised persons off of “skid row” and into transitional housing.
- Community-Based ATC programs: The use of community-based ATC programs has been very effective in serving the population with SUD. Outside of the Substance Treatment and Re-entry Transition (START) program (referenced under Question #19), 91 inmates were placed into Female, Veteran’s, and Transitional Case Management programs during 2015. In 2016, Gateways Mental Health Program was added to ATC programming making up to 42 beds available for qualified mental health inmates. Thus far in 2016, 72 inmates have been placed in these various ATC programs, including 25 into the Gateways Mental Health program. The length of the programs was also expanded from 90 days to up to 180 days in program. As a result of longer stays in the programs, fewer inmates are opting to stay in the program after release from their ankle monitors. Still, nearly 20% opt to remain in programs, and many stay in the program as an outpatient client. Although not currently available, the rate of recidivism for this group will be studied in the coming year. In addition to the START program, 103 inmates have successfully completed their sentence while in programs.

Community Corrections Partnership Membership
(October 21, 2016)

Rick Dupree
Chief Probation Officer

Amy Downey
Presiding judge or designee

Kevin Fries
County supervisor or chief administrative officer or designee

David Lynn
District Attorney

Mike Fitzgerald
Public Defender

Jay Varney
Sheriff

Steve Frazier
Chief of Police

Kelly Woodward
Department of Social Services

Vacant
Department of Employment

Dennis Koch
Department of Mental Health and Alcohol and Substance Abuse Programs

Cecilia Massetti
Office of Education

Mike Unger
Community-based organization

Mattie Mendez
Victims' interests

The CCP meets quarterly

Madera County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Improve success rates of offenders under supervision, resulting in less victimization and increased community safety.

Objective:

- Implementation of a system that promotes public safety and utilizes best practices in recidivism reduction.
- Implementation of a system that effectively uses alternatives to pre-trial and post conviction incarceration where appropriate.

Measure:

- Partner feedback on effectiveness of mechanisms in place to collaboratively address realignment issues as they arise.
- Recidivism rates for non-violent, non-serious, and non-sex offenders.
- Number and type of offenders sentenced to county jail, to probation or alternative programs and successfully completing PRCS.

Goals, Objectives, Outcome Measures and Progress FY 2016-17

Goal: Implement Specialty courts (Behavior Health & Veterans).

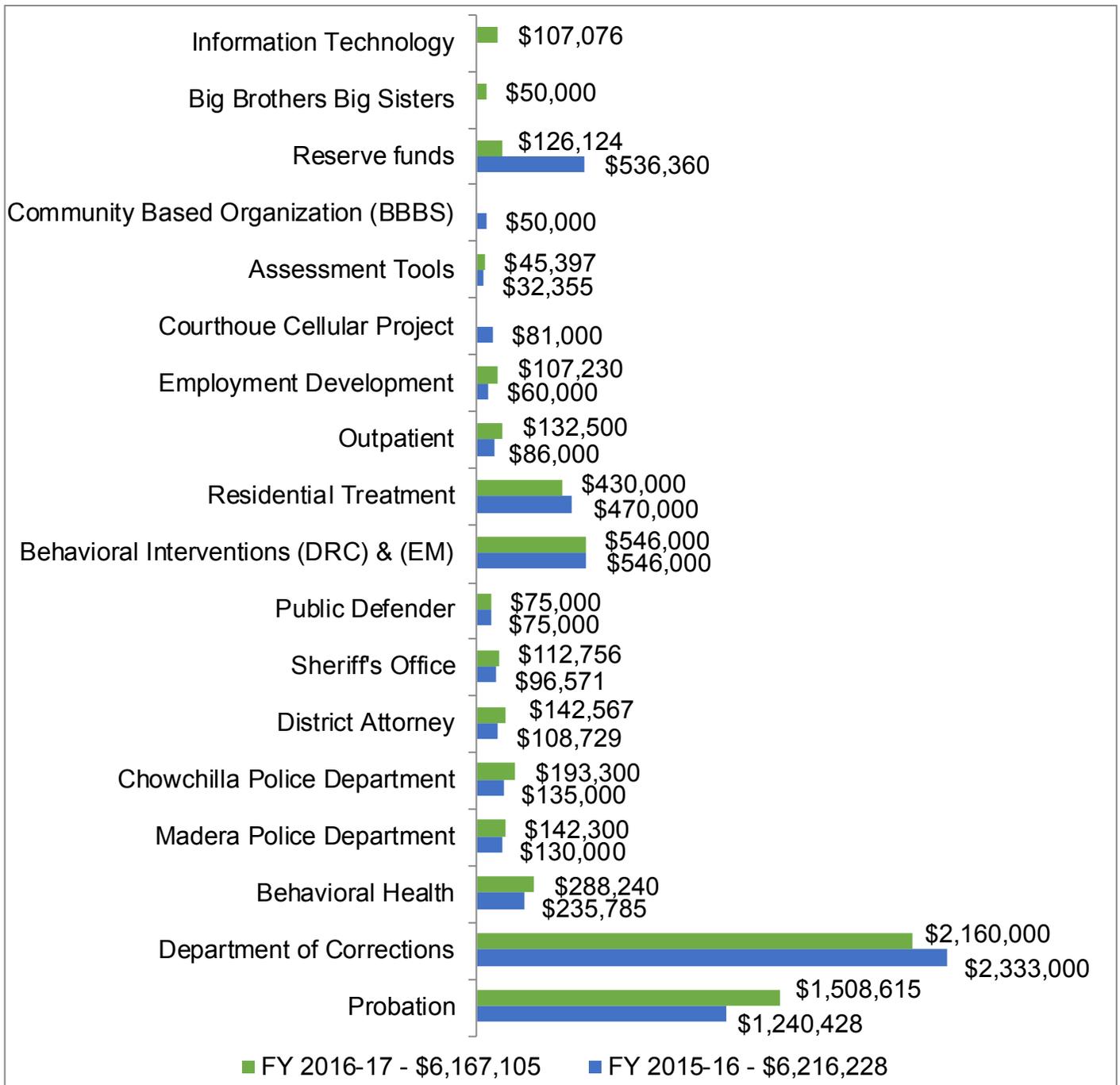
Objective:

- Reduce impact on Jail.

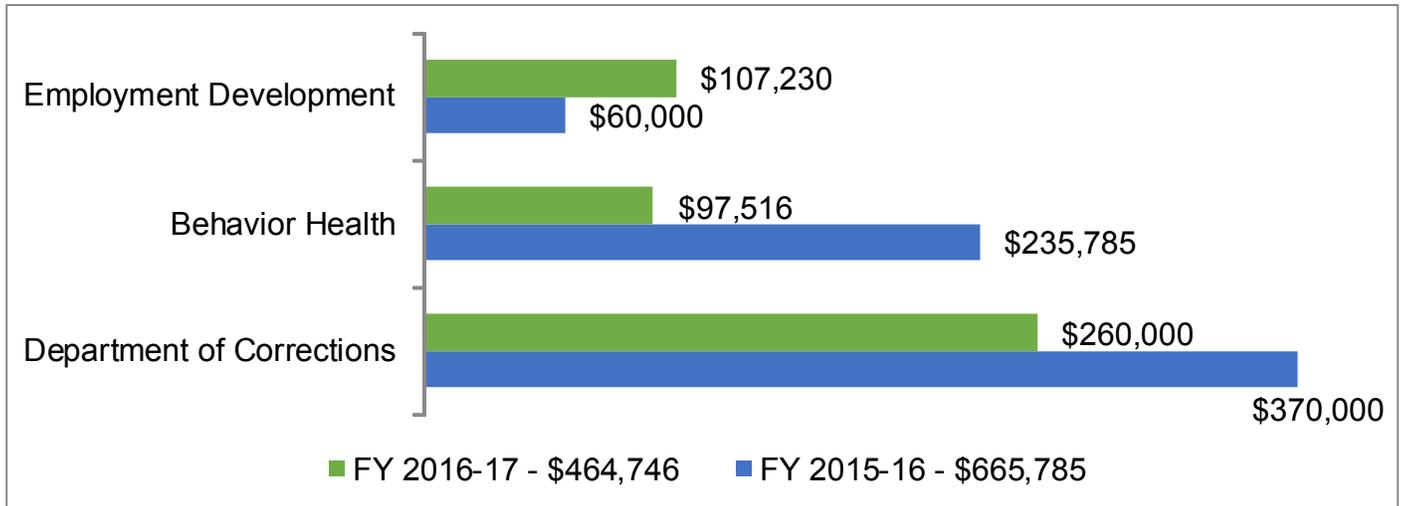
Measure:

- Reduce number of violations.
- Reduce jail time for violators.

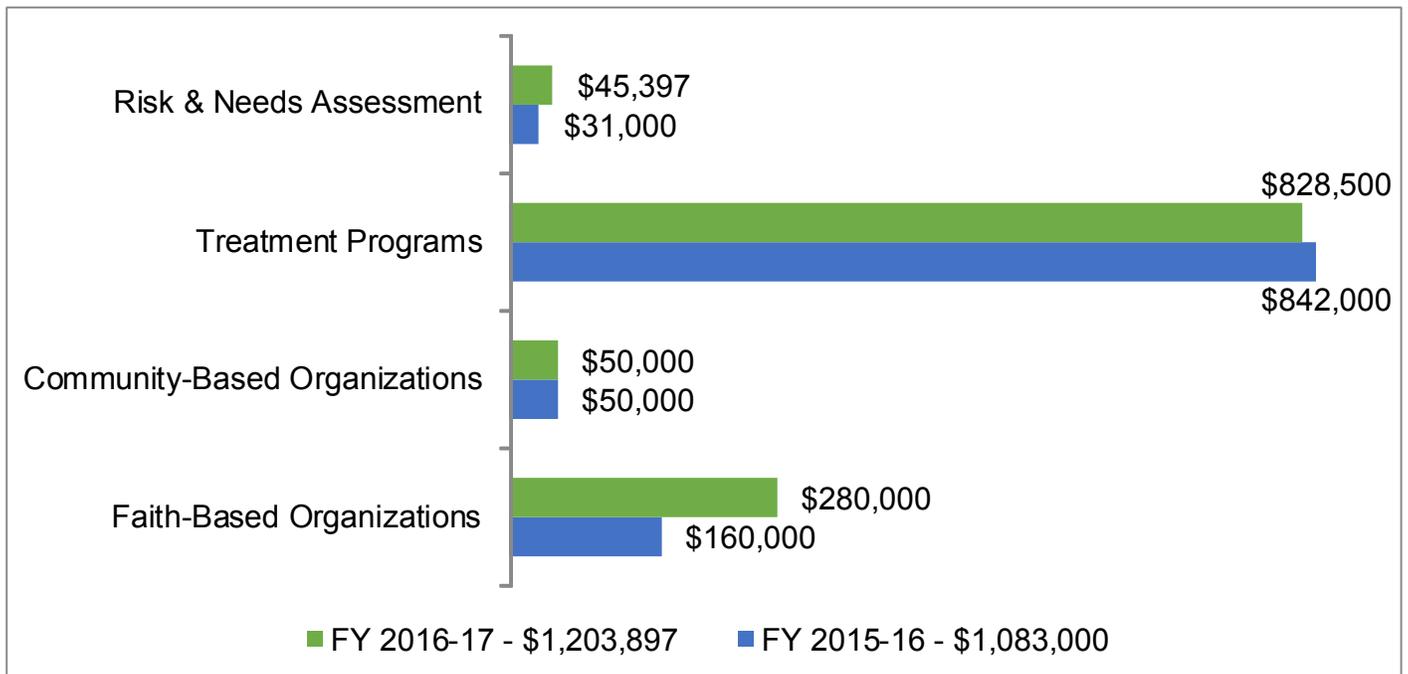
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

Residential Drug Treatment; various outpatient counseling services (MH, AOD, Sex-Offender, DV) including group/individual; Specialty courts (Behavior Health, Drug, Veteran's).

What challenges does your county face in meeting these programming and service needs?

Minimal capacity related to budgetary concerns.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Tablet Program at DOC & JH - it is a positive reward incentive.

Community Corrections Partnership Membership
(October 21, 2016)

Michael Daly
Chief Probation Officer

James Kim
Presiding judge or designee

Charlotte Jourdain
County supervisor or chief administrative officer or designee

Edward Berberian
District Attorney

Jose Varela
Public Defender

Robert T. Doyle
Sheriff

Diana Bishop
Chief of Police

Grant Colfax, Ph.D
Department of Social Services, Department of Employment, Department of Mental Health and Alcohol and Substance Abuse Programs

Mary Jane Burke
Office of Education

Vacant
Community-based organization

Vacant
Victims' interests

The CCP meets semi-annually

Marin County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Increase the number of clients successfully completing Post Release Community Supervision (PRCS) and Mandatory Supervision (MS).

Objective:

- 90% of PRCS and MS cases will successfully complete their program with no new felony or misdemeanor citations.

Measure:

- Number of clients completing their PRCS and MS with no new felony or misdemeanor convictions.

Progress: In FY 2015-16, the Marin County Probation Department had 44 PRCS and MS clients terminate from the program. 95.4% of those clients completed their term successfully.

Goal: Connect participants with appropriate services to aid in rehabilitation and re-entry into the community.

Objective:

- Assess 100% of clients using a biopsychosocial assessment tool.
- Number of Clients Assessed.
- Percent of clients referred to substance abuse treatment.

Measure:

- Number of Clients Assessed.
- Percent of clients referred to substance abuse treatment.
- Percent of clients referred to mental health treatment.
- 100% of clients released to Marin County Probation on PRCS or MS status were assessed and referred to appropriate services.

Progress: 100% of clients released to Marin County Probation on PRCS or MS status were assessed and referred to appropriate services.

Goal: Maximize funding and services for clients newly eligible for Medi-Cal Benefits under the Affordable Care Act.

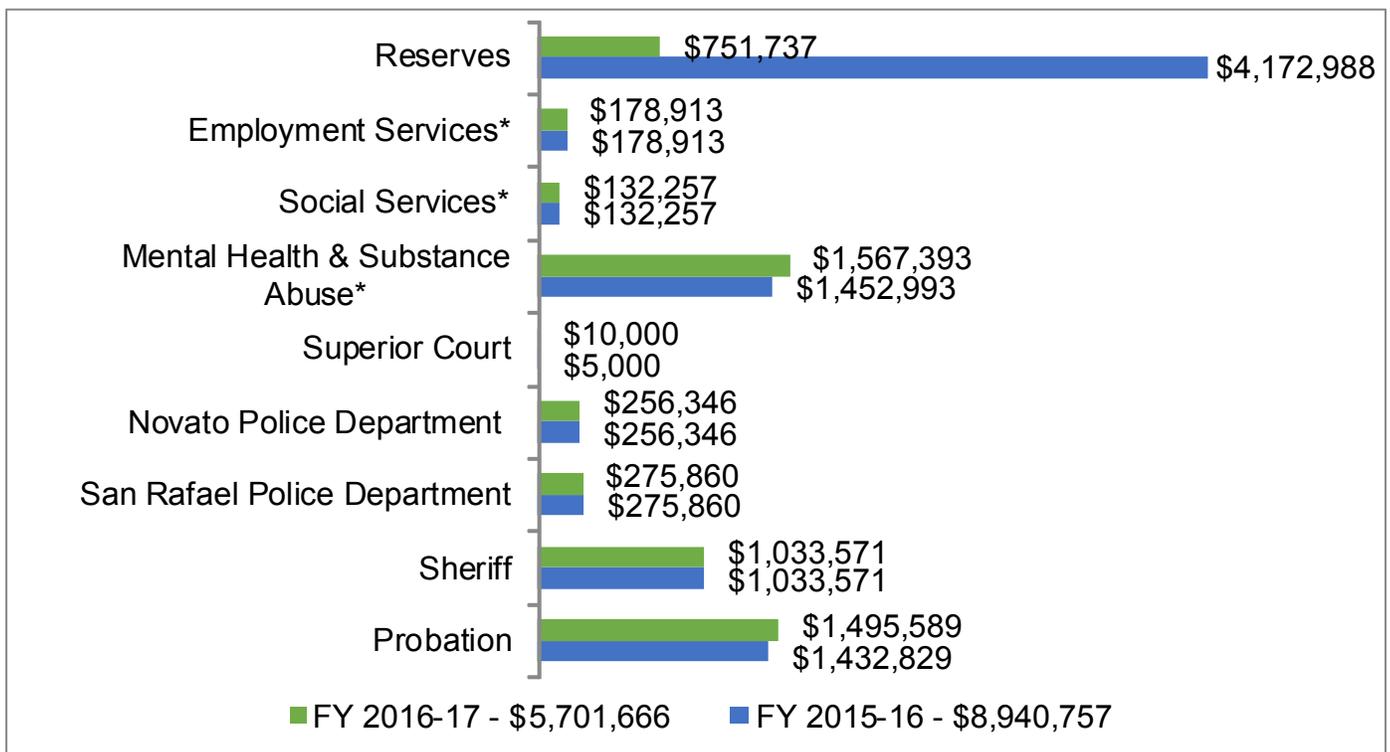
- Objective:**
- Assist all clients in enrolling in Medi-Cal.
 - Assist all clients in enrolling in Medi-Cal.

Measure: • Percent of eligible clients enrolled in Medi-Cal.

Progress: Marin has had our application to be a Drug Medi-Cal Waiver County approved and is just starting to see savings in Intensive Outpatient Treatment Costs due to Medi-Cal recovery.

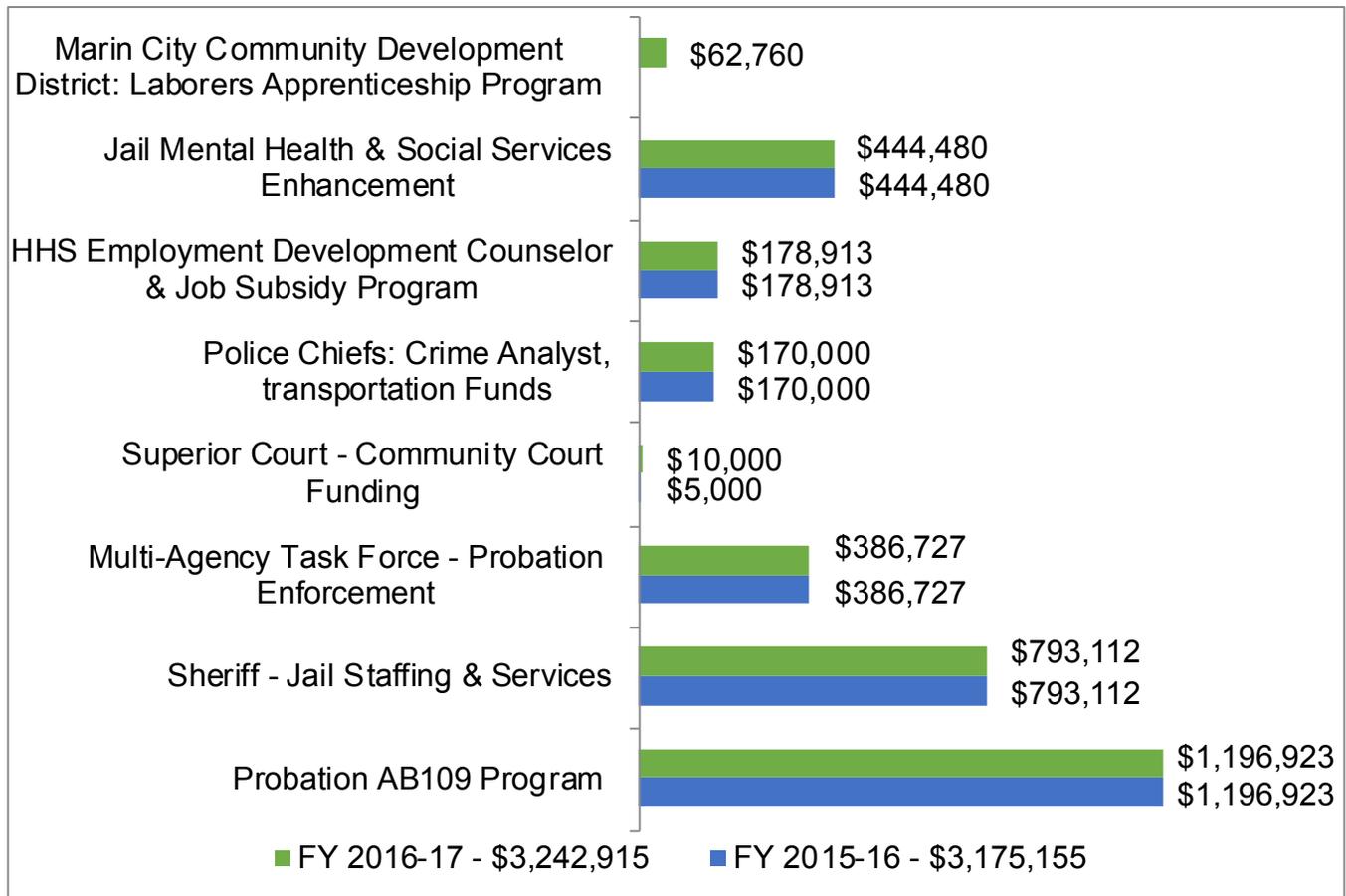
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

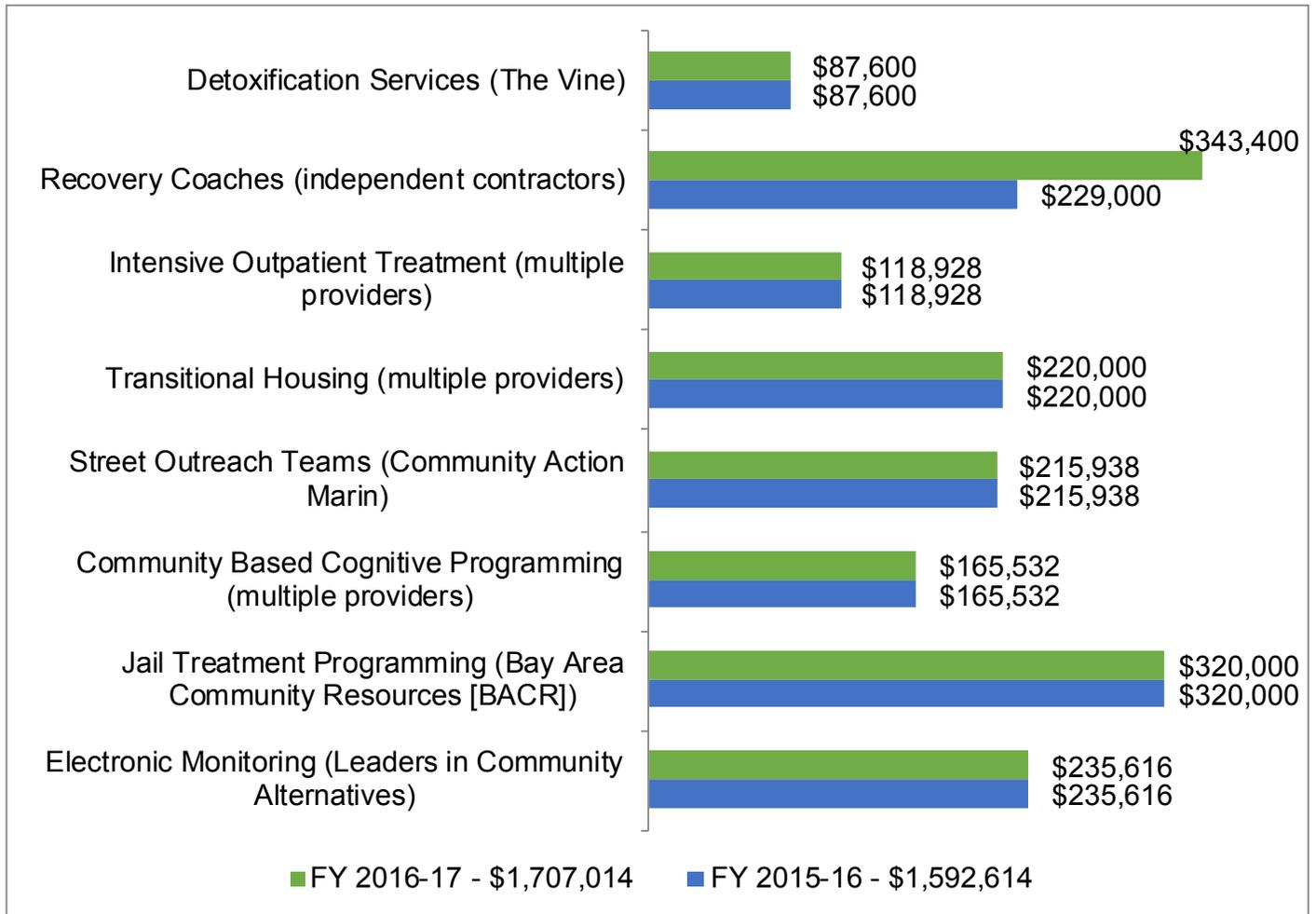


*Health and Human Services

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The County did an internal review of programs, services and outcomes in October of 2014 and annually reviews programs and outcomes before adopting the next fiscal year budget. The CCP is seeking an independent agency to provide a comprehensive program evaluation of the first five years of the program.

Does the county consider evaluation results when funding programs and/or services?

Yes. Applications to the CCP Funding Committee require the requester to identify the population to be served, expected outcomes, and how the request supports the CCPs goals of being data-driven and evidence based. New programs without proven success are often funded for a single program year as a pilot and must return to the Executive Board with outcomes to justify ongoing funding.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

Marin County provides a continuum of care and support services that all embody the philosophy of evidence-based practices. All Probation staff are trained in Motivational Interviewing, use risk assessment tools in case planning and we offer In Custody and Community Based Cognitive Behavioral Therapy Programming to all offenders that focus on cognitive behavioral programming and include courses such as Thinking for Change.

We would like to better understand your 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?

Marin County provides a high level of services to the AB109 population. While in custody, clients are able to access substance abuse treatment, cognitive behavioral programming and Mental Health assessment and counseling. The Jail Re-entry team works with all clients prior to release to ensure enrollment in Medi-cal and County support programs such as General Assistance benefits.

Upon release we ensure all clients have a roof over their heads. For some this may be with family for others we place, based on their current situation and engagement, in a shelter, Supportive Living Environment (SLE) or Inpatient Treatment Program. All clients living in the community with a substance abuse issue are placed into Intensive Outpatient Treatment and additional counseling, mental health services and treatment modalities are offered based on client needs. Probation Officers and staff of the Marin Employment Connection work closely with the clients to assist them in pursuing education training and gainful employment.

What challenges does your county face in meeting these programming and service needs?

Although located in the progressive Bay Area, the high cost of housing and real estate in Marin limits the number of treatment providers who can afford to set-up shop in Marin and to retain qualified staff. Housing of offenders is a growing problem with a limited number of shelter beds, transitional living facilities and affordable housing options.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Marin County Recovery Coach Program is a creative means to engage these offenders in treatment and reentry activities. The Recovery Coach helps us address the drug, alcohol, and mental health needs of our AB109 offenders; providing mentor/"sponsor" like relationships to support the offenders and augment the supervision provided by deputy probation officers.

Community Corrections Partnership Membership
(October 21, 2016)

Pete Judy
Chief Probation Officer

Dana Walton
Presiding judge or designee

John Carrier
County supervisor or chief administrative officer or designee

Tom Cooke
District Attorney

Neal Douglas
Public Defender

Doug Binnewies
Sheriff

Vacant
Chief of Police

Chevon Kothari
Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs

Vacant
Department of Employment

Robine Hoper
Office of Education

Allison Tudor
Community-based organization

Jessica Mimnaugh
Victims' interests

The CCP meets quarterly

Mariposa County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Increase services to offenders with mental health conditions.

- Objective:**
- Design a mental health court model appropriate for our rural community.
 - 100% of participants will be screened for mental health services within drug court model.

Measure:

- Number of participants completing mental health court program.

Progress: Several meetings between the Court, Probation, DA, Sheriff, and service providers has taken place to date to discuss resources and the type of program best suited for our rural community. All parties committed to having a Mental Health Court Program on line in 2017.

Goal: Expand the jail to create program and bed space for low-level offenders in the jail.

- Objective:**
- Seek alternative grant funding for jail expansion.
 - Apply for SB 863 funding for project.

Measure:

- Complete SB 863 application process with BSCC.
- Get final determination from State Fire Marshall that original plan to use modular jail construction is not acceptable.

Progress: For the past 2 years considerable time and effort has been spent in the design phase of a modular construction jail addition with 14 beds and classroom. Plans and preliminary site work were completed. The project came to a standstill at the point of getting the required sign offs from the State Fire Marshall. It appears at this point we will not get their approval to move forward so we are looking at alternative funding sources to move forward with expansion and renovation of our local jail facility.

Goal: Assign Mental Health Worker to Probation Caseload.

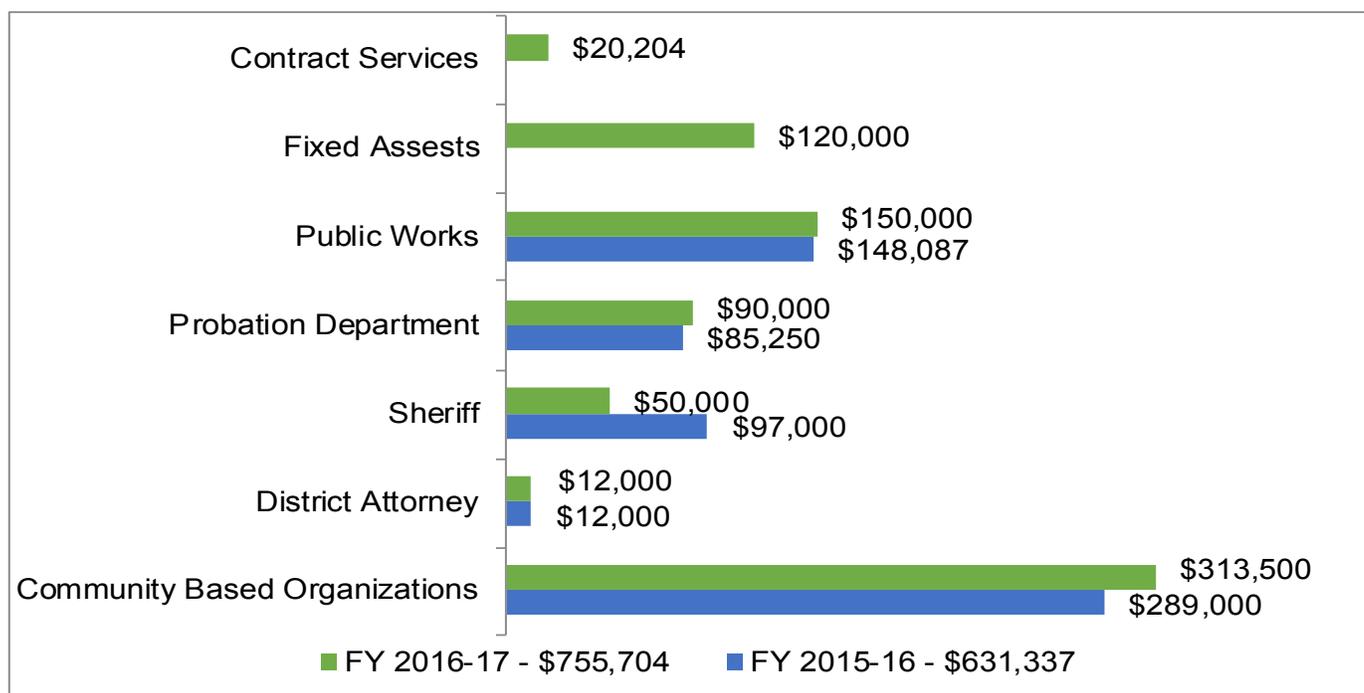
- Objective:**
- 100% of level 1 and 2 probation caseloads will be screened for services.
 - Establish mental health caseload specialty officer.

- Measure:**
- MOU in place with Human Services.
 - Level of Mental Health Worker to be determined.

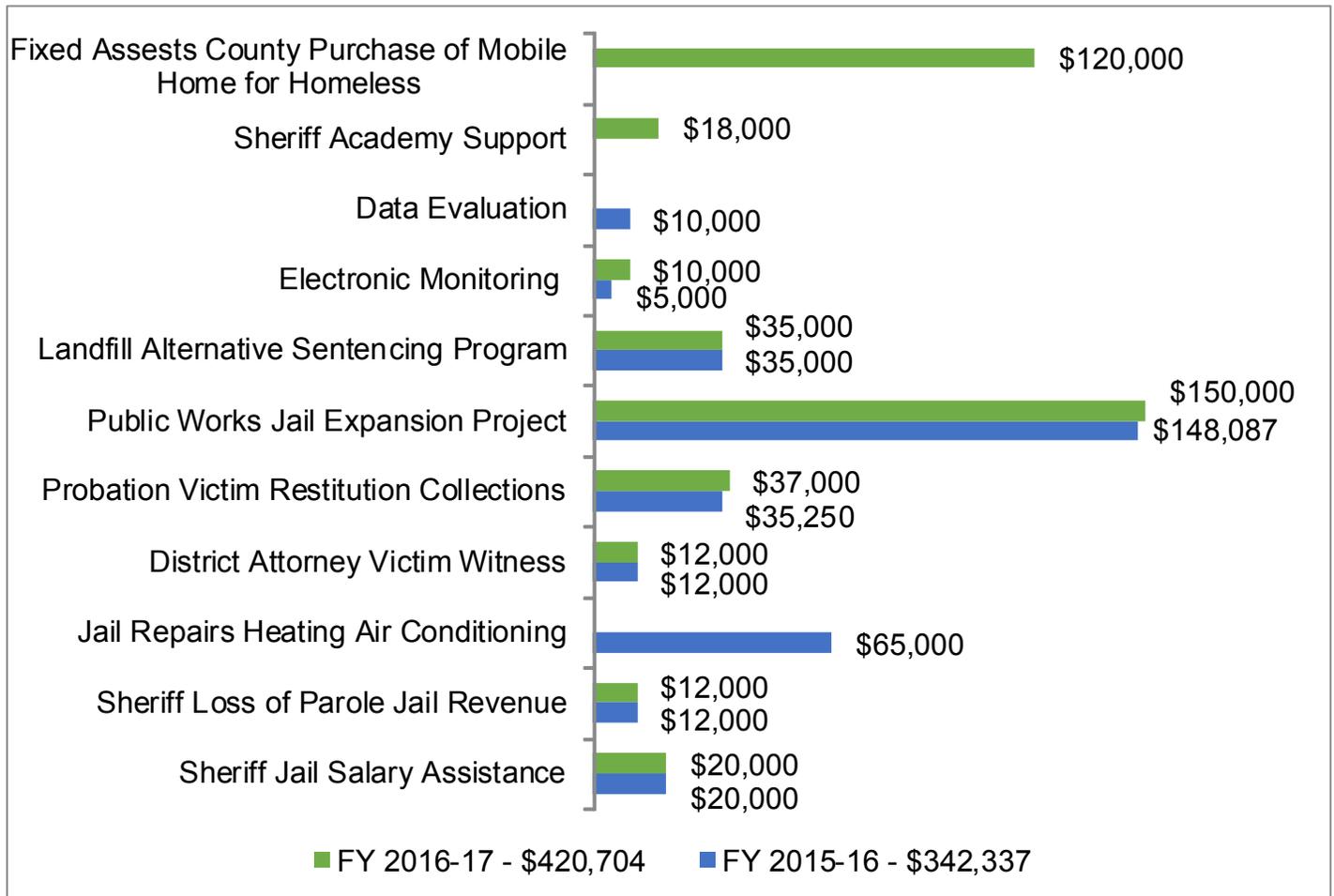
Progress: Verbal agreement between Probation and Human Services has been reached. We are currently working on the funding stream/source as well as identifying the level of mental health expertise needed. Probation has created a specialty caseload for probationers identified to have mental health issues impacting their ability to be successful on probation. The probation officer assigned to the caseload has started to receive specialized training.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

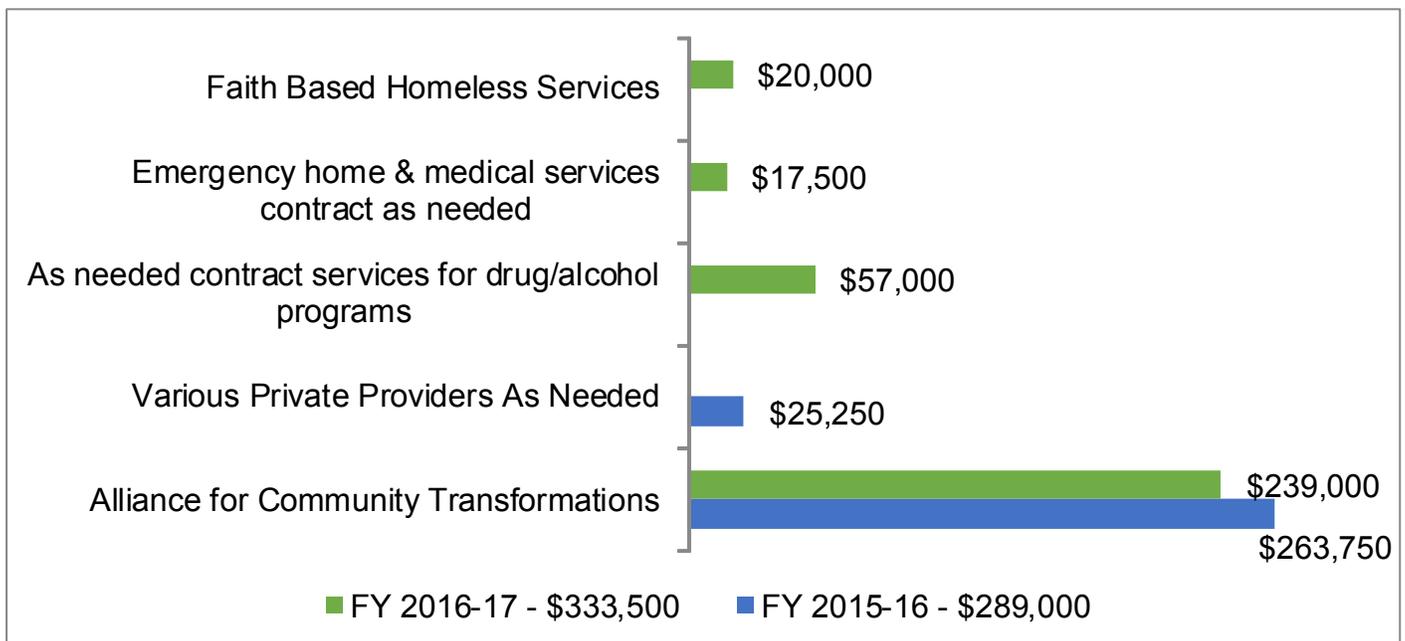
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. This past year we examined new crime arrest data on PRCS and 1170 populations for the past 5 years as well as their impact on available jail space.

Does the county consider evaluation results when funding programs and/or services?

Yes. Our largest contract since the implementation of our local AB 109 Implementation Plan has been in place with the same community based organization. Since that original contract we have learned that some services that we thought would be needed are not, and others were needed more than originally anticipated. To that end we will release a new RFP in the 2016-17 fiscal year.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

We have a drug court program that used to be grant funded. That funding has since been lost but we still continue with the program utilizing county general fund as well as other funding sources. We have no in-county drug treatment or residential programs requiring us to utilize programs outside of the county. We have no in county psychiatric or psychologist practitioners so the access is limited. Most psychiatric services are met through video conference visits or out of county visits.

This past year the Human Services Director received authorization from the Board of Supervisors to hire a Psychiatric Mental Health Nurse Practitioner and that position is currently being recruited for hire. Upon successfully hiring that position it will significantly improve our local law enforcement ability to respond to mental health crisis. The Human Services Director also implemented and emergency crisis team this past year to assist Law Enforcement responding to mental health based calls for service.

We have a community based organization that offers drug and alcohol recovery services as well as emergency housing for at risk populations. A few local churches continue to offer homeless overnight sleeping and meal assistance to our homeless population which has within it mental health and substance abuse clients.

We have one hospital in county that continues to struggle financially. The emergency room continues to provide services to many of those with mental health and substance abuse emergencies.

What challenges does your county face in meeting these programming and service needs?

The small size of our county and its rural nature makes it difficult to provide higher level MD and PHD level drug, alcohol, and mental health services. The lower pay structure of small rural counties compared to larger nearby urban counties makes recruiting and retaining highly qualified practitioners difficult. The same can be said of local law enforcements ability to hire and retain experienced officers. The county has recently made improvements to the salary structures and that has helped but it still remains a challenge.

The lack of transportation services within the county remains a major issue in providing and accessing services. There are limited options for public transportation and the geographic and distance hurdles make it difficult for those on with limited personal resources to travel to and from required and optional services.

For the past 3 years the CCP has been working on a jail expansion project that included a new type of jail construction that is pre-fab modular in design that other states and the federal government have utilize to reduce costs of jail construction. This project includes much mates while they are in custody as well as making it possible to develop a re-entry services plan. We worked with a contractor to develop plans as well as our county building and public works departments to do the necessary preliminary work. The past year the project has stalled with trying to get the necessary plan approval through the State Fire Marshalls office. As of this writing, while we are still hoping to be able to resolve this problem, it appears that the CCP will have to cancel the project and seek an alternative, more expensive and expansive construction method that will necessitate us seeking alternative funding sources. Considering we are already 1½ years from the original project completion timeline, this has been one of the more disappointing setbacks to our original CCP implementation plan.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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Community Corrections Partnership Membership

(October 21, 2016)

Pamela R. Markham
Chief Probation Officer

Chris Ruhl
Presiding judge or designee

Jill Martin
County supervisor or chief administrative officer or designee

David Eyster
District Attorney

Linda Thompson
Public Defender

Thomas Allman
Sheriff

Chris Dewey
Chief of Police

Bekkie Emery
Department of Social Services and Department of Mental Health and Alcohol and Substance Abuse Programs

Vacant
Department of Employment and Office of Education and Victims' interests

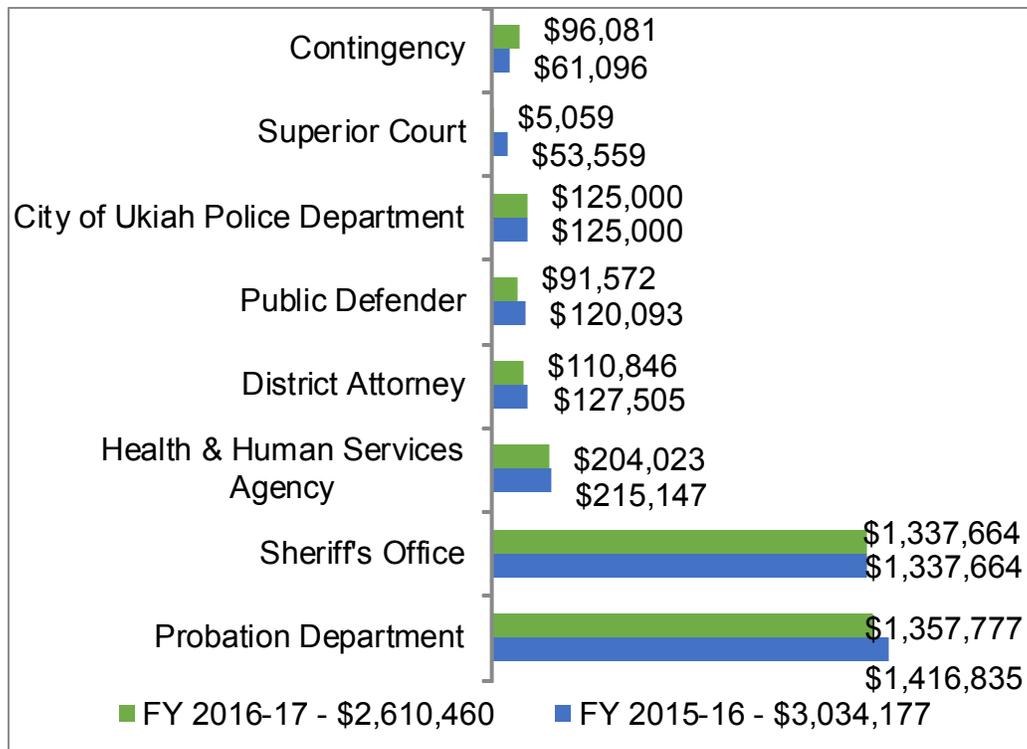
Tricia Guntly
Community-based organization

The CCP meets quarterly

Mendocino County

The CCP did not provide goals for FY 2015-16 or FY 2016-17.

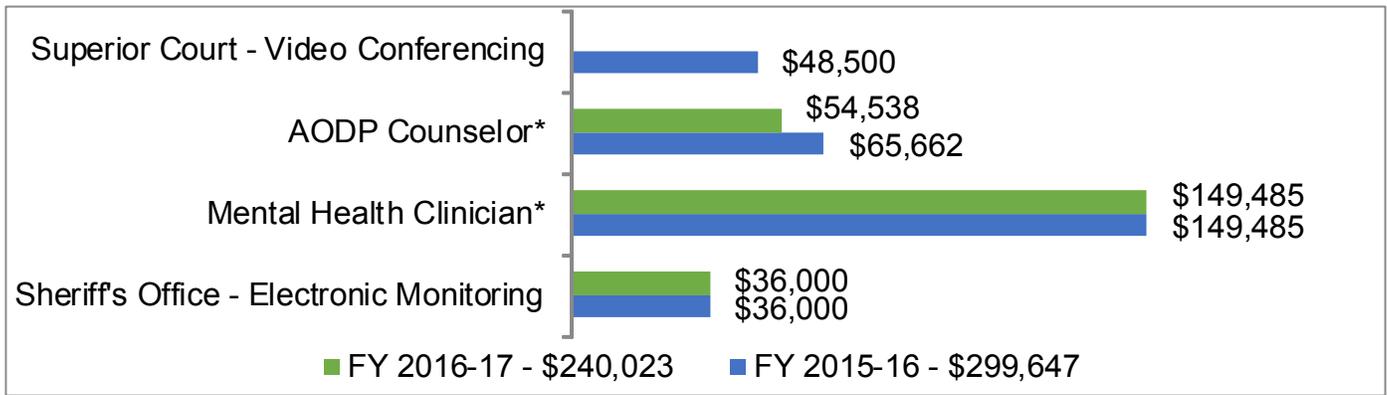
FY 2015-16 and 2016-17 Budget Allocations



FY 2015-16 Carryover: \$422,722

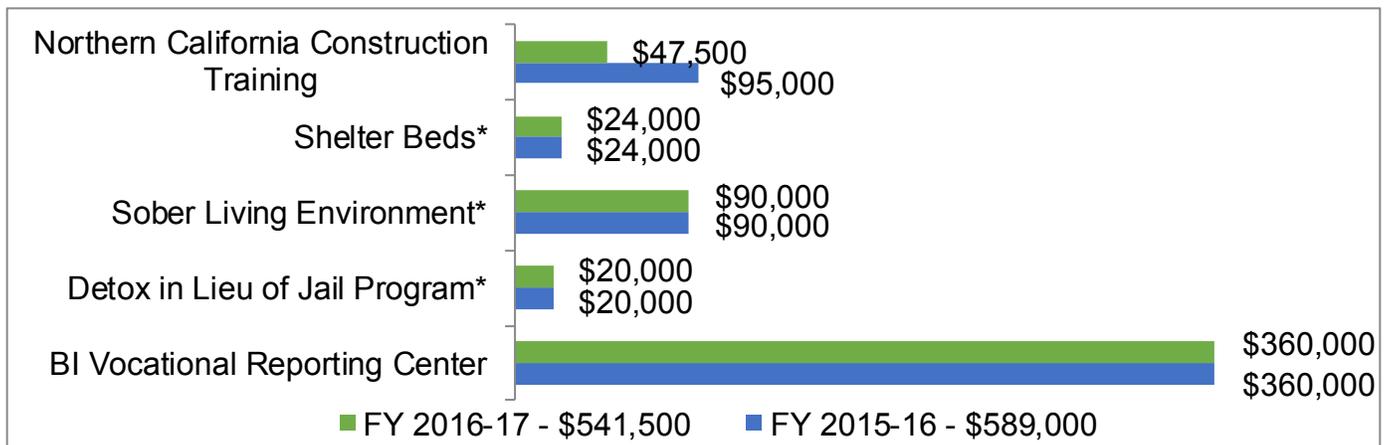
FY 2016-17 Carryover: \$717,562

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*Health and Human Services Agency

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



*Ford Street

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Sober Living Environment, Alcohol and Other Drug Program Services, Mental Health Clinician, Pre-Apprenticeship Construction Training Program, Drug Court, Behavioral Health Court.

What challenges does your county face in meeting these programming and service needs?

Housing and employment needs of offenders, expanding jail programs and services to meet inmate needs, expanding services to reach offenders residing in more remote areas of county, enhancing data collection and program evaluation, lack of resources (staff & funding).

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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**Community Corrections
Partnership Membership**
(October 21, 2016)

Jeff Kettering
Chief Probation Officer

Linda Romero Soles
Presiding judge or
designee

Vacant
County supervisor or
chief administrative
officer or designee

Larry Morse
District Attorney

David Elgin
Public Defender

Vern Warnke
Sheriff

Norm Andrade
Chief of Police

Scott Pettygrove
Department of Social
Services

Robert Morris
Department of
Employment

Yvonnia Brown
Department of Mental
Health

Robert Morris
Office of Education

Lamar Henderson
Community-based
organization

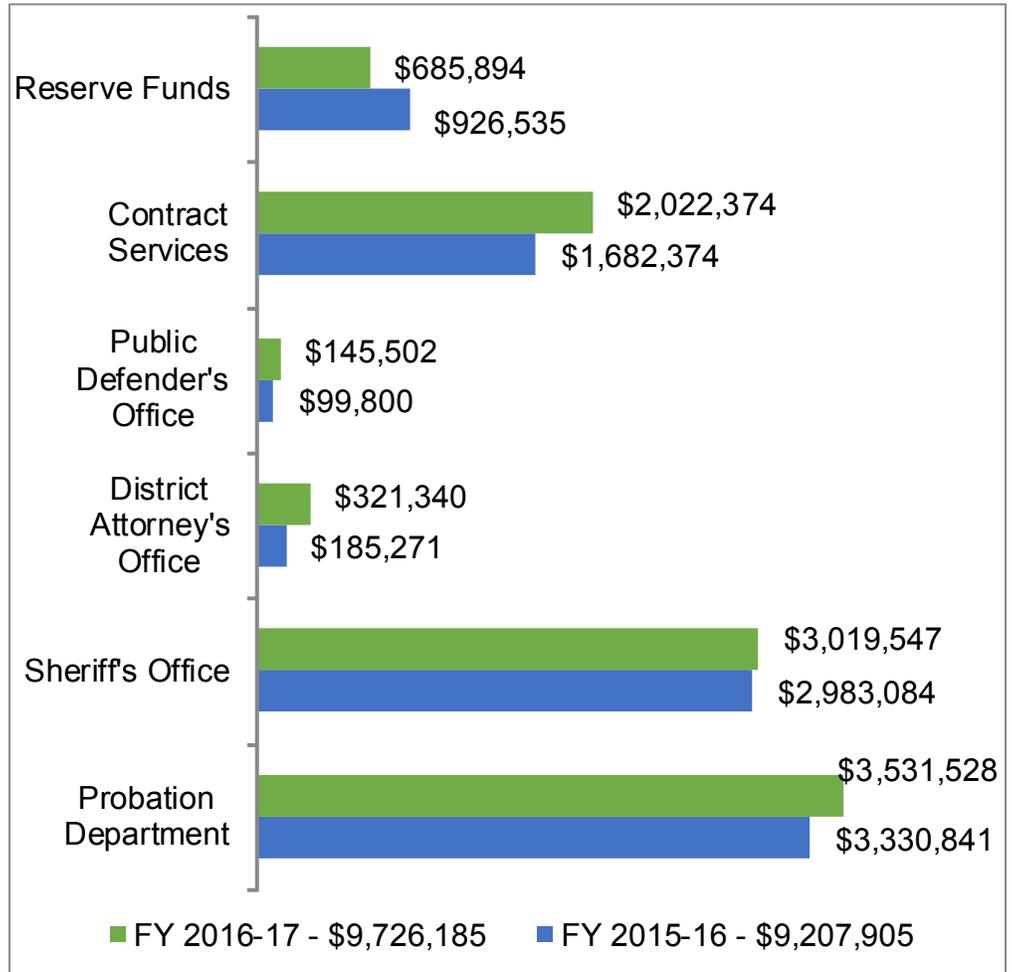
Lisa DeSantis
Victims' interests

The CCP meets quarterly

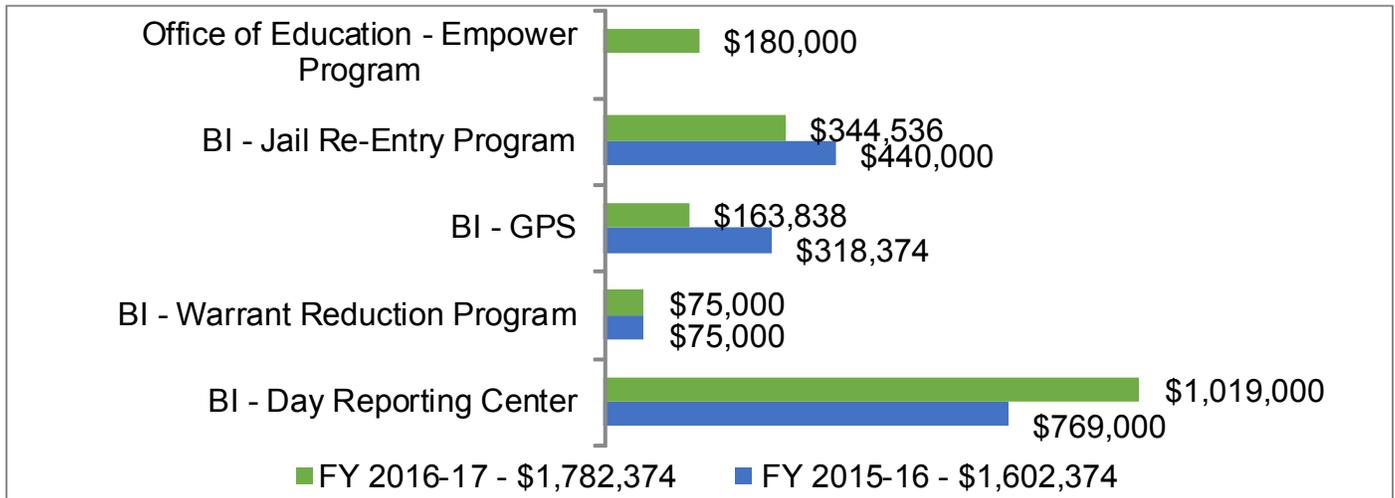
Merced County

The CCP did not provide goals for FY 2015-16 or FY 2016-17.

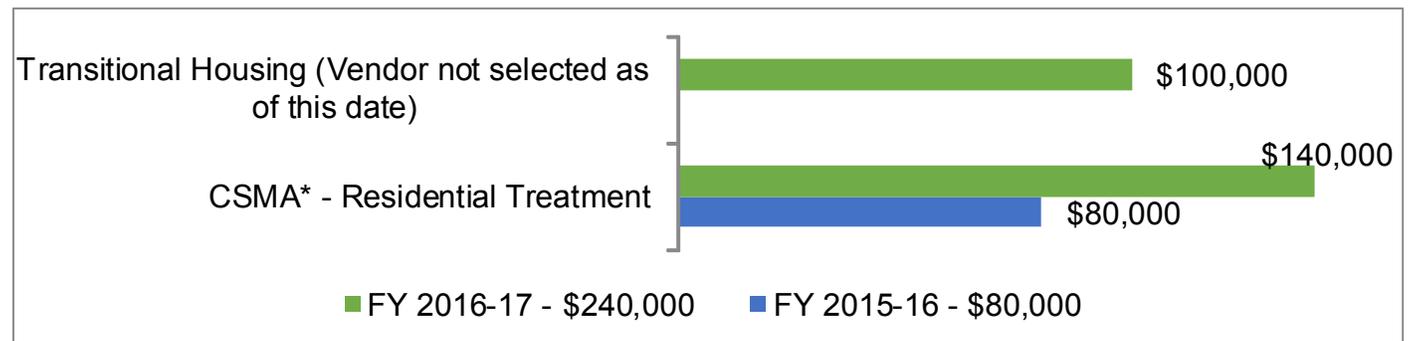
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



*Community Social Model Advocates

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Recidivism and local crime rates are evaluated.

Does the county consider evaluation results when funding programs and/or services?

Yes. The success rates of programs are considered.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41%-60%

We would like to better understand your 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?

- Behavioral Health and Recovery Services – Alcohol and Drug services, Mental Health Court and Drug Court.
- Social Services Department - Life Skills.
- Geo group: Day reporting centers (2) and Jail re-entry program.
- Department of Child Support – linkage to services to assist with child support.
- Workforce Investment – job readiness and finding.

What challenges does your county face in meeting these programming and service needs?

Since the implementation of AB 109 Merced County has not been able to fund a position to adequately track outcomes for criminal justice agencies. As Merced County took a 30% reduction of budget prior to 2011, we are now beginning to add programs, services and some necessary staff. The 2016-17 CCP plan includes a position that will be able to track outcomes for the AB 109 population and evaluate programmatic success.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Jail Re-Entry program continues to provide positive results to our clients in custody with linkages to out of custody programs. During the 2016-17 CCP plan, additional transitional services were added to the program to assist clients integrating back into the community after a time in custody.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Leadership for Life Program is a skills-based program created by the County's Social Services Department and facilitated by former clients.

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Community Corrections Partnership Membership
(October 21, 2016)

Kimberly R. Wills
Chief Probation Officer

Francis W. Barclay
Presiding judge or designee

Chester Robertson
County supervisor or chief administrative officer or designee

Jordan Funk
District Attorney

Sam Kylo
Public Defender

Mike Poindexter
Sheriff

Sid Cullins
Chief of Police

Kelly Crosby
Department of Social Services

Diane Fogle
Department of Employment

Karen Stockton
Department of Mental Health

Tara Shepard
Alcohol and Substance Abuse Programs

Mike Martin
Office of Education

Carol Cullins
Community-based organization

Robin Farnam
Victims' interests

The CCP meets monthly

Modoc County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Community Safety.

- Objective:**
- Development of jail facility that is safe for inmates and staff and provides for the safe and effective delivery of services.
 - Accurate identification, assessment and targeting of services to offenders using Static Risk and Offender Needs Guide (STRONG) R&N Assessment.
 - Use of evidence based tools and approaches in treatment, supervision and sentencing of offenders.

Progress: STRONG is being used for all offenders by probation officers. Treatment providers are being trained in Cognitive Behavioral Therapy, Motivational Interviewing (MI) and trauma-focused.

Goal: Reduce Recidivism.

- Objective:**
- Enhance community based programming for low risk offenders and those at risk of criminal behavior.

Progress: Parenting classes, Life Skills Classes, mental health counseling, and substance use groups are provided to inmates by outside services providers and jail. Eligible inmates are being enrolled in Medi-cal 30 days prior to release date so services can be seamlessly continued post release.

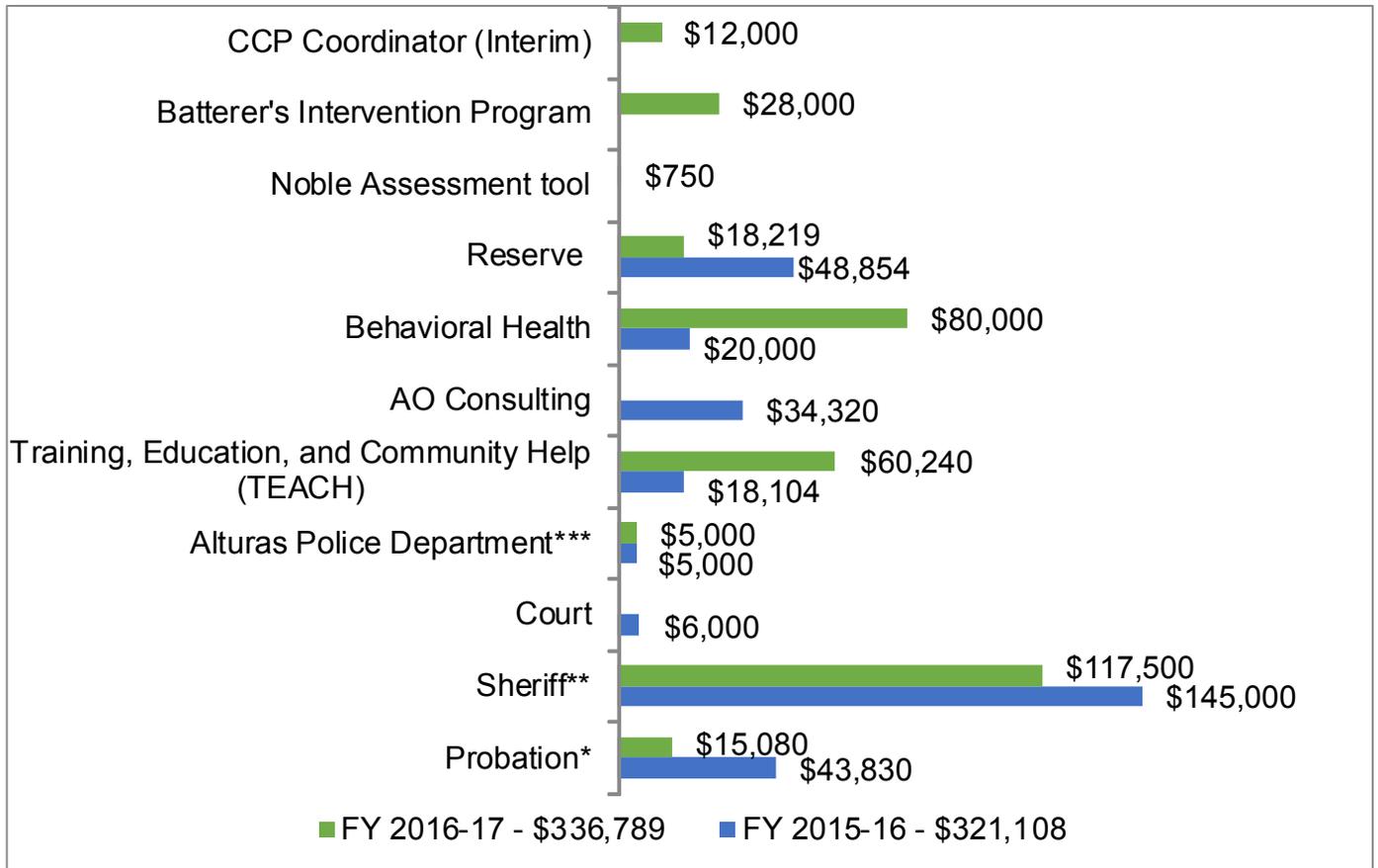
Goal: Enhance Collaboration.

- Objective:**
- Reinvestment in Local Programs.
 - Increase access to evidence based services and supports by promoting evidence based training opportunities for all CCP members.
 - Regularly measure and assess data and programs and use the results for program improvement.

Progress: Services for inmates have increased and planning has begun for services to offender in the community.

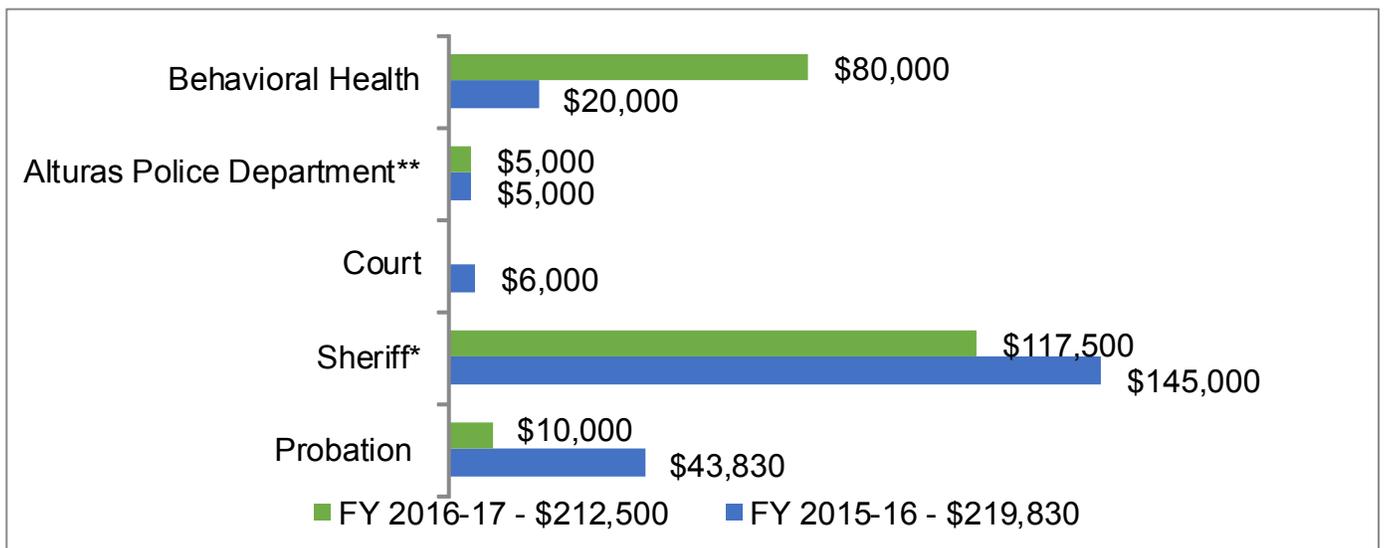
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



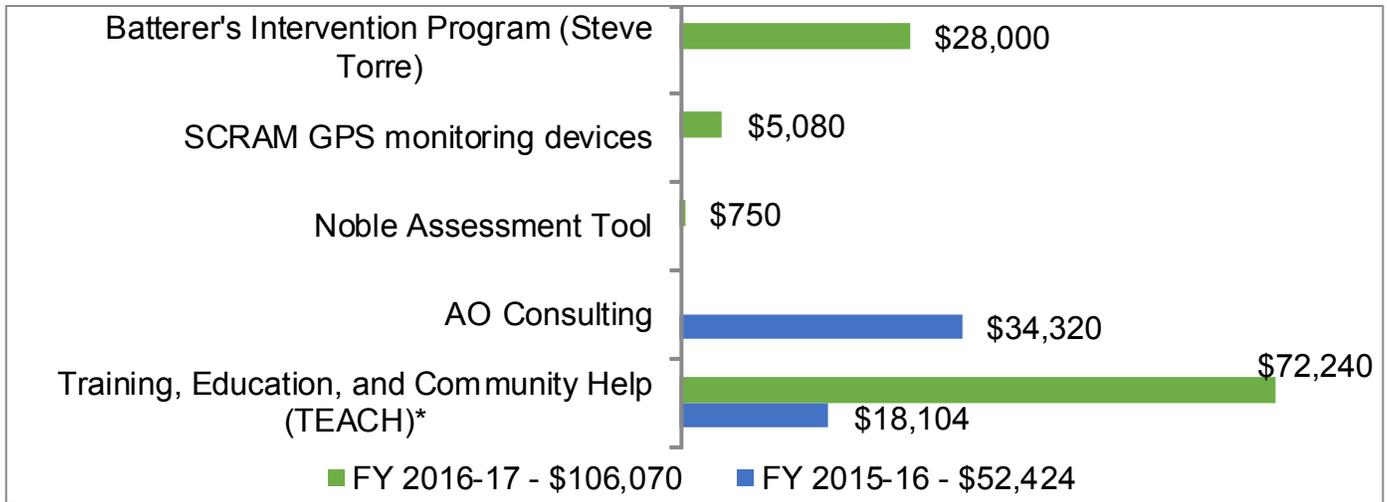
* FY 2016-17: SCRAM GPS (\$5,080); Care and Support of PRCS (\$5,000); Care and Support of Mandatory Supervision (\$5,000); ** FY 2016-17: .5 FTE Correctional Officer (\$37,000); Housing of AB109 inmates (\$75,000); Deputy for Community supervision involvement (\$5,000); *** FY 2016-17 officer for community supervision involvement

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



* FY 2016-17: 1/2 FTE Correctional Officer (\$37,500); Housing of AB109 Inmates (\$75,000); Deputy involvement in community supervision; ** FY 2016-17: Officer involvement in community supervision

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



* FY 2016-17: \$12,000 for an interim CCP Coordinator.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes.

Does the county consider evaluation results when funding programs and/or services?

Yes.

Does the county use BSCC definitions when collecting data? If so, which?

No.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Modoc County Behavioral Health Services offers group and individual services for substance use, mental health and co-occurring as well as case management services.

T.E.A.C.H Inc, offers Parenting Classes in the jail and to the community utilizing the Nurturing Parenting Program. Lifeskill classes are also taught weekly. Hazelden's "Personal Growth and Practical Guidance for Everyday Life" is the curriculum for life skills They also provide emergency housing, heating, and food as well as services and advocacy for victims of Domestic Violence and Sexual Assault.

A.O. Consulting and Counseling Services offers individual and group mental health counseling in the jail.

What challenges does your county face in meeting these programming and service needs?

Biggest challenges are due to the very small population of 9,400 residents and a very large area to serve of over 4,500 square miles. We have difficulty attracting competent professionals.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Nothing at this time.

Community Corrections Partnership Membership
(October 21, 2016)

K.S.Humiston
Chief Probation Officer

Hon. Stan Eller
Presiding judge or designee

Leslie Chapman
County supervisor or chief administrative officer or designee

Tim Kendall
District Attorney and Victims' interests

Randy Gephart
Public Defender

Ingrid Braun
Sheriff

Al Davis
Chief of Police

Kathy Peterson
Department of Social Services and Department of Employment

Robin Roberts
Department of Mental Health and Substance Abuse Programs

Stacy Adler, PhD
Office of Education

Susi Baines
Community-based organization

The CCP meets quarterly

Mono County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Increase substance abuse treatment for offenders in Mono County.

Objective:

- 100% of participants will receive screening using an evidence based practices assessment.
- 100% of in-custody clients will be provided the opportunity to participate in treatment services.

Measure:

- Number of participants being screened.
- Number of in-custody clients participating in treatment services.

Progress: Progress towards this goal has been achieved, remains on-going and is being augmented by an outside agency beginning FY 2016-2017.

Goal: Repair and Enhance Communications Systems.

Objective:

- Vendor will be selected.
- 100% of equipment will be compatible with all systems.
- 100% of equipment will be compatible with Probation's new caseload management system.

Measure:

- Vendor selected.
- All systems compatible.

Progress: Complete.

Goal: Provide a transition house for AB109 Offenders.

Objective:

- 100%of releases will be transitioned through the transition house.
- 100% will receive counseling, work assistance and other needs using a transition plan.

Measure:

- Number of releases admitted to transition house.
- Number of programs, education and counseling attending.

Progress: The project is in the planning stage.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Community Safety.

- Objective:**
- Provide staff for supervision in detainment.
 - Provide increased law enforcement.
 - Provide accurate identification, assessment, and targeting of services to offenders using the Static Risk and Offender Needs Guide (STRONG), a Risk Needs.

- Measure:**
- Provide transition services to detained participants for release.
 - Provide assistance for participants released from detainment if they do not have a home to return to.
 - Use of evidenced based tools and approaches in treatment, supervision and sentencing of offenders.

Progress: Assessments are being used for all offenders by probation officers. Treatment is being provided by behavioral health. Motivational interviewing training has been provided to other departments by a probation facilitator. All outcomes are progressing.

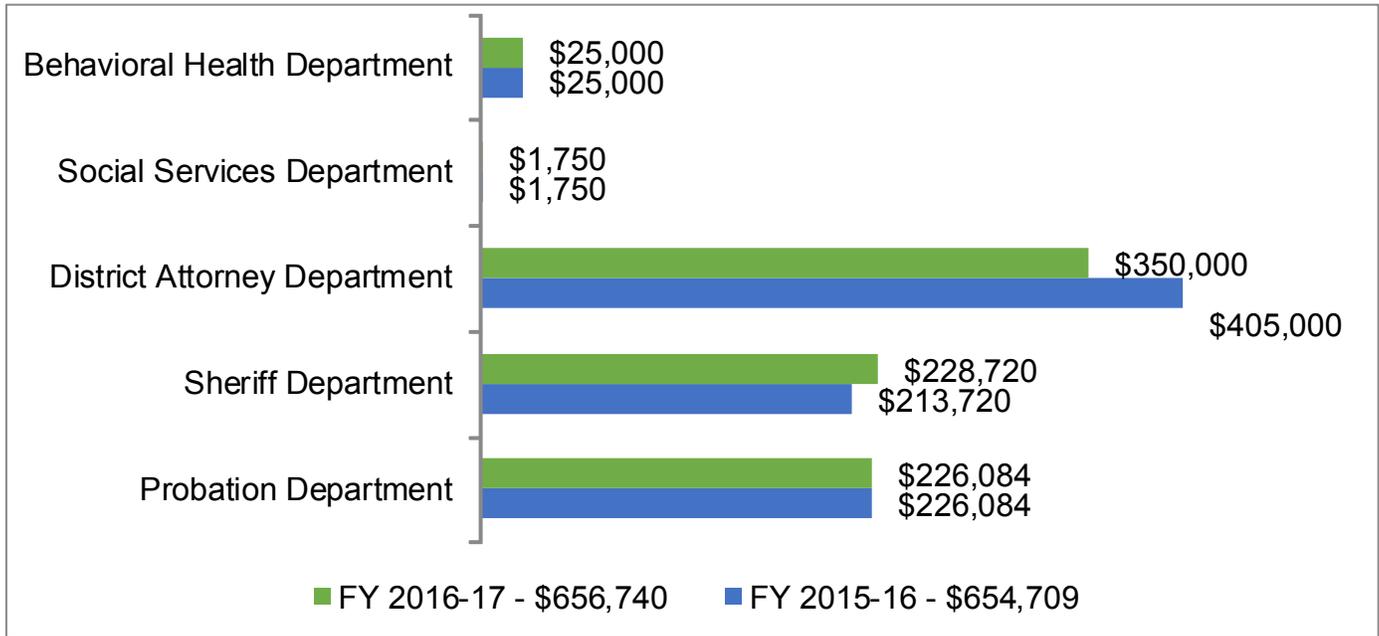
Goal: Increase treatment and services for offenders in Mono County.

- Objective:**
- 100% of participants will receive screening using an evidence based practices assessment.
 - 100% of in-custody clients will be provided the opportunity to participate in treatment services.

- Measure:**
- Number of participants being screened.
 - Number of in-custody clients participating in treatment services.

Progress: On-going.

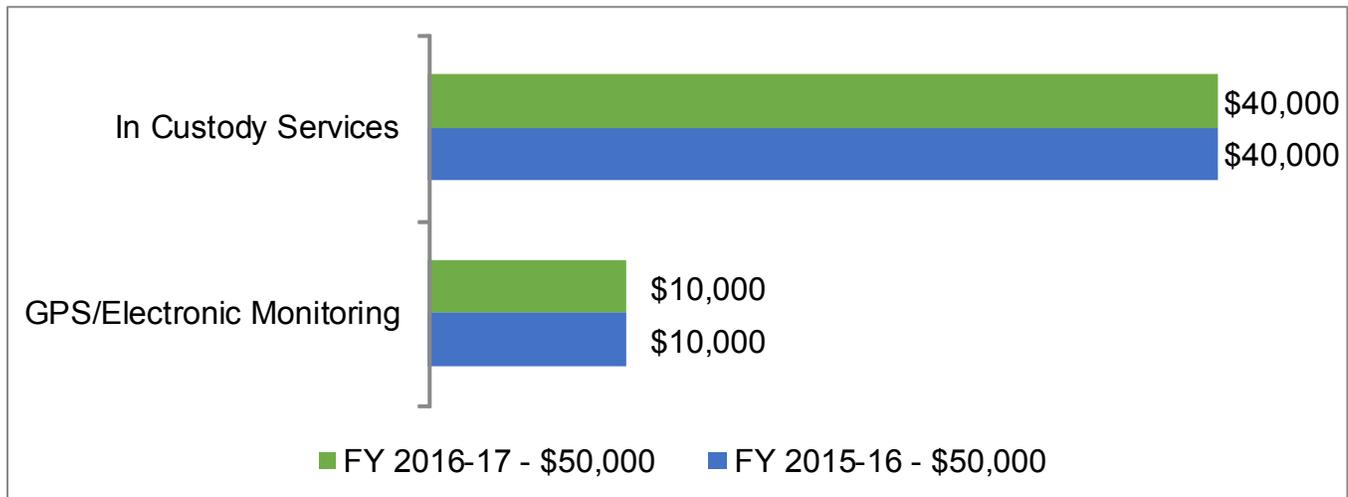
FY 2015-16 and 2016-17 Budget Allocations



FY 2015-16 Carryover: \$216,845

FY 2016-17 Carryover: \$174,814

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- Mono County does not have non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes.

Does the county consider evaluation results when funding programs and/or services?

Yes.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

Mono County Behavioral Health has available the following services: outpatient psychotherapy for individuals and families. Case management for individuals. Outpatient substance use treatment for individuals, tele-psychiatry for any person who meets medical necessity and has MediCal or MediCare, Wellness Groups (no charge). All services are available in Spanish and English and are provided in all areas of Mono County. MCBH provides all mandated services for the county - DUI, Batterer's Intervention - in Spanish and English. We are a county mental health clinic and see anyone with MediCal who meets the medical necessity criteria; additionally, we provide services to county residents who have private insurance or can pay on our sliding fee scale. MCBH is the crisis team for Mono County and does all assessment for 5150's at our local Emergency Department. MCBH provides weekly MRT services in our county jail; and, psychological services on an 'as needed' basis.

What challenges does your county face in meeting these programming and service needs?

We have an increase in client's who are most comfortable receiving their treatment in Spanish; we need more bi-lingual, bi-cultural Spanish speaking licensed staff. Staff from all departments are focused on an 'abstinence model' of SUD treatment. We need all staff trained in the Harm Reduction model and we desperately need a medical provider who is willing to prescribe Medically Assisted Treatment (MAT) for opioid and meth addiction.

We need this in our jail and for those in our community. We are in the process of getting county approval to re-model a house owned by MCBH (now closed and once used as Sober Living); we hope to have housing available by the end of 2018. In the meantime, we are in dire need of supportive housing for those in these programs. We are always challenged by the distance from our home office to outlying areas. We also have few coordinated services on our Reservations and are not meeting the needs of our Native American residents.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We have moved the transitional house project to Behavioral Health. We have added transitional services to the jail as well as the continuation of group counseling.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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Community Corrections Partnership Membership
(October 21, 2016)

Marcia Parsons
Chief Probation Officer

Teresa Risi
Presiding judge or designee

Manuel Gonzalez
County supervisor or chief administrative officer or designee

Dean Flippo
District Attorney

Frank Dice
Public Defender

Stephen Bernal
Sheriff

Edmundo Rodriguez
Chief of Police

Elliott Robinson
Department of Social Services

Joyce Aldrich
Department of Employment

Elsa Jimenez
Department of Mental Health

Aimee Miller
Alcohol and Substance Abuse Programs

Nancy Kotowski
Office of Education

Robin McCrae
Community-based organization

Pamela Patterson
Victims' interests

The CCP meets quarterly

Monterey County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Continue to enhance public safety by providing support services to transitional housing clients.

Objective:

- 50% of housing clients will attend in-house Life Skills group meetings.
- 90% of housing clients will be employed, full time students, or attending day reporting center (DRC) services.

Measure:

- Number of transitional housing clients who are employed or attending the DRC.
- Number of clients who are participating in Life Skills group meetings.

Progress: 100% of housing clients attend Life Skills group meetings. Participation is now a mandatory requirement for residents. 90% of residents are employed, full time students or are attending the DRC. Additionally, those on a waiting list for transitional housing are now required to attend the DRC if they are not employed or attending school full time.

Goal: Continue to enhance public safety by expanding housing resources.

Measure: Increase the number of potential housing opportunities/landlords willing to provide housing by 50%.

Progress: The database had 33 potential housing opportunities in the last report (15-16 FY). The goal of a 25% increase was surpassed to 59%, an increase to 52 potential housing opportunities. We will continue with this goal to add

Goal: Continue to enhance public safety by increasing timely access to services by expanding substance use provider contracts.

Measure: Begin new RFP process in the next 6 months.

Progress: The RFP process began during the 15/16 FY. Now the process is in the final stages of the federal government approving a new substance use disorder service plan, which will lead to changes in contracts and an expansion of local services.

Goals, Objectives, Outcome Measures and Progress

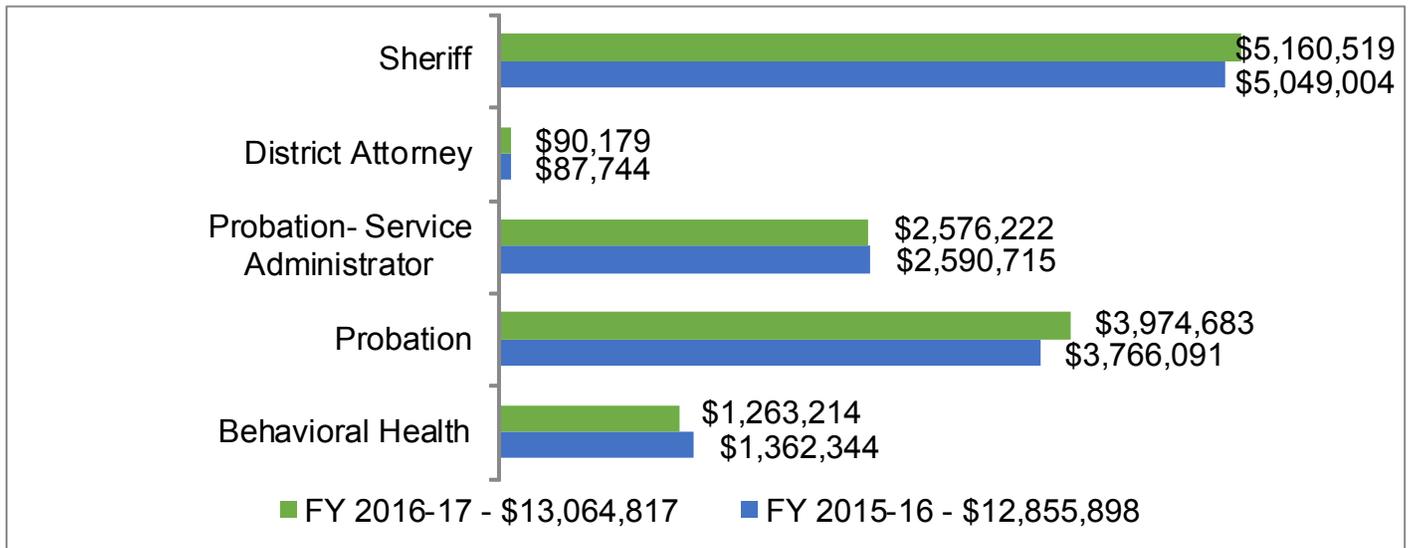
FY 2016-17

Goal: Increase our understanding of the clients we serve in order to better meet their needs in service delivery.

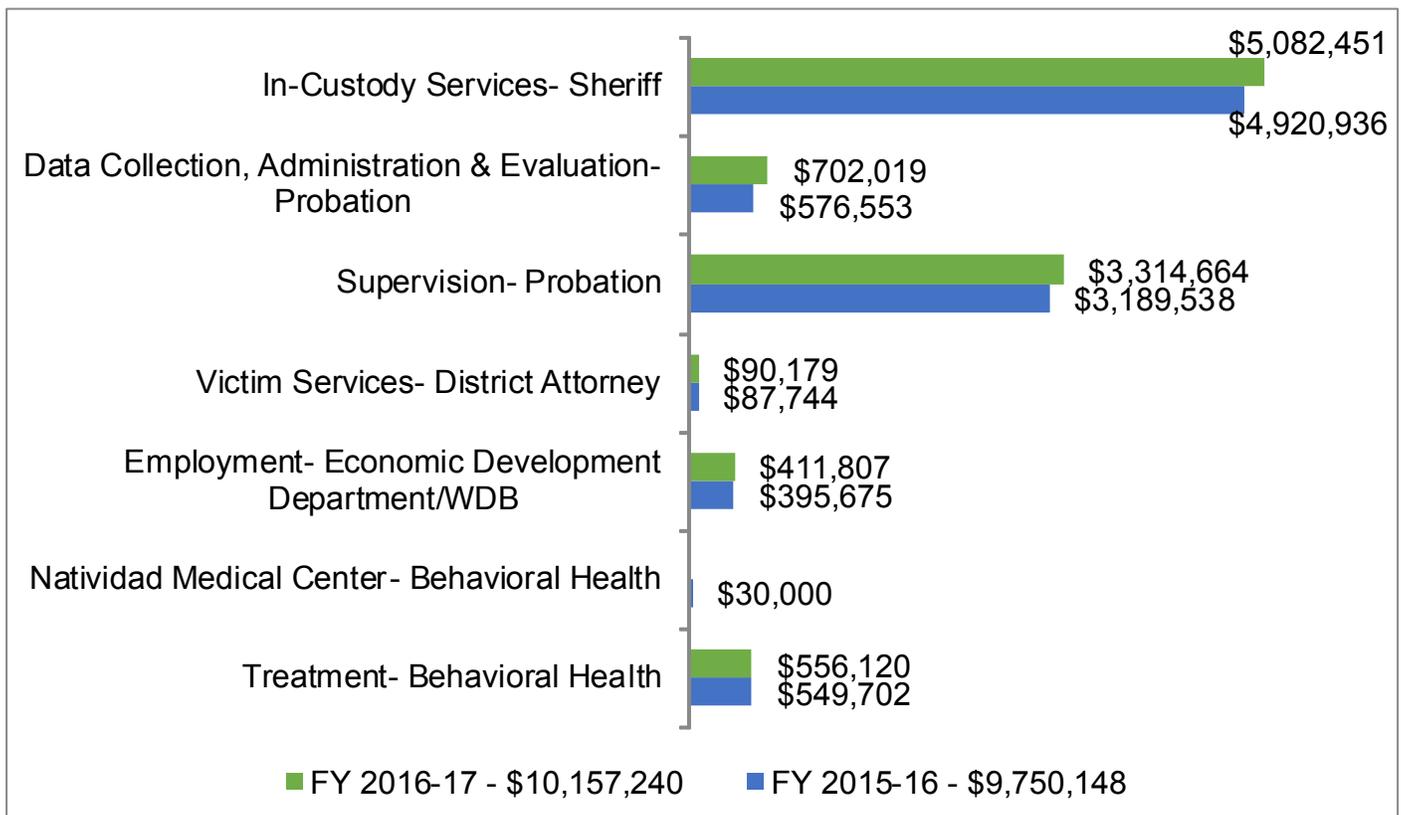
Objective: • Create and provide a satisfaction survey to clients who complete an AB109 funded program.

Measure: Distribute a satisfaction survey to at least 70% of clients who complete an

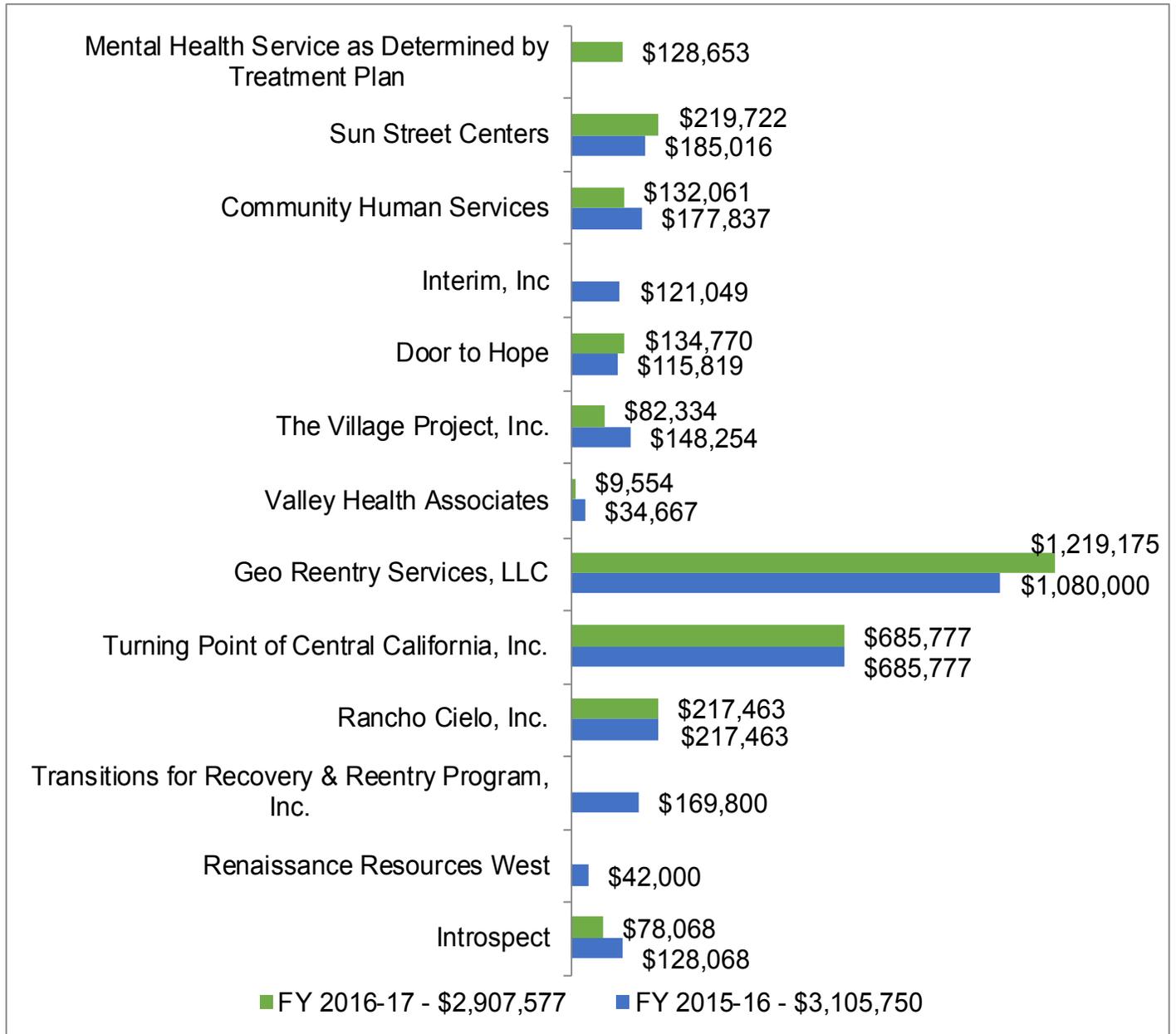
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Beginning this year, we have the ability to track service delivery and program outcomes through the implementation of Efforts to Outcomes, a software program through Social Solutions.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

We would like to better understand your 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?

1. Short term (30 days) re-entry program on-site at the probation department.
2. Behavioral Health services; assessment, on-site psychiatric services, psychotropic medication, outpatient and inpatient substance abuse programs, outpatient and inpatient mental health programs, supportive services, methadone, case management.
3. Day Reporting Center Services.
4. Emergency housing, transitional housing, case management and referral services, financial help in obtaining housing (rent, deposit).
5. On-site monthly meeting for clients to access information and services from service providers.
6. Employment services; one county employment service agency and two private employment service agencies; employment workshops, job training, job readiness, on the job training, subsidized employment, technical training.
7. Alternative to detention strategies.
8. Co-located services at our Re-entry Services Center.

What challenges does your county face in meeting these programming and service needs?

It has proven difficult to find service providers who are trained in the use of any evidence based curriculum. Staff turnover in community based programs has also been a challenge. Staff turnover often results in a gap in data collection, service delivery and ability to provide services by well trained staff. Ongoing training is needed in using evidence-based practices and best practices for private agencies.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Realignment brought in an era of increased responsibility at the county level for providing quality, evidence based treatment that is safe, cost-effective, and proven to reduce recidivism. Having the ability to determine if we are successful in any of these areas requires a great deal of data. At the onset of Realignment, we did not have the time needed to develop contracts for services that included minimum standards in training, use of approved curriculum or outcome measures. Instead, we needed contracts developed quickly, to provide the population already in our community with treatment and services. Existing contracts did not contain required data collection, use of evidence based curriculum, or outcome measures. Through the adoption of a guided process, we now have been able to develop two contracts, through a competitive process, for existing services that include detailed expectations and goals that are agreed on at the onset, and as a result, data collection efforts have improved. Our long term goal is to create contracts for all AB109 services through this process to ensure we are providing the best services possible while outlining our goals, objectives and outcome measures. Using this blueprint to develop all future contracts will allow us to ensure a high quality of services and improve our data collection and reporting efforts to the community, and local and state stakeholders.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In October 2014, we established two houses for transitional living up to 180 days, with capacity for 12 men. Since that time, we have implemented life skills groups for residents and a requirement that every resident is either employed, attending school, or attending our day reporting center. These requirements are in addition to all the programs extended to every client who is eligible for AB109 services. Although we are not at a place to measure program effectiveness as it relates to recidivism, we are trying to increase our ability to measure program outcomes with the information we have. As a result, we have found that of those that completed the transitional housing program during the 15/16 FY, 85% of them secured stable housing or residential treatment.

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Community Corrections Partnership Membership
(October 21, 2016)

Mary Butler
Chief Probation Officer

Honorable Mark Boessenecker
Presiding judge or designee

Mark Luce
County supervisor or chief administrative officer or designee

Gary Lieberstein
District Attorney

Ron Abernethy
Public Defender

John Robertson
Sheriff

Steve Potter
Chief of Police

Howard Himes
Department of Social Services and Department of Employment

Bill Carter
Department of Mental Health

Jacqueline Connors
Alcohol and Substance Abuse Programs

Barbara Nemko
Office of Education

Vacant
Community-based organization

Yuka Kamiishi
Victims' interests

The CCP meets bi-monthly

Napa County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Mental Health Court to serve 15 clients and have successful completion of the program.

Objective:

- Increase number of referrals to the program.
- Increase number of cases accepted to the program.

Measure:

- Measure the number of offenders in the program.
- Measure the number of offenders who successfully complete the program.

Progress: Mental Health Court numbers has increased. There are currently 8 clients in mental health court. There have been four graduates from the program this year.

Goal: Increase the number of adult offenders receiving cognitive behavioral programs.

Objective:

- Assign 60% of high risk offenders to programs.
- Increase number of programs offered to offenders.

Measure:

- Measure number of offenders enrolled in program.
- Measure number of offenders graduating from program.
- Complete client satisfaction surveys to measure client views.

Progress: All new probationers attend an orientation cognitive behavioral program. This has increase client interest in programs designed to change their behavior. The Department has increased the number of programs offered. During the year 544 offenders were referred to various programs. There were 218 graduates from programs. That is a 40% graduation rate and many are still participating in their program. Client surveys show that clients believe they learned new skills and made behavior changes while in the program. Almost all graduates considered the time in program as positive and many requested additional services.

Goal: Probationers to work on their top three criminogenic needs in an effort to reduce recidivism.

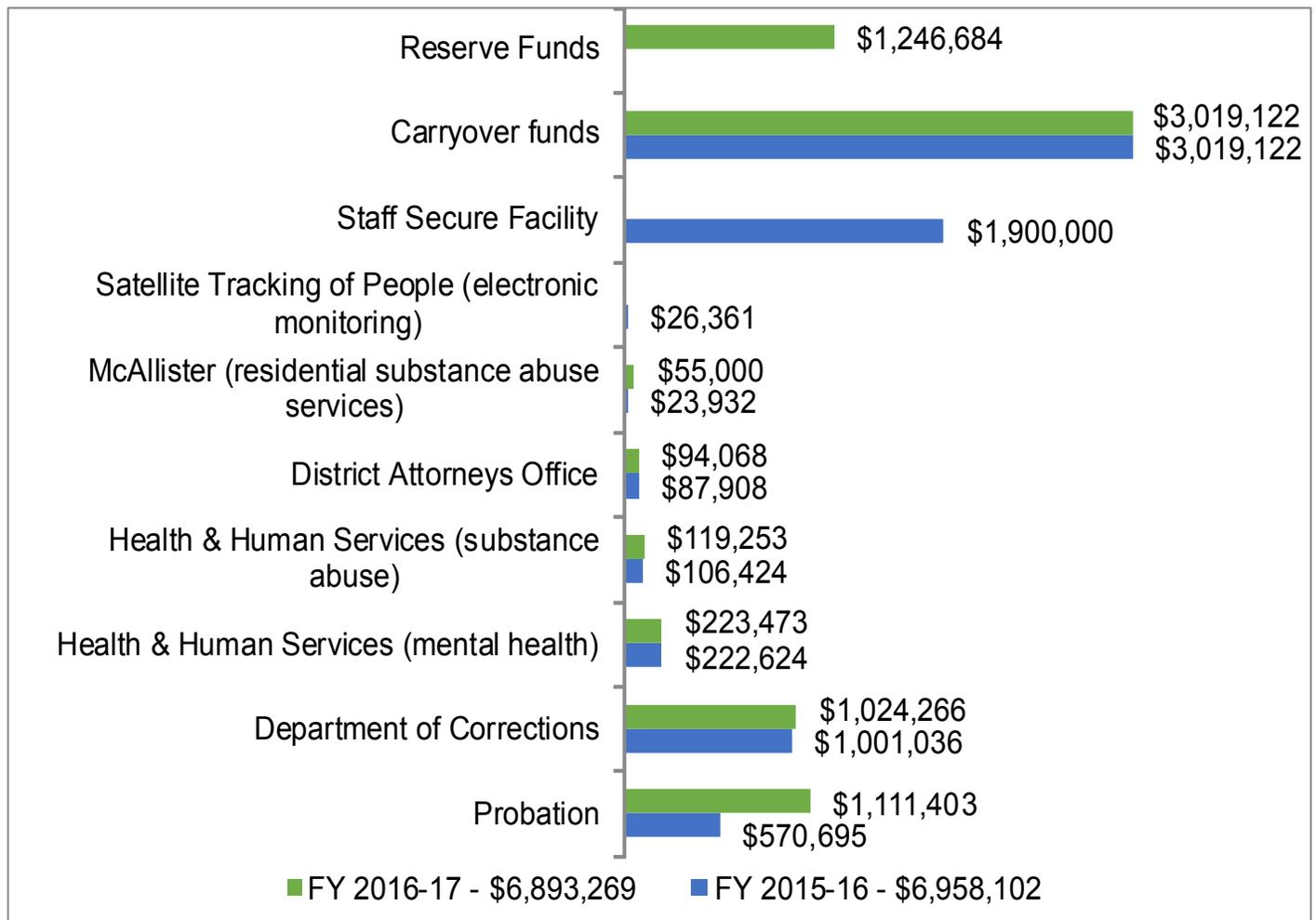
- Objective:**
- Risk assessment is used to determine top three needs.
 - Probationers are referred to the appropriate programs.
 - Sufficient programs are available for probationers.

- Measure:**
- Tracking number of program hours.
 - Tracking program hours matching criminogenic needs.
 - Monitoring Probation Officers delivery of programs.

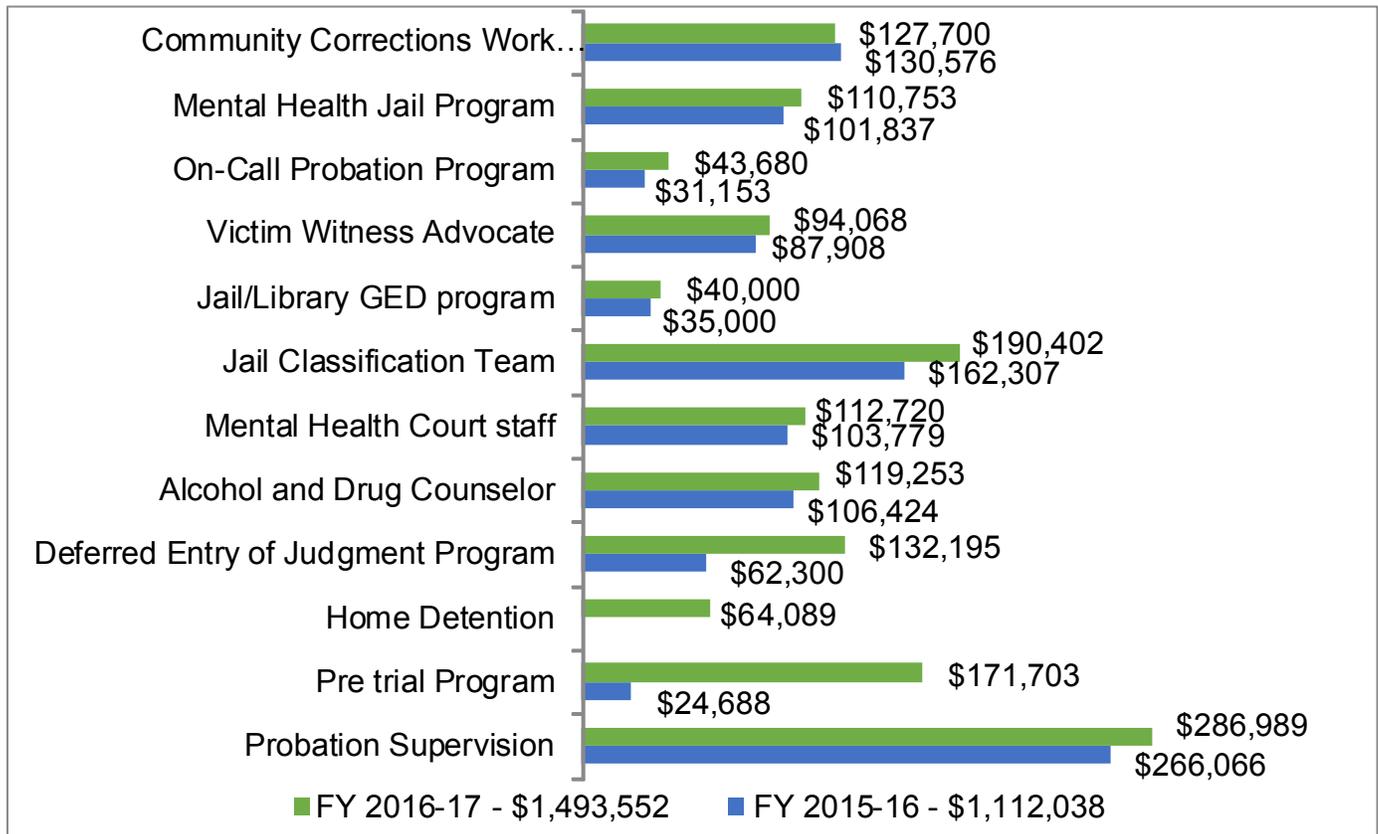
Progress: Napa County is now a pilot county for Dosage Probation. The focus of the program is to ensure that offenders receive the appropriate amount of treatment covering their top three issues. There are now 40 probationers that have agreed to be a part of the program in the first six months of the program.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

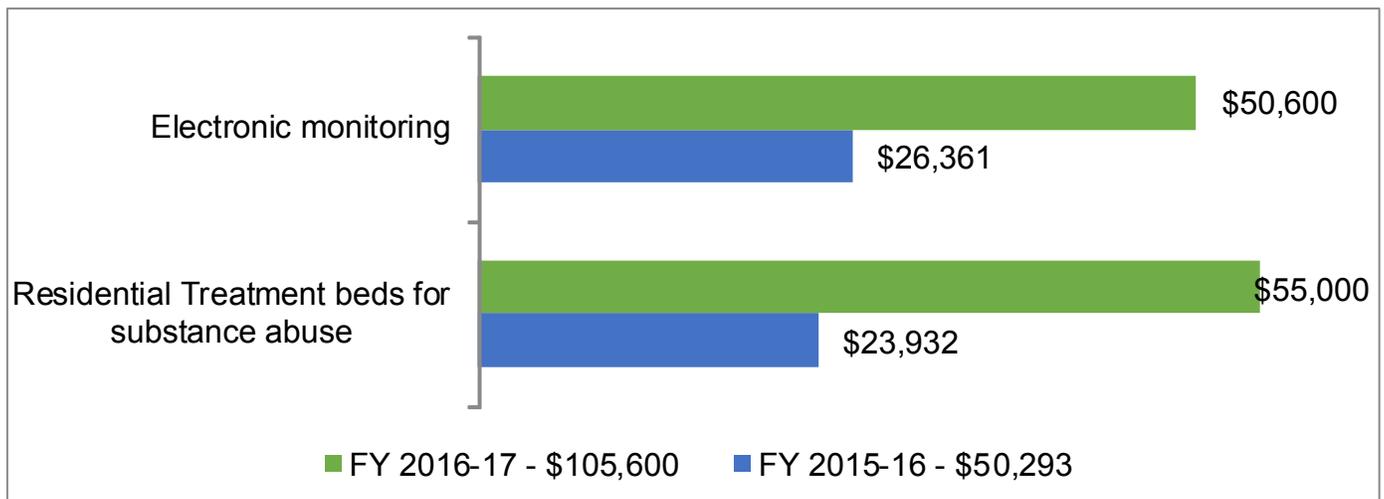
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Locally monitoring of numbers of offenders receiving programs and success in either remaining out of custody or for mental health clients staying out of psychiatric facilities.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41%-60%

We would like to better understand your 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?

Mental Health services are available for offenders starting in custody and continuing to their time in the community. The Public Safety Realignment allocation is used to provide mental health staffing in the jail to provide crisis intervention and stabilization as well as discharge planning and assuring a smooth transition of services once in the community. Additionally, the jail has funding for full time nursing staff who provide medications and a psychiatrist that is able to evaluate and prescribe medication for those offenders in need. The allocation also funds a Mental Health Court for those highest risk offenders who need an intensive program to be successful in the community. Napa County Health and Human Services offers case management to the severely mentally ill and this service is available to those in the criminal justice system that meet the criteria. A self help program is also available to offenders.

What challenges does your county face in meeting these programming and service needs?

Providing mental health services in custody can be challenging due to the varying length of stays in jail. Some offenders are back out on the street before mental health has time to provide any stabilizing services. Additionally, since mental health services are voluntary not all that could benefit from services are willing to accept services. The number of mentally ill in custody is higher than the amount of services offered. Napa County has Napa State Hospital in the county so the jail is impacted by inmates from that facility and those offenders require a level of services that is not able to be provided by a jail mental health program.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Napa County has put an emphasis on providing appropriate services for offenders. The current pilot of Dosage Probation will be something that other counties can watch as it is implemented and we see the program's effectiveness.

Training the criminal justice system to understand risk and needs of offenders and the importance of using evidence based programs has also been effective.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Napa County has a Community Correction Service Center that provides evidence based programs to offenders. It is an intensive program assuring that the offender receives frequent contact to deal with all the issues bringing them into the criminal justice system. The program success rate has been consistent since it began. The recidivism rate for those graduating the program is 24%. This program opened prior to realignment so no realignment funds are used for this program. It is the most intensive program available to offenders.

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Community Corrections Partnership Membership
(October 21, 2016)

Michael Ertola
Chief Probation Officer

Scott Thomsen
Presiding judge or designee

Rick Haffey
County supervisor or chief administrative officer or designee

Clifford Newell
District Attorney

Keri Klein
Public Defender

Keith Royal
Sheriff

Alex Gammelgard
Chief of Police

Michael Heggarty
Department of Social Services

Vacant
Department of Employment

Rebecca Slade
Department of Mental Health and Alcohol and Substance Abuse Programs

Holly Hermanson
Office of Education

Joe Festerson
Community-based Organization

Vacant
Victims' interests

The CCP meets quarterly

Nevada County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Hire an analyst.

Objective:

- Data Collection.
- Program Evaluation.
- Establish best practices for Nevada County.

Measure:

- Complete data collection guidelines.
- Determine if current programs used are effective in reducing recidivism or change of thinking.
- Develop measures of success for the programs which are determined to be the most beneficial for clients and most cost effective.

Progress: Currently evaluating all programs in Nevada County using the George Mason University "Assess a Program Tool." Full time analyst hired and will start January 17, 2017.

Goal: Develop programs within the jail.

Objective:

- Have Cognitive behavioral therapy (CBT) and Moral Reconciliation Therapy (MRT) groups at the jail.
- Clients complete CBT/MRT while in custody.

Measure:

- Hold at least three groups at the jail in all pods.
- Clients are released from custody and have their supervision modified with successful completion of programs in jail.

Progress: There are currently MRT groups in the jail. Population has dictated this is efficient to meet the current need. Jail sentences have been reduced, eliminating the ability to complete these programs while in custody. The probation department is currently collaborating with the Sheriff's Department to increase the availability of individual programming while in custody.

Goal: Contract with Northern California Construction Training (NCCT).

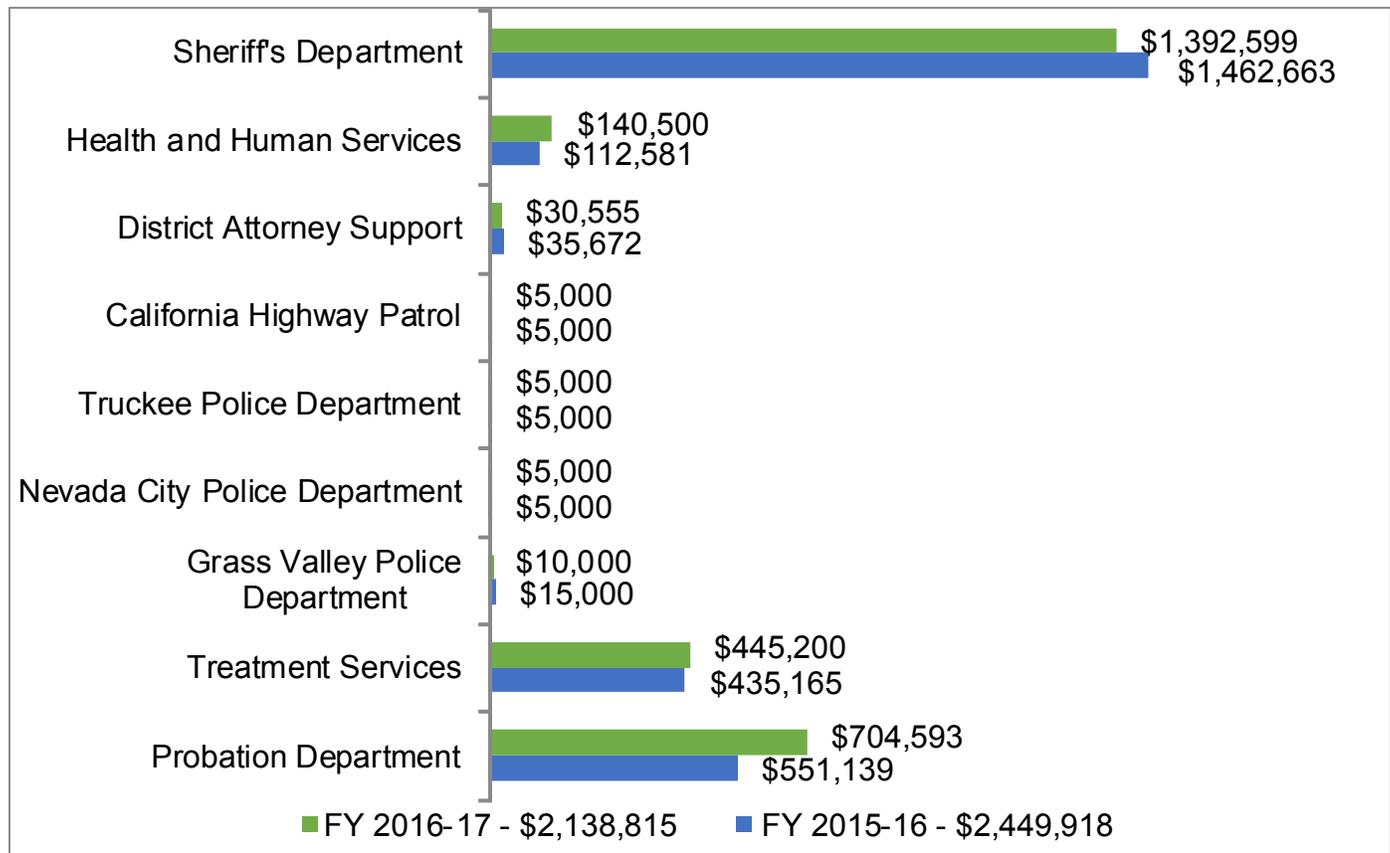
- Objective:**
- Establish NCCT in Nevada County.
 - Funnel clients who meet criteria of the program.
 - Increase employment of clients who graduate the program.

- Measure:**
- Have at least 15 AB 109 clients in the program at all times.
 - Clients are engaged in gainful employment after successful completion of the NCCT program.

Progress: Contract has been approved through the Board of Supervisors (BOS). Current population of AB 109 clients has been determined to be inadequate to have a stand-alone program for NCCT. Currently evaluating different approaches within and outside of the department to bolster population that would be eligible to participate in this program.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

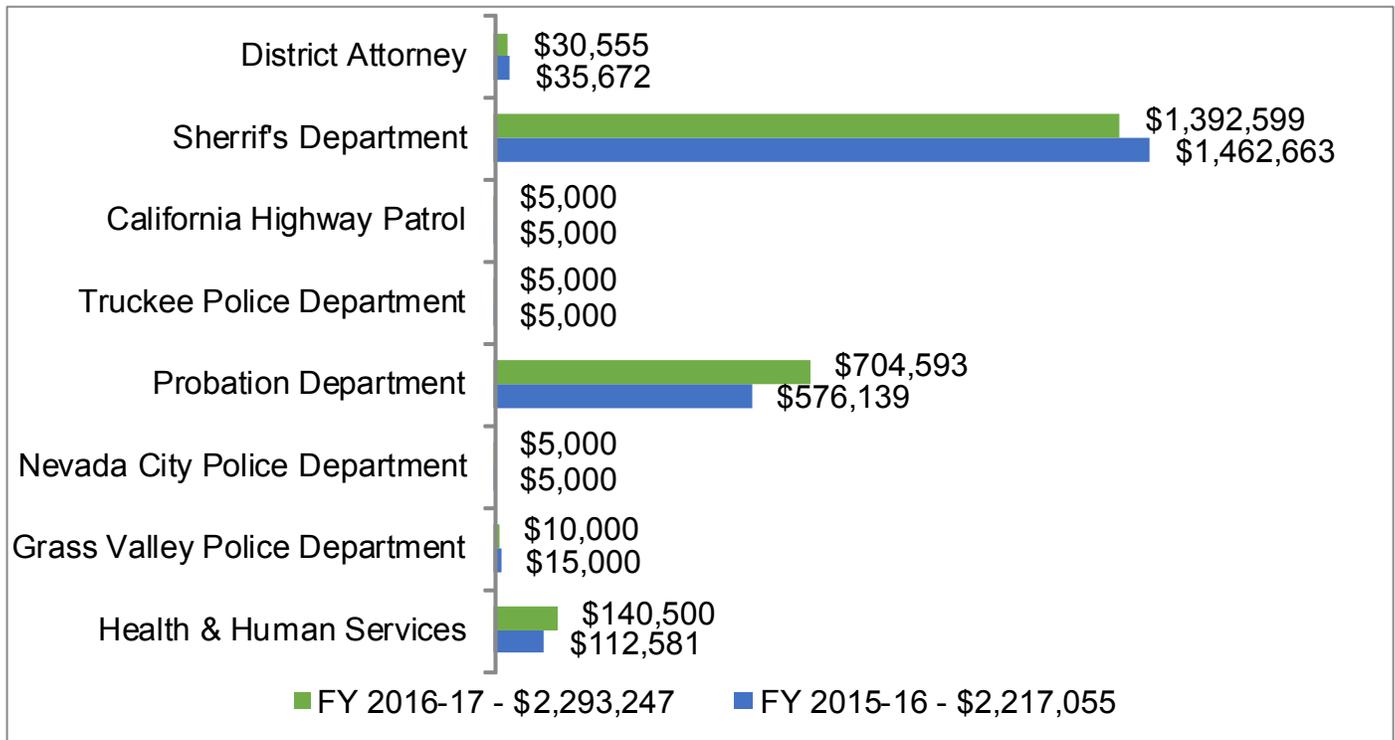
FY 2015-16 and 2016-17 Budget Allocations



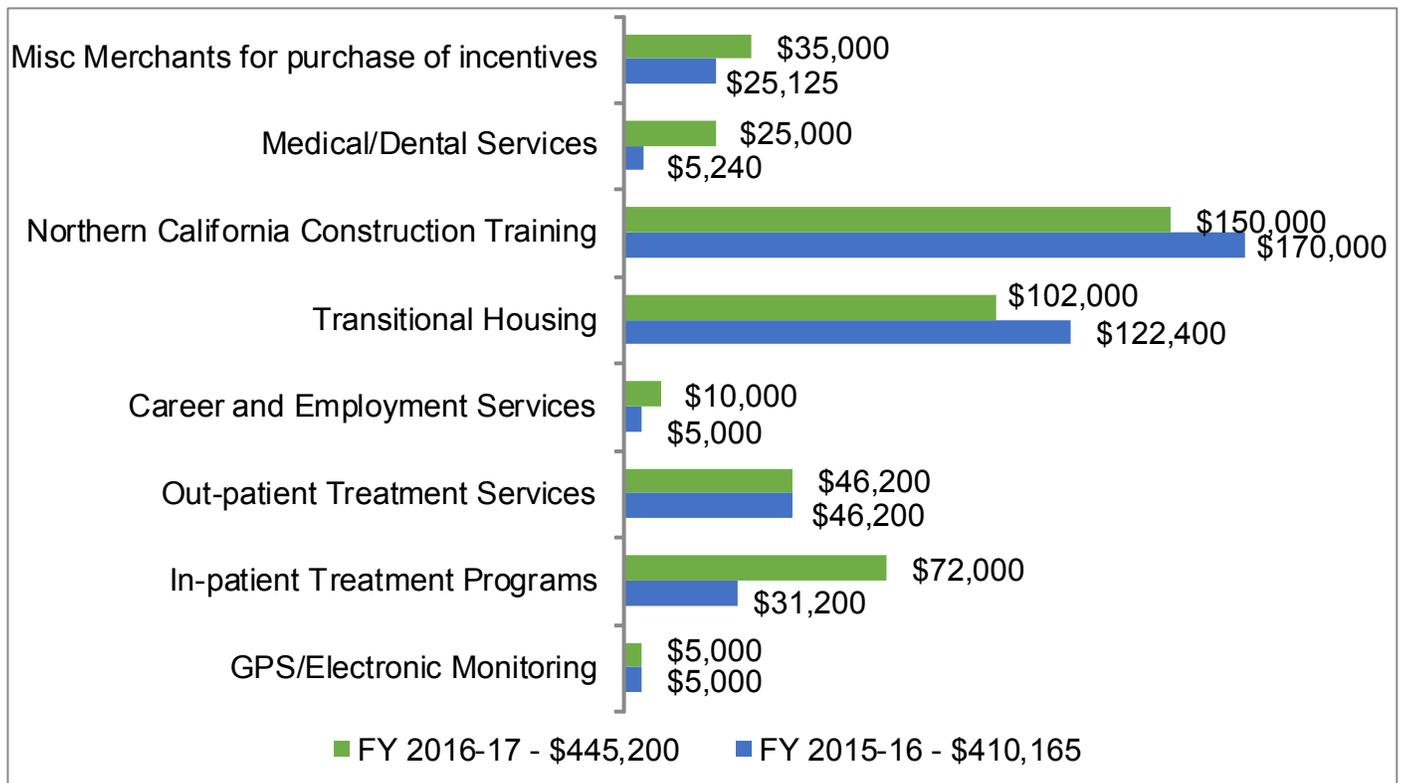
FY 2015-16 Carryover: \$177,302

FY 2016-17 Carryover: \$599,632

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. We are currently assessing all programs in Nevada County using a tool provided by George Mason University.

Does the county consider evaluation results when funding programs and/or services?

Yes. We are currently undergoing the large evaluation process within the county. We plan on moving towards performance based contracts with our funded providers in the near future.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21%-40%

We would like to better understand your 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?

Nevada County currently has a Mental Health Court, DUI Court, and Adult Drug Court, and a juvenile and adult MIOCR Grant. We have an internal eligibility worker that assists our entire population with securing benefits such as Medi-Cal, general assistance, and Cal-Fresh. We have two main treatment programs within Nevada County. Common Goals, offers outpatient treatment and transitional housing services and Community Recovery Resources, which offers inpatient, outpatient, transitional and detox services with multiple locations within Nevada County. We have a Behavioral Health Therapist on staff who services AB109 and High Risk Offenders as well as a 211 services within. We also work with the Alliance for Workforce Development (known as One Stop) where clients receive employment services. We also partner with Project Heart, a mentoring program that provides pro-social connections and activities.

What challenges does your county face in meeting these programming and service needs?

Housing continues to be an issue in Nevada County. While we have bolstered our transitional housing over the last year, rental properties continue to be very scarce within the county and a continued barrier to the long term stability of our clients.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Collaboration. If there is one thing that makes Nevada County unique it is the positive and collaborative relationships with all criminal justice partners. The District Attorney is supportive of the mission of the Probation Department and the Public Defender trusts that we are acting in the best interests of our clients. This collaborative climate has allowed us to remove many barriers that many other jurisdictions have struggled to overcome for years.

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Community Corrections Partnership Membership
(October 21, 2016)

Steve Sentman
Chief Probation Officer

Vacant
Presiding judge or designee

Todd Spitzer
County supervisor or chief administrative officer or designee

Tony Rackaukas
District Attorney

Sharon Petrosino
Public Defender

Sandra Hutchens
Sheriff

Todd Elgin
Chief of Police

Mike Ryan
Department of Social Services

Andrew Munoz
Department of Employment

Mary Hale
Department of Mental Health and Alcohol and Substance Abuse Programs

Byron Fairchild
Office of Education

Meghan Medlin
Community-based organization

Ronnetta Johnson
Victims' interests

The CCP meets monthly

Orange County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Implementation of a streamlined and efficient system in Orange County, to manage our additional responsibilities under Realignment.

Objective: • Participate in pilot project with BSCC and PPIC designed to identify best practices among county corrections agencies.

Measure: • Data submitted to PPIC to determine the number of programs identified as Best Practices being utilized for the realigned offender population.

Progress: Orange County is one of 12 counties participating in a Multi County Study by the Board of State and Community Corrections (BSCC) and the Public Policy Institute of California (PPIC). The goals of this study are: a) compile recidivism statistics for the full realignment population and range of recidivism measures; b) analyze relative effectiveness of different services, programming, sanctioning and other recidivism-reduction strategies; and c) assist counties with improvements in data collection and the use of data for continuous self-evaluation.

Goal: Implementation of a system that provides public safety and utilizes best practices in reducing recidivism.

Objective: • Expand the Day Reporting Center to include offenders under general probation supervision to benefit from this evidence-based intervention.

Progress: On May 12, 2015, the Board of Supervisors approved the annual renewal of the current DRC contract with BI Inc. The contract was amended to include provision of re-entry services to the general supervision offender population. The average daily population at the DRC increased from 44 in May 2015 to 72 in June 2016. Between July 30, 2012 and December 31, 2015, the DRC processed a total of 1,473 referred offenders, of which 1,099 entered the program. The following attachment is a status report through December 31, 2015: An updated report will be completed for the period through December 2016.

Goal: Implementation of a system that effectively utilizes alternatives to pre-trial and post-conviction where appropriate.

Objective: • Establish a pre-trial program that utilizes evidence-based practices.

Measure: • Obtain grant.

Progress: In 2015, the Judicial Council awarded a grant to Orange County to establish a pre-trial pilot program. A multi-agency team, led by the OC Superior Court, includes OC Probation, HCA, OCSD, District Attorney, and Public Defender's office. Implementation is scheduled for 2016.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Creation of a centrally located Reentry Facility in Orange County to manage our additional responsibilities under Realignment.

Objective: • Establish a Reentry Facility in Orange County.

Measure: • Obtain grant.

Progress: The County of Orange, as part of the County's 2017 Strategic Priority, will create and open a centrally located Reentry Facility in Orange County. Plans for the new facility, which would be the first of its kind in Orange County, are underway and is currently being developed by the CCP Workgroup.

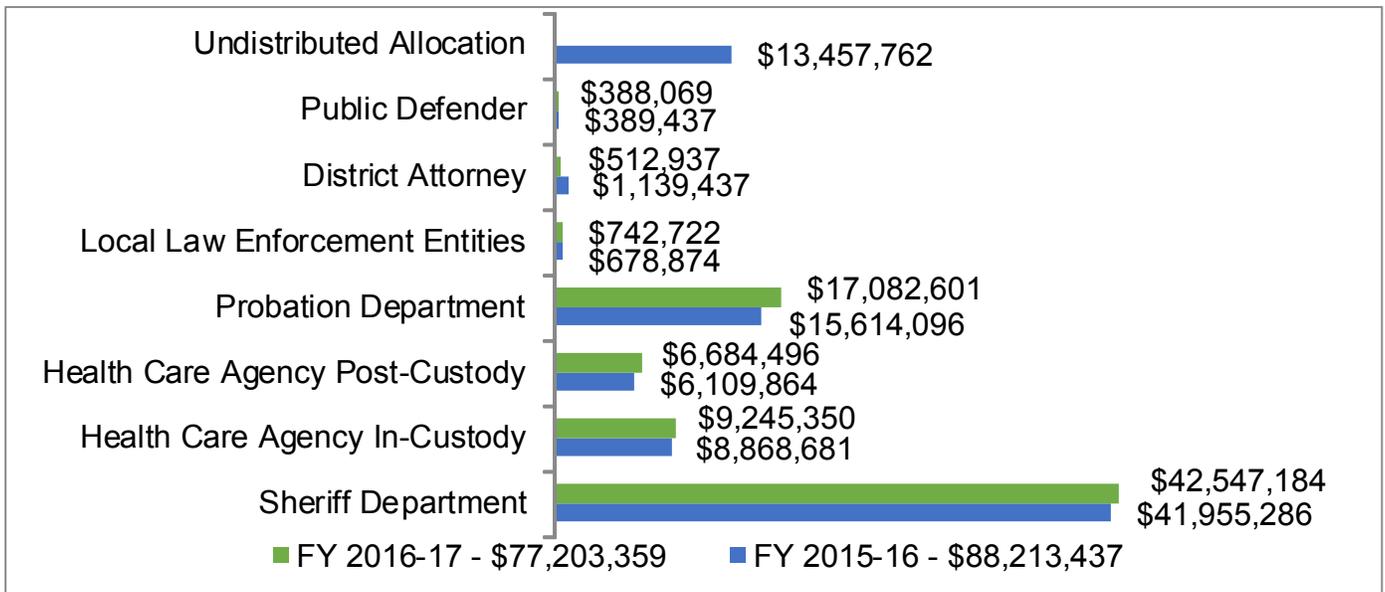
Goal: Implementation of a system that effectively utilizes alternatives to pre-trial and post-conviction where appropriate.

Objective: • Successfully implement a pre-trial pilot program that utilizes evidence-based practices.

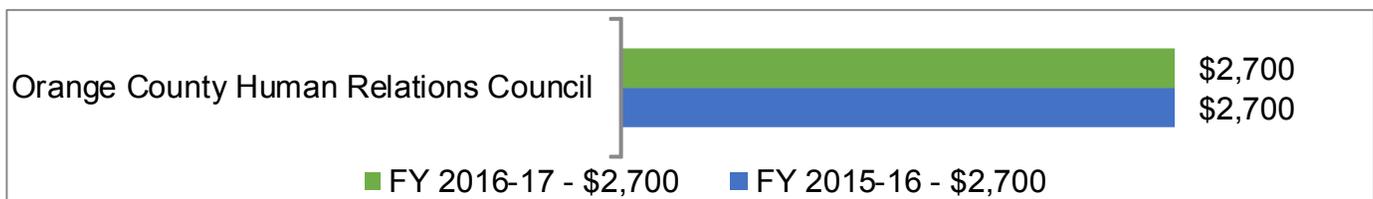
Measure: • Obtain grant and collect recidivism data.

Progress: In 2015, the Judicial Council of California awarded a grant to Orange County (OC) to establish a pre-trial pilot program. The multi-agency team, led by the OC Superior Court, includes OC Probation, OCSD, OCDA, and Public Defenders Office. Implementation will begin in 2016. The goal of a pre-trial program is to identify, through a validated risk assessment, defendants who would be likely to stay out of trouble and appear in court for arraignment on their criminal charges.

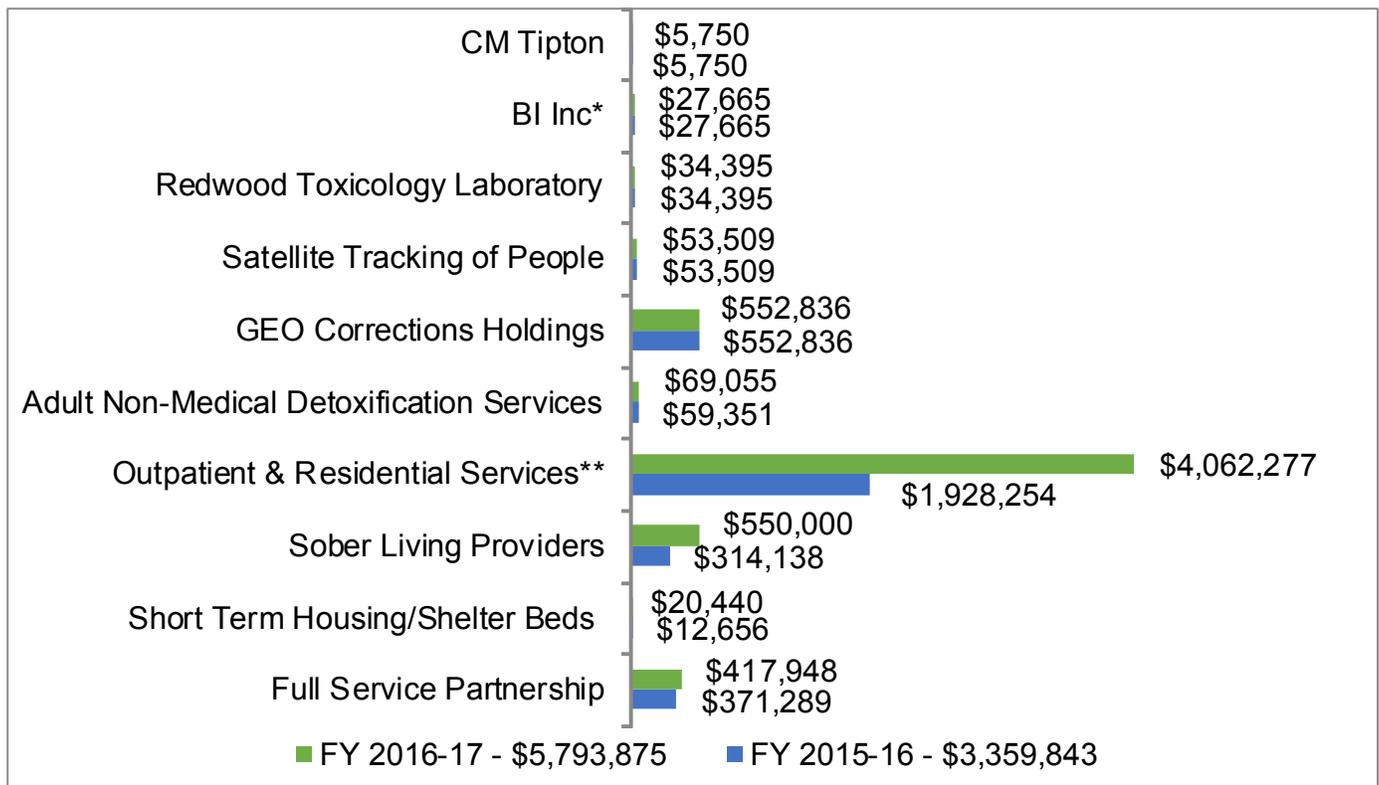
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



* Breath Alcohol testing Instruments and Supplies; ** for AB109

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. 1) OC Probation's research team is conducting an evaluation of the DRC. They are in the process of identifying a suitable comparison group, using propensity matching. The research will be concluded in December 2016, with a report being released in 2017. 2) A multi-agency effort to develop a Program Efficacy Study is underway.

Does the county consider evaluation results when funding programs and/or services?

Yes. 1) The County identifies programs that have been proven effective in reducing recidivism. OC Probation is currently evaluating Thinking for a Change (T4C) participants. 2) Current Request for Proposals require data collection of outcome measures.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Health Care Agency Referrals and Admissions to Behavioral Health Service (BHS) Treatment
(November 2011 – September 2016)

Referred to BHS Treatment	Total	Admitted to BHS Treatment	Total
Outpatient SUD Tx	2,994	2,220	74%
Residential SUD Tx	2,501	2,132	85%
Outpatient Mental Health Tx	536	324	60%
Sober Living	574	526	92%
Social Model Detox	583 *	472	81%
Medical Detox	75 *	43	57%
Full Service Partnership (FSP)	64 *	48	75%
Shelter	60 *	43	72%
Methadone Detox	59 *	51	86%
Methadone Maintenance	56 *	34	61%
Clients seen by Psychiatrist	399 *	327	82%
Grant Total	7,901	6,220	79%

*Estimated, not tracked from the beginning.

What challenges does your county face in meeting these programming and service needs?

In 2015, there were two Orange County Grand Jury Reports on AB109 and both reports identified the need for additional residential treatment beds. Available funding was the issue when the reports were written. Since then, additional funds were identified and offenders requiring residential treatment were able to have continual access to this service with virtually no wait time. However, one large residential AB109 service provider in Orange County, CHCADA/Unidos, closed down in May 2016. Overall, the number of available AB109 beds dropped 36% from around 108 beds in FY 2015-16 to around 69 beds in FY 2016-17. Currently, the average wait time for an AB109 residential treatment beds is around two weeks. A new solicitation is under consideration to increase the availability of AB109 residential treatment beds. An additional challenge is availability of sober living beds. AB109 offenders are utilizing sober living once they complete residential treatment. Additionally, since there is a wait to enter residential treatment, offenders have the option to go in sober living while waiting for residential treatment bed. However, the availability of AB109 sober living beds sometimes exceeds the demand.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Recent review of OC Probation's Realignment funding and supervision strategies led the Department to identify resources and opportunities that were previously unavailable. In the past, PCS and MS populations were supervised in separate divisions. To increase the overall efficiency and consistency among the PCS and MS populations, they were combined into one Division - AB109 Field Supervision Division. At the beginning of realignment in 2011, this was not feasible, due to various internal and external barriers and obstacles. This change took place in September 2015.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Health Care Agency (HCA) received the 2016 national Association of Counties (NACo) Award for demonstrating outstanding innovation in a government program. HCA partnered with the Orange County Probation Department in response to the passing of the Public Safety Realignment Act (AB109) to provide new services by removing treatment barriers and promoting access to care for people upon their release. HCA staff was placed at Probation sites throughout the county to address the need for more mental health and substance abuse services for the AB109 population.

Treatment Outcomes

At intake, AB109 offenders had lower motivation than clients receiving SUD treatment nationwide, and motivation scores were slightly higher than or comparable to the average Orange County SUD client. After receiving treatment, AB109 offenders showed comparable motivation to other clients in the county, and higher motivation than SUD clients nationwide. At discharge, AB109 offenders also reported higher levels of peer support within their program and social support outside of treatment, which is comparable to Orange County and national norms for those indicators.

AB109 offenders participated in SUD treatment showed large reduction in all criminal justice indicators, as well as reductions in number of visits to the ER for mental health issues and serious family conflict. There were also improvements in employment and abstinence from alcohol and drug use, as well as an increase in the use of recovery networks. Roughly one-third of AB109 offenders participated in SUD treatment that were initially homeless gained housing (independent or dependent) by discharge.

AB109 offenders participated in HCA mental health treatment spent fewer days in psychiatric hospitals, and were less likely to be incarcerated or homeless at discharge. There were also improvements in employment and school enrollment.

AB109 offenders' scores of self-harm were low, and scores decreased over the course of treatment. The most common harmful behaviors were drug or alcohol abuse, and /or engaging in an abusive relationship. Psychiatric symptomatology was low throughout treatment. While there an initial increase in psychiatric symptoms after entering treatment, over time, AB109 offenders showed reductions in the severity of their psychiatric symptoms.

Surveys and tools used during the evaluation are:

- MacArthur Community Violence Instrument – Examines instances of harm to others and victimization.
- Modified Self-Harm Inventory – A modified version of the original 22-item self-help inventory, helps to examine how frequently clients participate in self-harm behaviors.
- Modified Colorado Symptom Inventory – Examines psychiatric symptomatology.
- California Outcome Measure System (CalOMS) – Collect client demographic information, along with outcome data (e.g. substance use frequency, criminal involvement, hospitalizations, homelessness, employment and education, family and social functioning, etc.).
- HCA Caminar database.
- Client Evaluation of Self at Intake & Discharge (CESI & CEST) – Administered in substance us treatment, these tools assess clients' motivation for treatment, engagement in treatment, counseling rapport, and peer and social support.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Marshall Hopper
Chief Probation Officer

Jake Chatters
Presiding judge or
designee

Jack Duran
County supervisor or
chief administrative
officer or designee

Scott Owens
District Attorney

Dan Koukol
Public Defender

Edward Bonner
Sheriff

Ron Lawrence
Chief of Police

Jeff Brown
Department of Social
Services, Department of
Employment , Alcohol
and Substance Abuse
Programs and
Department of Mental
Health

Phillip Williams
Office of Education

Walt Stockman
Community-based
organization

Jenny Davidson
Victims' interests

The CCP meets quarterly

Placer County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce Caseloads to recommended ratio of 50:1.

- Objective:**
- 100% of in-county offenders will have a completed CAIS Assessment.
 - Increased contacts for high/moderate risk offenders; fewer for low risk offenders.
 - 100% of in-county offenders will have a working Case Plan.

- Measure:**
- % of in-county offenders with a completed CAIS Risk/Needs Assessment.
 - Total number of contacts for high/moderate risk offenders.
 - % of in-county offenders with a Case Plan

Progress: Currently, 100% of high and moderate risk offenders have a Case Plan.

Goal: Hire and train staff to maintain the jail population.

- Objective:**
- 100% of funded and unfunded positions will be filled.
 - 7 Admin Legal Clerk positions funded.
 - Open more of the South Placer Correctional Facility.

- Measure:**
- Number of Correctional Officer positions filled.
 - Number of Admin Legal Clerk positions filled.
 - Net jail beds gained through South Placer Correctional Facility opening (88 beds).

Progress: Increase in in-custody programming, facilitated by a Correctional Officer assigned specifically to a program position.

Goal: Meet offender needs through evidence-based practices.

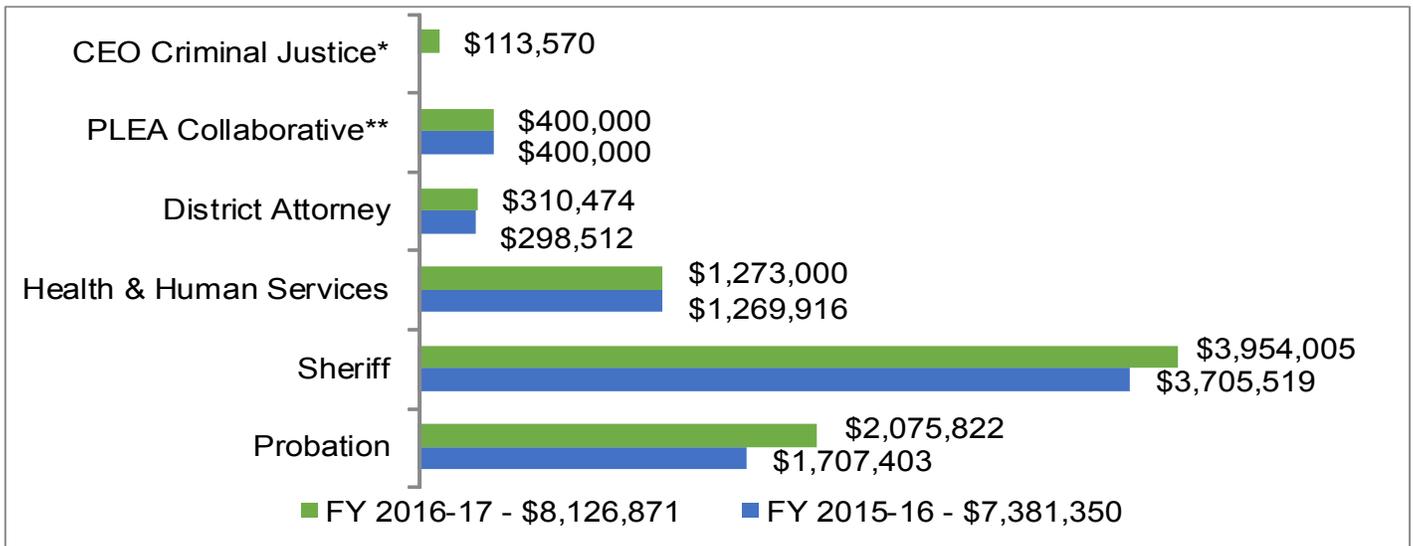
- Objective:**
- Obtain offender referrals from Probation.
 - Conduct risk/needs assessments prior to treatment.
 - Provide appropriate treatment to offenders.

- Measure:**
- Number of referrals from probation.
 - Number of assessments conducted.
 - Number of offenders in treatment.

Progress: Number of Referrals from Probation: 232; number of assessments completed: 219; Number of offenders in treatment: 144.

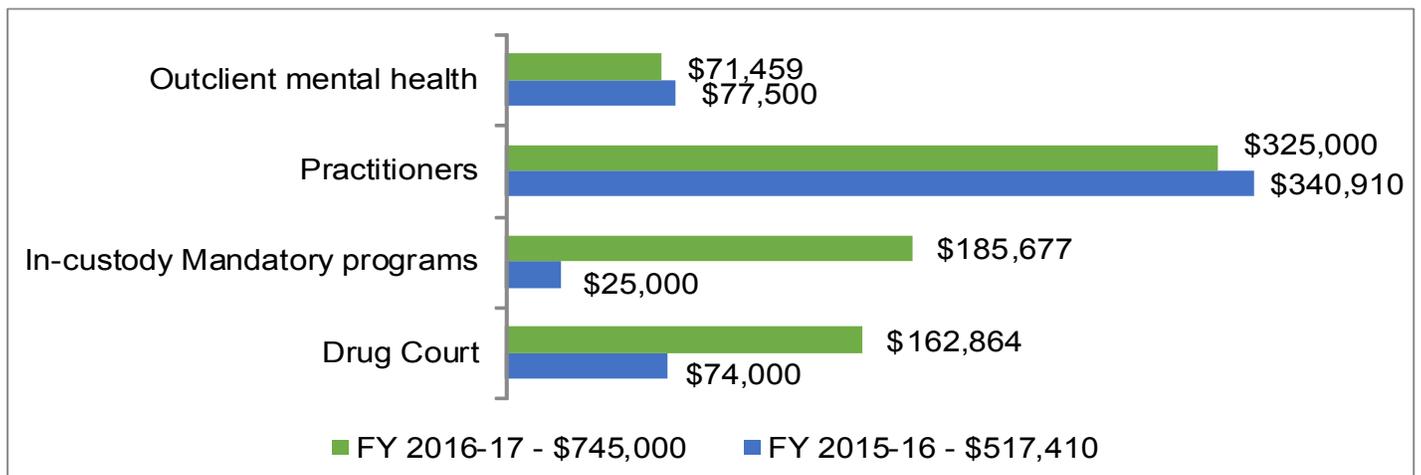
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

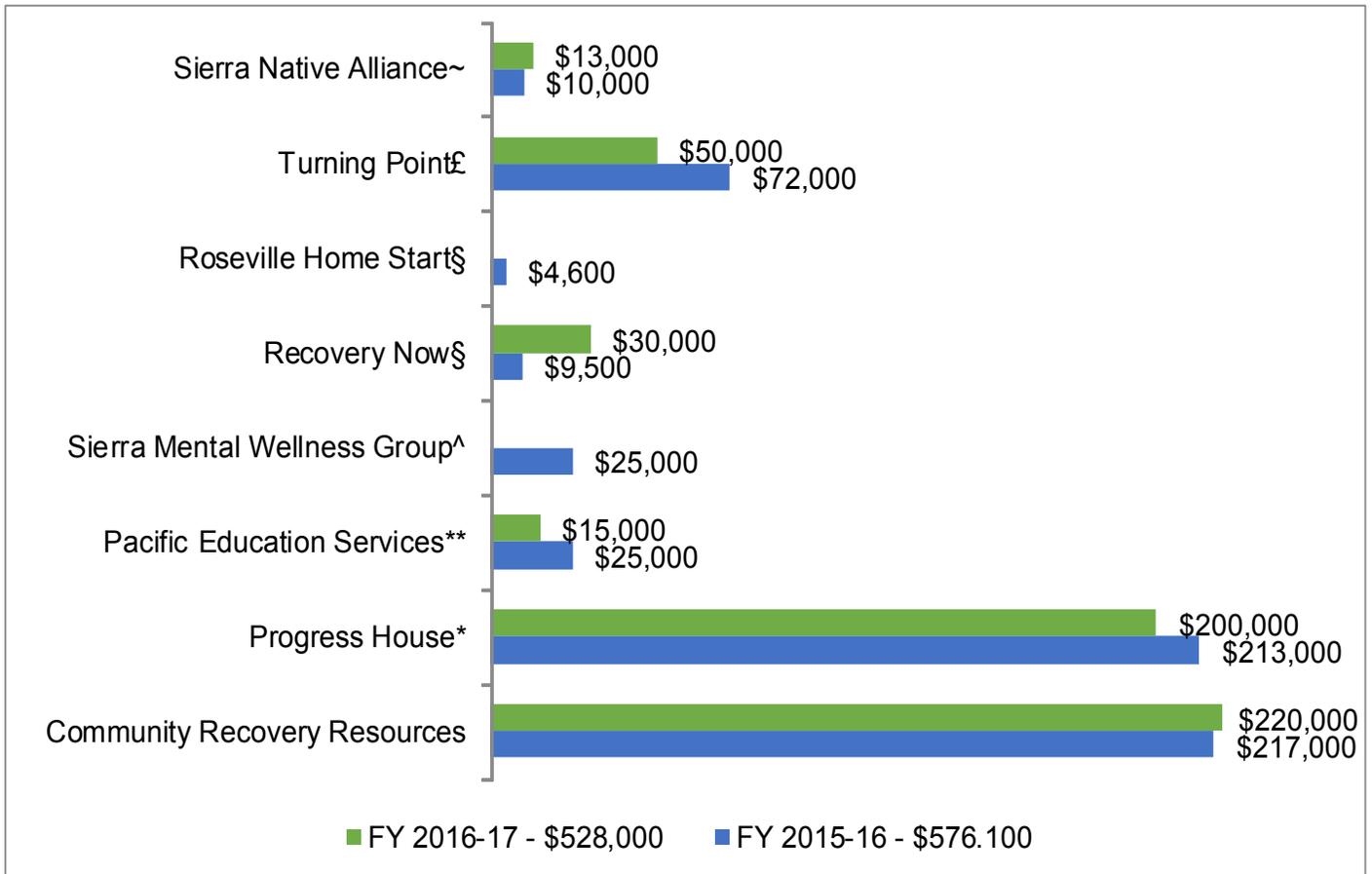


* Public Defender and Growth; ** Special Investigations Unit

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



* Residential, transitional, out-client; ** Out-client and in-custody; ^ Out-client; § Transitional housing; £ Intensive out client mental health; ~ Out client

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Placer County has taken steps to collaborate between departments to ensure data is collected accurately and efficiently. Additionally, Probation has worked with many Community Treatment Providers to develop a reporting system in order to increase communication between Probation, Provider, and offenders in treatment for efficiency in decision-making and offender support.

Does the county consider evaluation results when funding programs and/or services?

No. Placer County is currently in the process of implementing Priority Based Budgeting and will soon begin funding county programs based on outcomes.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Community-Based Organizations: Detox, Residential Treatment, Outpatient (in and out of custody), Educational Programming, Transitional Housing combined with Outpatient, Outpatient Mental Health, Intensive Mental Health Care.

County Staff: Screening; assessments; linkages to SUS, MH, and Primary Care Treatment; and Case Management.

What challenges does your county face in meeting these programming and service needs?

At this time our need outweighs our resources. Coordinating care across multiple providers and disciplines is also difficult.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Training case managers in both Mental Health and Substance Use practices to better meet the needs of co-occurring and high utilizing clients. Co-located HHS and Probation staff and co-located HHS and Court staff all help bridge county systems. Good utilization of multiple levels of care for clients including education (through the Placer Re-Entry Program), treatment, and intensive case management to increase engagement in treatment.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The use of a validated risk/need assessment as a local best-practice has shown positive results. More offenders are supervised on appropriate caseloads, resulting in higher-quality contact with officers. Smaller and specialized caseloads has provided officers the opportunity to set goals with offenders and support these goals while keeping the community safe.

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Community Corrections Partnership Membership
(October 21, 2016)

Erin Metcalf
Chief Probation Officer

Deborah Norrie
Presiding judge or designee

Sherrie Thrall
County supervisor or chief administrative officer or designee

David Hollister
District Attorney

Douglas Prouty
Public Defender

Greg Hagwood
Sheriff

Vacant
Chief of Police

Elliot Smart
Department of Social Services

Vacant
Department of Employment

Bob Brunson
Department of Mental Health

Louise Steenkamp
Alcohol and Substance Abuse Programs

Terry Oestreich
Office of Education

Stephanie Tanaka
Community-based organization

Kori Langrehr
Victims' interests

The CCP meets monthly

Plumas County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Enhance Alternative Sentencing Option.

Objective: • Increase participants at the Day Reporting Center.

Measure: • Calculate total participants served in FY 2015-2016.

Progress: The ASP/ DRC had a high level of success with participants served in 2015-2016. In the 1st Qtr. 136 clients were served with 15 successfully completing the program. The 2nd Qtr. 161 clients were served including 28 new referrals, 21 completed programs and 10 graduates. During the 3rd Qtr. 157 participants, 31 new referrals, 20 successful completions and 11 graduates with ASP having 96 active participants. Last quarter 158 participants, 27 new referrals, 37 successfully completing programs, 13 graduates and 123 ASP active participants served. Therefore, data shows goals had been executed with fidelity.

Goal: Enhance Intensive Community Supervision.

Objective: • Increase staffing to provide this service.

Measure: • Calculate total of probationer field contacts in FY 2015-

Progress: In 2015-2016 the Probation Department hired new staff dedicated to eligible AB109 client cases. Improvements were made in communications and real time information exchanges with law enforcement partners essential to the success of public safety. The field presence has improved with staffing level increases and proper training is ongoing.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Establish Pre-Trial Services Program.

Objective: • Release low-level offenders pending court.

Measure: • The activity can be tracked in the case management system for the percentage of offenders released during the fiscal year.

Progress: Recently began to implement the program.

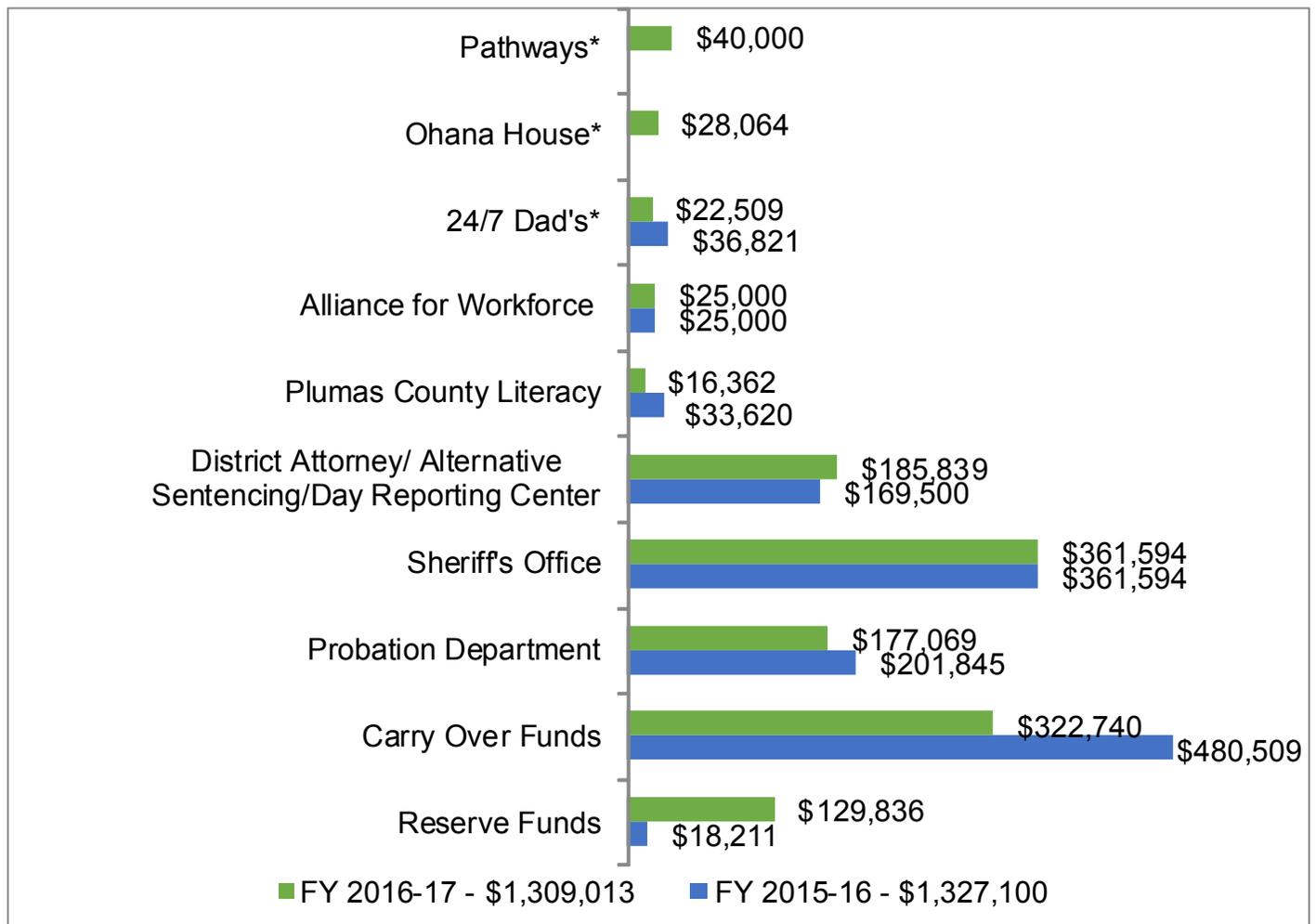
Goal: Develop Therapeutic Support for Clients Focusing on Health, Housing, Education and Sustaining Employment.

Objective: • Connect clients with housing, employment, and health services.

Measure: • Time studies and expenditure reports that track programs and services rendered to the clients.

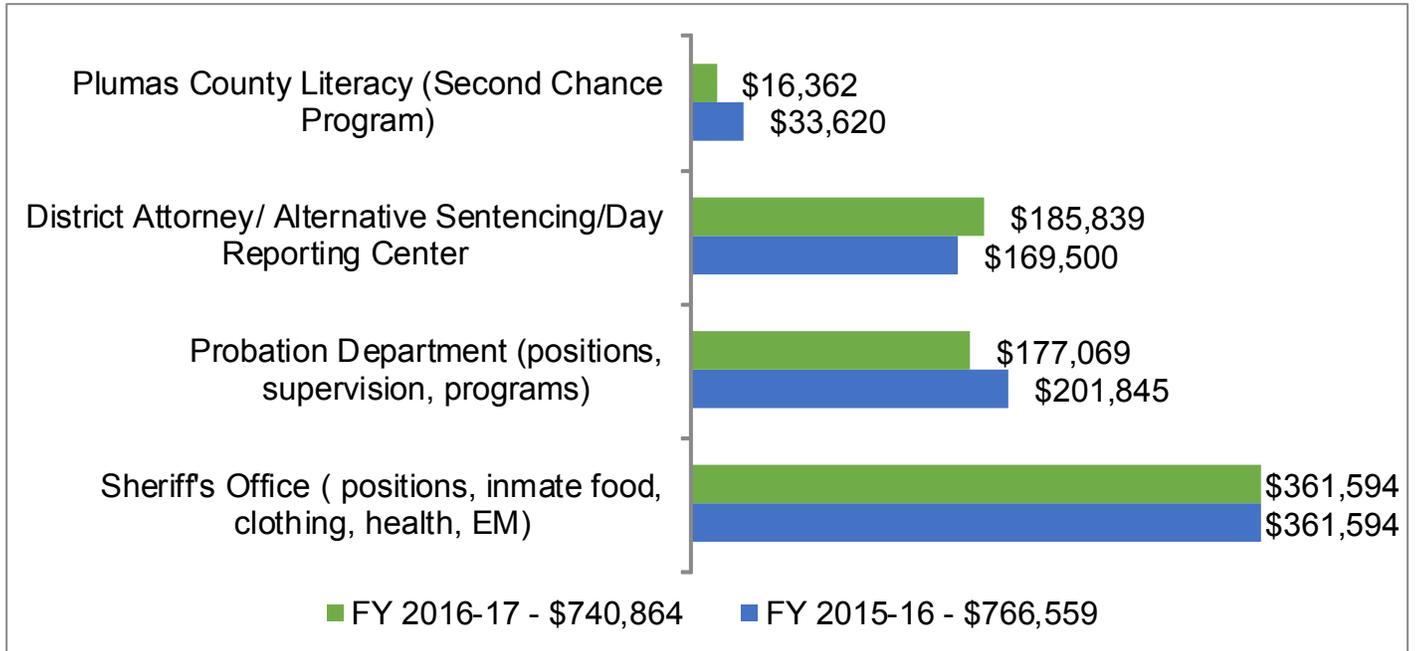
Progress: Increased funding for services to assist housing needs. MAA claiming for medical needs and services through Alliance for Workforce Development for continued job assistance are currently in progress.

FY 2015-16 and 2016-17 Budget Allocations

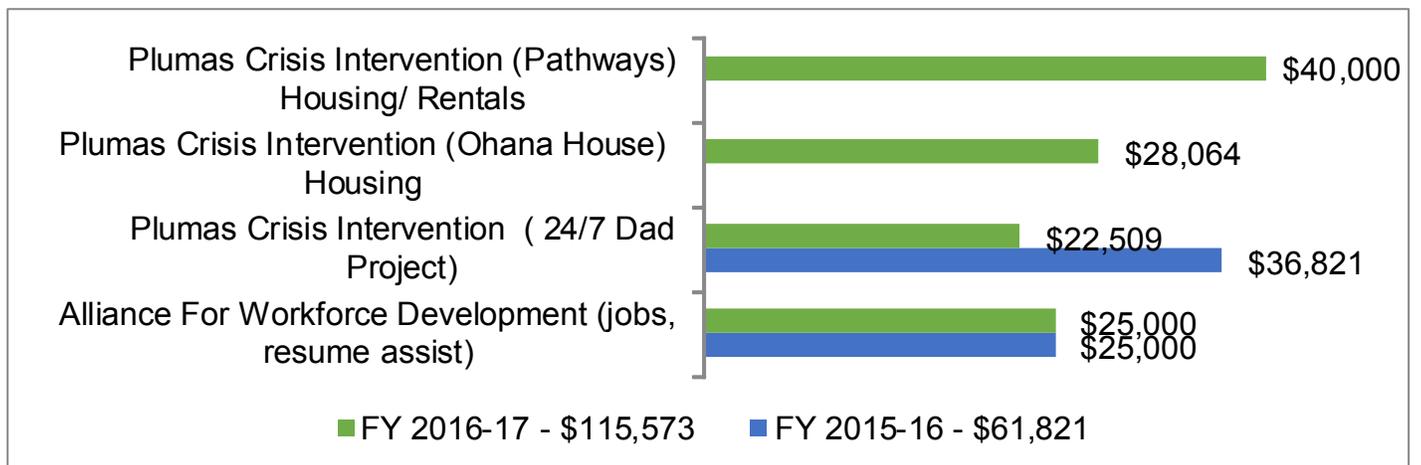


*Plumas Crisis Intervention

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

In 2015-2016 a quarterly expenditure report form was implemented and is submitted for evaluation to the CCP Executive Committee quarterly to ensure and justify services and funds are being used properly.

Does the county consider evaluation results when funding programs and/or services?

Yes. Based on quarterly reports and proof of clients served the goals, services and accomplishments are evaluated by the CCP Executive Committee members.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Behavioral Health – intensive outpatient services, Substance Abuse Treatment – intensive outpatient services, Domestic Violence/Batterer's Programming - intensive outpatient services, Moral Recognition Therapy - intensive outpatient services, Cognitive Behavior Therapy - intensive outpatient services.

What challenges does your county face in meeting these programming and service needs?

Inpatient services for programming is not available due to the rural location and financial burdens.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

Community Corrections Partnership Membership
(October 21, 2016)

Mark A. Hake
Chief Probation Officer

Harold W. Hopp
Presiding judge or designee

John Benoit
County supervisor or chief administrative officer or designee

Michael Hestrin
District Attorney and Victims' interests

Steven L. Harmon
Public Defender

Stan L. Sniff
Sheriff

David M. Brown
Chief of Police

Susna Von Zabern
Department of Social Services

Robert Field
Department of Employment

Steve Steinberg
Department of Mental Health and Alcohol and Substance Abuse Programs

Kenneth M. Young
Office of Education

Vonya Quarles
Community-based organization

The CCP meets annually

Riverside County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Open two additional Day Reporting Centers (DRC) to serve the desert and Hemet Valley regions of the county.

Objective:

- Partner with RUHS-BH, RCOE, WFD, RUHS-PH, Veteran's Services, and DPSS.
- Provide services and programs including: Substance Abuse Education, Criminal and Addictive Thinking, Anger Management, Positive Parenting, Nurturing, Parenting, Courage to Change, physical and mental health, General Relief, Medi-Cal outreach and assistance, General Education, High School Diploma, job readiness, peer support and cognitive behavior counseling.

Measure:

- Open one additional DRC during FY 15/16 in Indio.

Progress: In April 2016, the Probation Department met the goal of opening the Indio DRC. The Hemet Valley region DRC remains in the planning stages for FY 16/17.

Goal: Expand the TRU program to all jails (except Blythe) within Riverside County.

Objective:

- Reduce technical violations for offenders failing to report to the Probation Department upon release by 25% for the Mandatory Supervision population.

Measure:

- The number of technical violations incurred by TRU participants for failing to report after release from custody.

Progress: The TRU program has a 95% initial reporting rate and 85% of TRU participants go on to complete their first 90 days of supervision without a revocation for failing to report to their assigned probation officer.

Goal: The Probation Department will continue to participate in the RFQ process with RUHS-BH to increase emergency and transitional housing options.

Objective:

- To assist with transitional services which promote self-sufficiency.

Measure:

- Increase number of housing facilities and beds available.

Progress: In FY 15/16, the Probation Department continued coordinating with RUHS-BH to increase emergency and transitional housing from five (5) houses with 79 beds to eleven (11) houses with 119 beds.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: The Probation Department plans to expand the TRU program to the Post-Release Community Supervision population in all jails within Riverside County.

Objective: • Reduce technical violations for offenders failing to report to the Probation Department upon release from jail after serving a violation of Post-Release Community Supervision.

Measure: • To reduce the PRCS violation rate by 10% by the end of FY 16/17.

Progress: In Progress.

Goal: The Sheriff's Department will enhance the in-custody vocational programs.

Objective: • To reduce recidivism, increase program enrollment, and to help prepare the participants for the workforce after incarceration.

Measure: • Add certification programs in welding, painting and cabinetry.

Progress: In Progress.

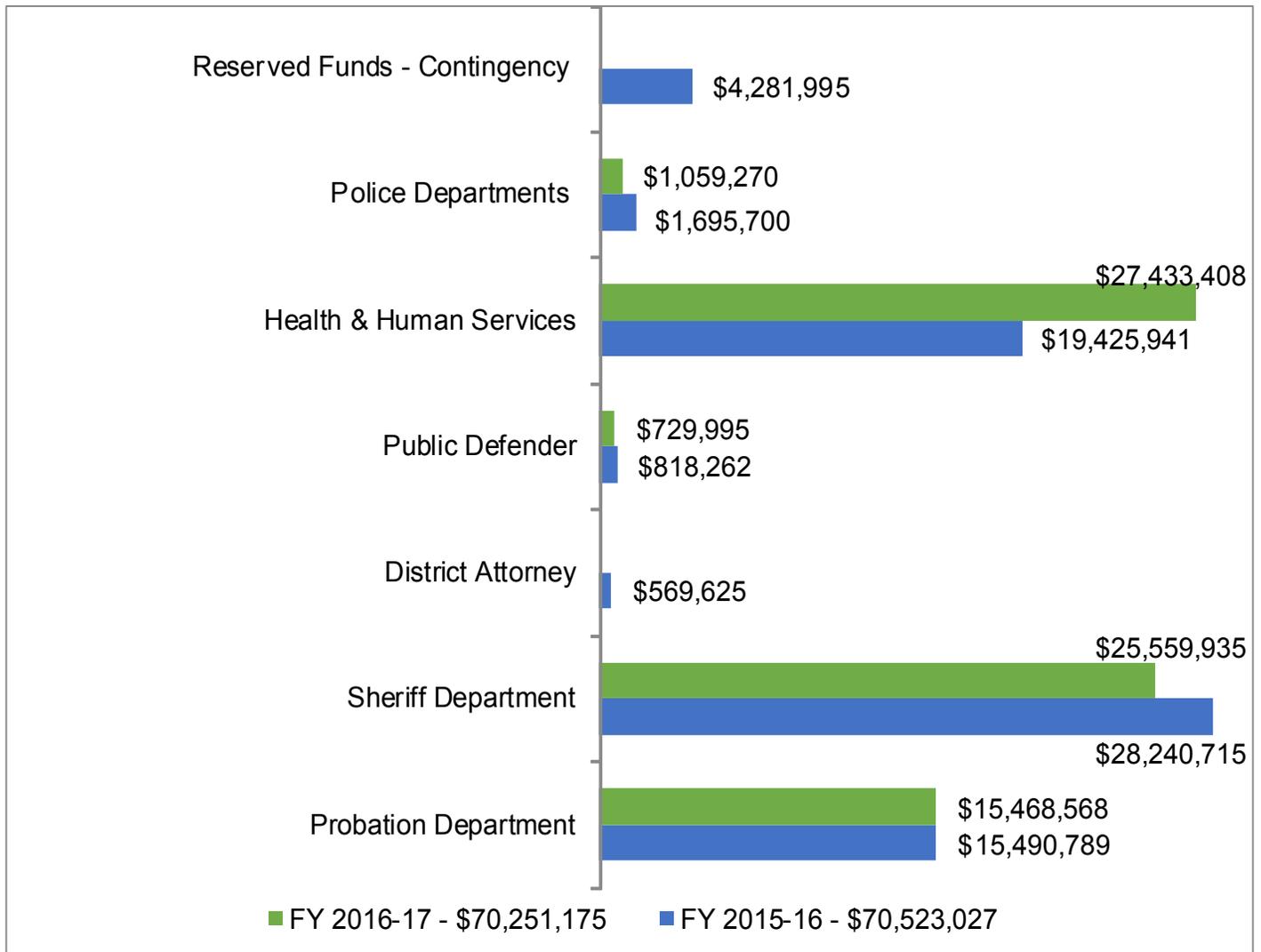
Goal: Improve the health of AB109 inmates in county jail.

Objective: • RUHS-BH will ensure medical compliance upon booking.

Measure: • All offenders currently receiving psychotropic medication will be offered mediation within 48 hours of booking.

Progress: In Progress.

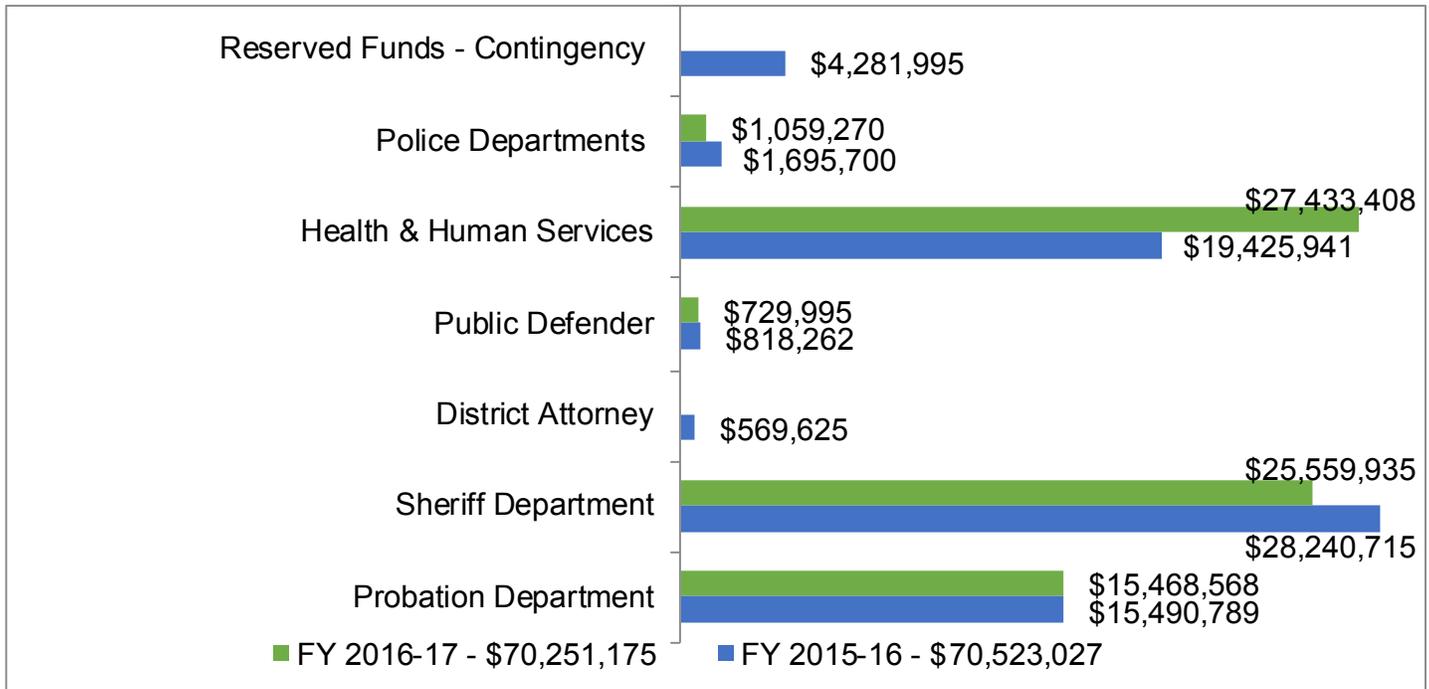
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 2015-16: Probation (Supervision Services \$12,878,647, Day Reporting Services \$1,723,121, Special Program Services (bus passes, tattoo removal) \$889,021; **Sheriff Department** (In-Service Custody \$15,450,847, Mental Health HU OT Cost \$772,542, Facility Operational Costs \$5,836,987, Transportation Costs \$515,028, Programs & Jail Alternative Programs \$1,115,895, Contract Beds \$3,862,712, One Time Projects \$686,704; **Health and Human Services** (Intensive Treatment \$1,136,443, Detention Services \$3,716,903, Contracted Placement Services \$1,581,308, Expanded Clinic Services \$5,282,632, Riverside University Health Systems (RUHS) \$5,580,188, Detention Health \$2,128,466; **District Attorney** (Violations of PRCS and Parole \$355,042, Other Realignment Prosecution Activities \$214,583; **Public Defender** (Deputy Public Defender AB 109 Services \$818,262; **Police Departments** (City of Beaumont \$159,781, Cathedral City \$198,723, City of Coachella, \$159,781, City of Corona \$159,781, City of Desert Hot Springs \$159,781, City of Hemet \$192,723, City of Palm Springs \$159,781, City of Riverside \$192,723, San Jacinto \$159,781, Contingency \$158,844; **Reserve Funds Contingency** \$4,281,995.

FY 2016-17: Probation (Supervision Services \$12,689,233, Day Reporting Services \$2,014,530, Special Program Services (bus passes, tattoo removal) \$764,805; **Sheriff Department** (In-Service Custody \$15,888,608, Facility Operational Costs \$4,989,176, Transportation Costs \$307,026, Programs & Jail Alternative Programs \$921,079, Contract Beds \$1,790,318; **Health and Human Services** (Intensive Treatment \$1,286,653, Detention Services \$6,181,715, Contracted Placement Services \$1,790,318, Expanded Clinic Services \$5,948,597, RCRMC \$8,191,473, Detention Health \$4,034,652; **Public Defender** (Deputy Public Defender AB 109 Services \$729,995; **Police Departments** (City of Beaumont \$110,128, Cathedral City \$132,833, City of Corona \$110,128, City of Desert Hot Springs \$110,128, City of Hemet \$132,833, City of Palm Springs \$110,128, City of Riverside \$132,833, San Jacinto \$110,128, City of Coachella \$110,128.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The Probation Department's evaluation of programs and services is primarily done through a system of regular statistical reports or audits consisting of relevant data elements focusing on program participation and defined program goals. Additionally, several programs and services utilize pre- and post-tests to evaluate participant satisfaction and progress.

Does the county consider evaluation results when funding programs and/or services?

Yes. The Probation Department incorporates a variety of programs and services in its overall supervision strategy involving the realignment population. All programs and services including bus passes, clothing, food, hygiene, housing, incentive funds, cognitive behavioral treatment and Day Reporting Centers are allocated to several division budgets whereby a manager is responsible for oversight and ongoing approval. All services involve regular reporting of defined data elements with month-to-month and year-to-year comparisons. Any potential increases or decreases to a program or service budget include an assessment of program efficiency and effectiveness. The Community Corrections Partnership Executive Committee (CCPEC) annually reviews each agency's budget request and approves such request based on availability of funding. During the annual budget presentations each agency is asked to present a description of their programs, their respective costs, and relevant statistics, which are reviewed by the CCPEC for efficacy. The CCPEC requires each agency to provide a quarterly financial report that includes a budget update and a summary of activities performed during the reporting period.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61%-80%

We would like to better understand your 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?

The type and treatment services provided by the Probation Department and collaborative partners vary in degree based on custody status and risk assessment levels.

Day Reporting Centers (DRC): During FY 15/16, the Probation Department met the goal of opening the Indio DRC in collaboration with Riverside University Health System-Behavioral Health (RUHS-BH), RCOE, Workforce Development, DPSS, RUHS-PH, and Veterans' Services to support the realignment population in the desert region. Services and programs provided include: substance use education, Criminal and Addictive Thinking, anger management, Positive Parenting, Nurturing Parenting, Courage to Change, life coaching, General Relief, Medi-Cal outreach and assistance, general education, high school diploma, job readiness, peer support, and cognitive behavior counseling. In addition, RUHS-BH provides mental health screenings, assessments, and treatment on site, which can result in a referral to a psychiatrist for a medication evaluation at a RUHS-BH

clinic, if needed. In April 2016, the Riverside and Temecula DRCs added outpatient drug treatment to services that are provided. In November 2016, the Indio DRC was Medi-Cal certified to begin outpatient treatment. Lastly, a Community Service Assistant (CSA) was provided by RUHS-BH to work at the Temecula DRC. Of note, the Hemet Valley region DRC remains in the planning stages for FY 16/17.

Increase Behavioral Health Services: During FY 15/16, RUHS-BH met the goal of expanding services to offenders at probation field offices. RUHS-BH has Behavioral Health Specialist IIIs (BHS III) assigned to the Banning, Hemet, Perris, and Indio Probation offices. The RUHS-BH staff are physically on-site at the offices two or three days a week, as the current volume does not demand a full time staff. When not at the probation offices, BHS IIIs provide services at other RUHS-BH clinics.

Enhanced Re-entry Planning: For MS offenders serving the final months of their sentences, the Probation Department offers the Transitional and Re-entry Unit (TRU) program. The TRU program engages offenders while in custody to enhance success upon release. Probation officers conduct assessments on offenders and develop case plans that target risk factors, such as housing and substance use treatment prior to release from jail.

Behavioral Health Core Teams: The Sheriff's Department has continued its partnership with RUHS-BH to address the risks and needs of the increasing mental health population within the county jails. This cooperative effort has allowed staff to identify, centralize, and provide focused mental health care for this portion of the inmate population. Additionally, suicide deterrent fencing, and cameras were installed which provides for the safety of inmates with a serious mental illness. The Sheriff's Department increased staffing assignments in these dayrooms to form a working relationship with RUHS-BH for the benefit of the inmate. RUHS-BH and the Sheriff's Department staff meet regularly to discuss the inmates' progress. The objective is to evaluate the progress of each individual inmate in the security-enhanced housing units and determine if the inmate is able to transition to a more traditional jail housing unit. During this "step-down" process, evidence-based programs are introduced to the inmates, along with continuing their mental health case plans. Prior to release, the Sheriff's Department works with RUHS-BH to transition these inmates from the county jails back to society, where they continue to receive mental health care.

Evidence-Based Programming: The Sheriff's Department opened a Guidance and Opportunities to Achieve Lifelong Success (GOALS) program dayroom at the Southwest Detention Center in November 2014, and at the Robert Presley Detention Center on June 1, 2015. The Sheriff's Department plans to include a GOALS dayroom at the new East County Detention Center in 2018. During FY 16/17, the GOALS program will be restructured to include the Residential Substance Abuse Treatment (RSAT) program and to fully incorporate the concepts of intensive evidence-based programming based on the principles of Risk/Needs Responsivity. Its aim is to reduce the risk to recidivate by addressing the dynamic and criminogenic factors through a highly structured program that incorporates cognitive and social learning theories. These efforts will include increasing program participation of convicted felons sentenced under PC 1170(h). Program eligibility will require a general recidivism score of moderate to high risk on the COMPAS assessment tool; high-risk inmates will be given priority entry. To facilitate a greater likelihood for long-term success, counselors will work hand-in-hand with the offender and community partners to develop a detailed transition plan and facilitate a more seamless re-entry. In FY 14/15, the Moral Reconciliation Therapy (MRT) program was added to the GOALS and RSAT programs. MRT is an evidence-based practice that provides cognitive-behavioral treatment programs designed specifically for inmates in the criminal justice system. In FY 15/16, Thinking for a Change (T4C) was added to the GOALS and RSAT programs. T4C combines cognitive restructuring theory and cognitive skills theory to help inmates take control of their lives by taking control of their thinking. Also, in FY 15/16, an alcohol dependency module was added to the new GOALS programming. In FY 15/16, the GOALS program was restructured to bring it more in line with evidence-based practices, including establishing an

individualized program delivered through a module system. Curriculum targeting static factors were combined into a single module. Case plans were created to include the modules needed based upon the compilation of an individual's assessment scores. One of these modules included substance abuse and alcohol dependency. T4C was also implemented; however, it was phased out by fiscal year-end due to its incompatibility with a rotating population; challenges of incorporating its multi-media requirements; and the need for multiple facilitators.

Veterans' Program: Evidence-based concepts have been expanded by the Sheriff's Department to address the ever increasing inmate military veteran population. In partnership with the Veterans' Administration, Riverside County Veterans' Court, Riverside County Department of Veterans' Services, Forensic Behavioral Health, Law Office of the Public Defender, the Probation Department, DPSS, US Vets, Housing Authority, and other community-based organizations, the VET program was adopted in May 2016 as a permanent evidence-based program. The program expanded the services offered through identified individual risks and needs assessments, to include substance abuse and trauma treatment.

What challenges does your county face in meeting these programming and service needs?

Jail overcrowding continues to be a major challenge, as well as ongoing development of in- and out-of-custody programming. The challenge of pursuing alternative custodial sanction options and innovative evidenced-based programs will require established partnerships to grow and will be relied upon during the next fiscal year.

Another challenge is the development of data sharing abilities and systemic adjustments to the referral, enrollment and program completion process of any Community Based Organization provided service. Data sharing will allow for improved accuracy of data tracking and assessment of program effectiveness and outcome measurement. A third challenge is the collection and analysis of data for the existing programs. Ensuring the timely and accurate collection of data, maintaining and upgrading necessary hardware and software systems, and frequent collaboration between departments are critical to program fidelity. To that end, a Data Sharing Committee was formed, comprised of Probation, the Superior Court, District Attorney's Office, Sheriff's Department, and the Riverside County Information Technology Department. Interdepartmental information systems, such as the Department of Justice's statewide Smart Justice system, are a priority for this workgroup.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In Riverside County, the CCP has provided a forum for county entities to work collaboratively. Prior to realignment, the various county departments interacted regularly, but rarely collaborated on a large scale. After realignment, the departments were required to work together. This mandated a change in each department's philosophy on a large scale and was critical to the implementation of realignment in Riverside County. Had the relationships become adversarial, implementation of realignment could have resulted in disaster. While there were challenges during the initial roll out of realignment, over the course of the past five years, relationships have been developed between departments that shed light on each department's strengths and challenges. This has been particularly evident during the established sub-work groups that meet to carry out the CCPEC's objectives. Through time and experience, each entity began to recognize how each criminal justice partner fits together in the larger scheme. This allows a synergistic response to tackling important obstacles to implementing realignment. Specific programmatic changes include the development and implementation of the county's third Day Reporting Center program in Indio, which opened in April 2016; Probation's acquisition of Pre-trial operations from the Superior Court in 2012; the development of Alternatives to Custody program by the Sheriff; the implementation and expansion of

Probation's Transition and Reentry Unit; the implementation of Probation's Law Enforcement Portal; the creation of the Post-release Accountability and Compliance Teams; and the formation of the Data Sharing Committee.

Additionally, during FY 16/17, the Probation Department will release a Request for Information to identify established providers with experience operating a treatment and/or transitional planning facility involving adult offenders in a residential setting. The contractor will provide offenders with intervention services and self-improvement opportunities, to include substance use treatment, mental health services, education, vocational education, and employment development. These treatment and re-entry services will be provided in a community-based residential facility, which will assist offenders during their transition back into the community.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

CA Forward Initiative: The Probation Department is working with the non-profit organization, CA Forward, which continued to provide assistance to the Probation Department throughout FY 15/16. The workgroups identified last year: the Offender Engagement Workgroup, the Violations Workgroup, and the Substance User Strategies Workgroup, made progress in several areas.

The Offender Engagement Workgroup focused on working with probation officers to actively engage with offenders and utilize case plan goals. From FY 14/15 to FY 15/16, data obtained showed a 40% decrease in technical petitions for all supervised populations. Additionally, active involvement of the officers in the TRU program, DRCs and specialized caseloads (e.g. the homeless caseloads, Bridge program, and a piloted "electronic" reporting caseload), showed an increased response in offender compliance.

The Violations Workgroup restructured the violation of Post-Release Community Supervision and Mandatory Supervision templates to identify intermediate sanctions and efforts at rehabilitation, thus ensuring efforts were exhausted prior to the filing of revocations. Implementation of the new templates will begin in FY 16/17. Also, The first phase of the incentives matrix was developed. In the second phase, the matrix will be refined using offender feedback to improve its usefulness as a tool to reward offenders for pro-social behavior. The goal is to incorporate this matrix within the petition for revocation to show efforts made by officers in their attempts to work with offenders to gain compliance.

Lastly, the Substance Abuse Strategies Workgroup collected data in response to Proposition 47 and how it affected programs such as Drug Court and mandatory substance use treatment under Penal Code Section 1210.1. The Courts have modified their eligibility criteria in order to keep these programs accessible to clients who could benefit from these services. The workgroup has an on-going goal to evaluate treatment providers in order to assess which treatment methods are currently in use, and which providers are producing better outcomes. This will hopefully produce a more consistent and targeted response for the substance use population.

During FY 16/17 an agreement with CA Forward to continue with the Justice System Change Initiative (J-SCI) assistance to Riverside County for the third consecutive year was approved by the Board of Supervisors. CA Forward's multidisciplinary team will provide guidance for implementation of the eight J-SCI recommendations, which are designed to mature the organizational structure, analytic capacity, management protocols and continuous improvement culture within the county.

Community Corrections Partnership Membership
(October 21, 2016)

Lee Seale
Chief Probation Officer

Hon. Kevin R. Culhane
Presiding judge or designee

Britt Ferguson
County supervisor or chief administrative officer or designee

Anne Marie Schubert
District Attorney

Paulino Duran
Public Defender

Scott Jones
Sheriff

Brian Louie
Chief of Police

Paul Lake
Department of Social Services

William Walker
Department of Employment

Dr. Sherri Heller
Department of Mental Health and Alcohol and Substance Abuse Programs

Dave Gordon
Office of Education

Vacant
Community-based organization

Kerri Martin
Victims' interests

The CCP meets bi-monthly

Sacramento County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Rigorous comparative and outcome measures will be identified through participation in the BSCC-PPIC.

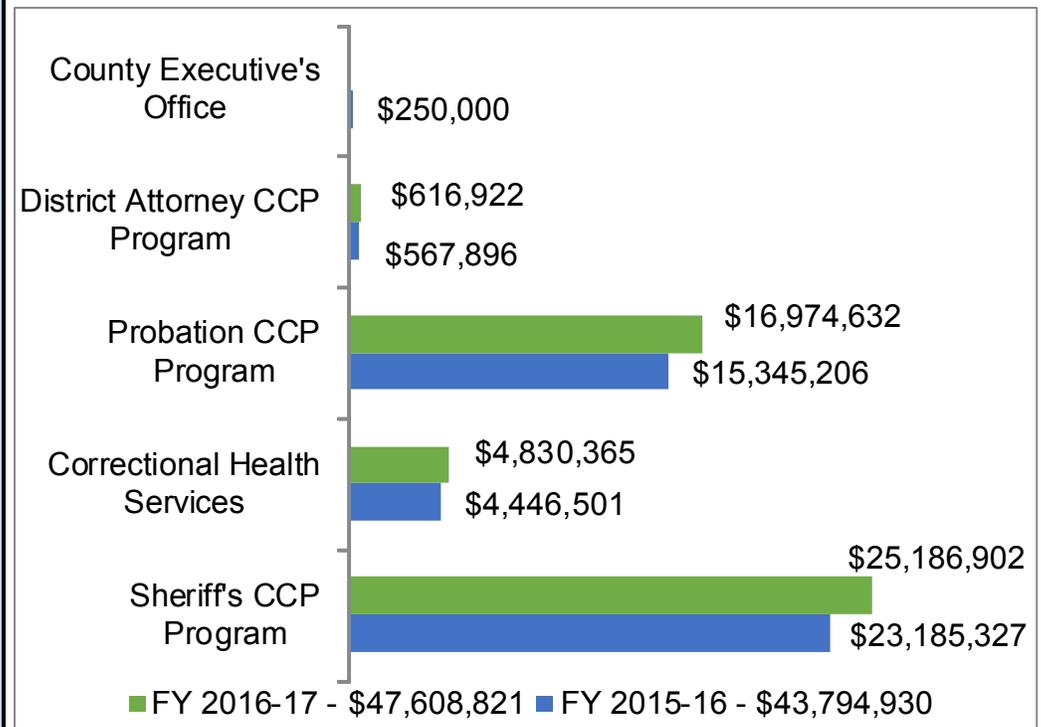
Goals, Objectives, Outcome Measures and Progress

FY 2016-17

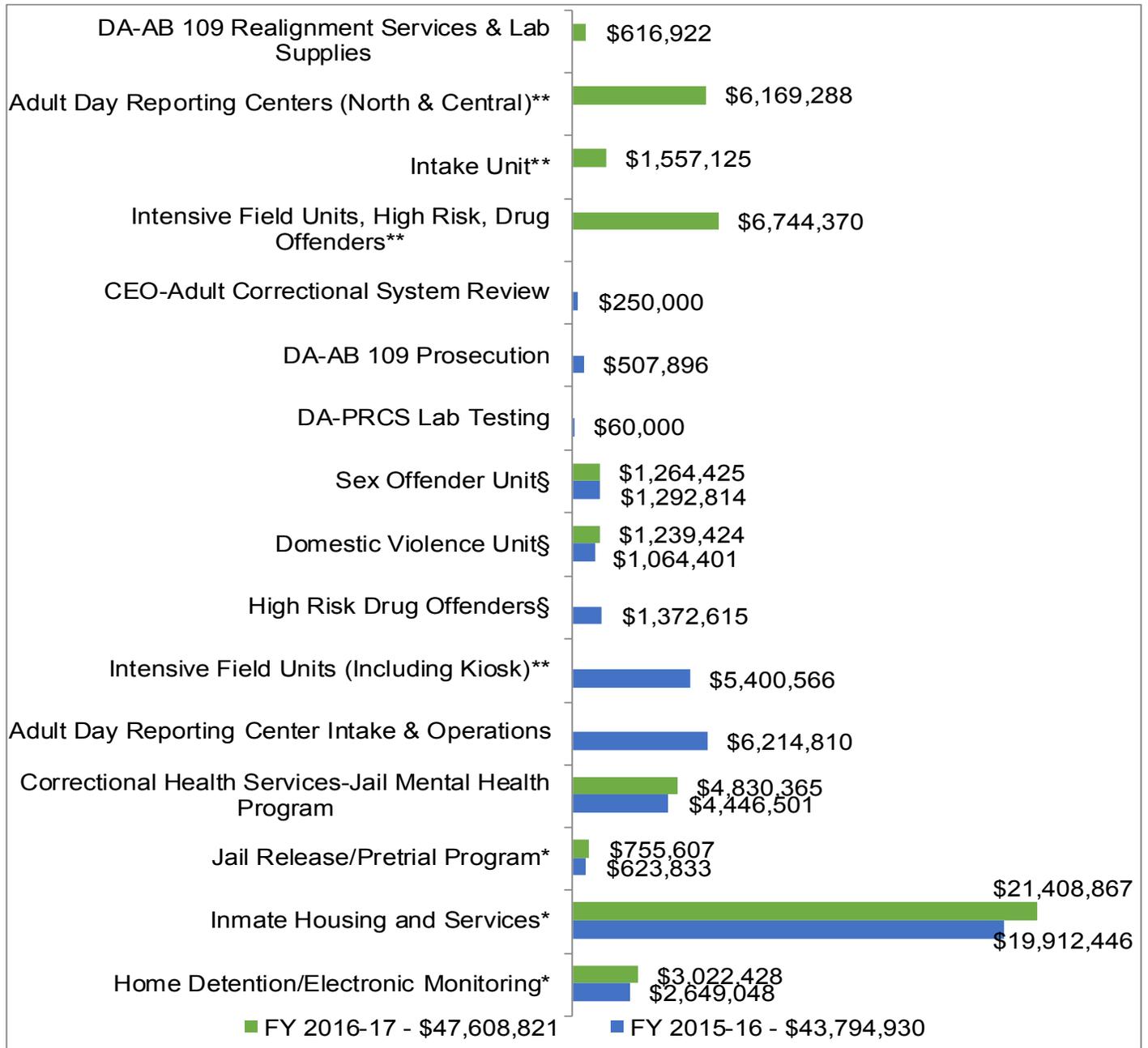
Goal: Maintain Community Safety by incorporating reentry principles into the jail custody environment, evidence-based practices into supervision and case management, and offender accountability with graduated sanctions.

- Objective:**
- Develop and improve offender life skills necessary for successful reintegration into the community through in-custody programs and practices that are evidence-based.
 - Focus resources on programs that are proven to reduce recidivism, develop alternatives to criminal behavior, and effective intervention services and supervision practices that incorporate offender accountability through use of graduated sanctions.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



* Sheriff; ** Probation; § Probation-Field Supervision

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- No direct allocations were made to non-public agencies

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The County is utilizing AB 109 funding for consulting services that include a review and assessment of the local adult correctional system to provide short and long-term strategies to meet adult correctional needs. The study includes evaluation of programs funded with Public Safety Realignment allocations.

Does the county consider evaluation results when funding programs and/or services?

Yes. When evaluation results are available, they are considered at the time program and service funding decisions are made.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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 provides a significant level of services to criminal justice involved individuals both in-custody and in the community. Sacramento County's Main Jail houses inmates with medical issues, such as chronic illness, pregnancy, detoxification, and other medical needs. Nursing coverage is provided 24 hours a day, 7 day a week. There are nurses for offender sick call who visit the housing units to attend to offender's medical needs in their living areas. Additional medical service is provided by two full-time doctors, a nurse practitioner, and a full-service dialysis unit. The Main Jail also has an acute mental health unit. Psychiatric and clinician staff assess and treat inmates in the acute mental health unit and general population. Psychiatric services include: crisis intervention, suicide prevention, medication evaluation and treatment, acute inpatient treatment, discharge planning and brief supportive contacts. Additionally, there are inmate service programs at the Main Jail that include AA/NA/Substance Abuse, Parenting, Man Alive, Woman Alive, Life Skills/MAAP, Celebrate Recovery, and multiple religion/bible studies provided by chaplains and volunteers.

In October 2015, the county also implemented a restoration of competency (ROC) program designed to restore mentally ill offenders who have been found incompetent to stand trial. The program receives funding from a State grant and the facility has 12 – 16 inmates per month receive services. Since October 2015, 61 offenders have been restored to competency.

Sacramento County operates eight collaborative court programs that utilize multi-disciplinary teams to provide valuable services and programming for offenders who can benefit from community-based supervision and treatment in lieu of commitment to the County Jail.

Collaborative court programs include:

- Mental Health Court jail diversion and treatment program court for offenders with significant mental illness.
- Co-Occurring Mental Health Court to serve moderate to high need felony offenders afflicted with mental health and substance abuse disorders.
- Drug Diversion for selected drug offenders who are typically nonviolent offenders being charged with possession of drugs for the first time.
- Proposition 36 Court allows qualifying offenders convicted of nonviolent drug possession offenses to receive an alternative sentence to incarceration to include being placed on probation and must complete a licensed and/or certified community drug treatment program as a condition of probation.
- Adult Drug Court diversion and treatment program for offenders who have committed nonviolent drug possession crimes, which may be either felonies or misdemeanors, or have violated their probation or have been involved in drug related crimes.
- Reentry Court provides treatment options for offenders who have committed a new offense and/or committed a violation of the probation conditions and are willing to participate in intensive cognitive therapy as an alternative to jail.
- Veterans Treatment Court is a court supervision and treatment program designed for veterans of the US Armed Forces who have committed crimes. Entrance into the program is limited to offenders that are eligible for veteran's benefits and likely committed their crimes as a result of trauma, posttraumatic stress, substance abuse and/or mental illness emanating from their time in the service.
- Reducing Recidivism of the Sexually Exploited and Trafficked (RRESET) Court is designed for offenders involved in prostitution and/or the victims of sexual exploitation who agree to participate in trauma-based therapy and counseling services and HIV testing.

The Sheriff's Department, Health and Human Services, Probation, and service providers are working collaboratively to provide a seamless continuum of services and supervision from Jail to Probation for realigned offenders who are released from the Rio Cosumnes Correctional Center (RCCC) to complete a term supervision with Probation. Eligibility Specialists help inmates enroll in healthcare and social service programs. Service needs are identified and services are provided, started and/or linked to inmates pre-release for a smooth transition back into the community where Probation ensures services are continued or started. Offenders at RCCC who are enrolled into this and other specialized programs are given a Reentry Specialist who has been selected based on their training and expertise in the various community programs available to the participants after release. Prior to leaving the jail the Reentry Specialist talks to the participants about where their needed services are being offered in the community, and assists with enrolling the offenders who want to continue programs and services started in jail that are available for completion in the community. The Reentry Specialist utilizes bi-weekly multidisciplinary team meetings to collaborate for any particular service needs or programs they are having trouble finding in the community. Probation operates three (3) Adult Day Report Center (ADRC) programs providing specialized supervision, treatment and support services such as vocational and educational services based on needs identified through Level of Service-Case Management Inventory (LS-CMI) risk and needs assessments and other assessments.

The ADRC programs are available to both realigned offender and traditional Probation populations. Currently, over 700 offenders are participating in all three ADRC programs. One ADRC programs has specialized culturally sensitive services for transitional age 18-21 population targeted as part of the local Reducing African American Child Deaths Initiative. All ADRC program include case management, assessment and screening by eligibility specialists, nurses, and mental health counselors for linkage to mental health, substance abuse and other services needed.

What challenges does your county face in meeting these programming and service needs?

Our county faces challenges related to resources and capacity needed to ensure people are assessed and linked to services that effectively address issues related to mental health and homelessness.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

None to report at this time.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Sheriff's Reentry Services Bureau manages a comprehensive array of reentry services and programs for offenders at the Rio Cosumnes Correctional Center (RCCC). Admission into reentry programming is based on an objective risk/needs assessment tool, the LS-CMI, ensuring that program services are allocated for offenders most likely to benefit from participation. The Bureau manages over 21 educational, vocational and treatment service programs that served over 2,000 offenders in 2015.

The County's collaborative court programs provide valuable services for those offenders who require treatment or specialized support. With specialized courts dedicated to veterans, mental health, sexual exploitation, substance abuse, reentry, and offenders with co-occurring conditions, the courts provide a comprehensive range of treatment services to over 600 offenders.

The program model developed by Probation for Realignment offenders in its Adult Day Reporting Centers is state-of-the-art. The program uses an evidence-based, validated risk assessment and case management tool (LS-CMI) to guide treatment planning and offender management. Program activities emphasize cognitive behavioral therapy, vocational training, anger management, parenting and substance abuse. Thirty percent of cases in program receive reduced probation terms and recidivism results have been favorable.

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Community Corrections Partnership Membership
(October 21, 2016)

R. Ted Baraan
Chief Probation Officer

Hon. Steven Sanders
Presiding judge or designee

Margie Barrios
County supervisor or chief administrative officer or designee

Candice Hooper
District Attorney

Greg LaForge
Public Defender

Darren Thompson
Sheriff

David Westrick
Chief of Police

James Rydingsword
Department of Social Services

Vacant
Department of Employment

Alan Yamamoto
Department of Mental Health

Steve Reid
Alcohol and Substance Abuse Programs

Krystal Lomanto
Office of Education

Diane Ortiz
Community-based organization

Vacant
Victims' interests

The CCP meets bi-monthly

San Benito County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Coordinate services to the reentry population.

Objective:

- Provide staff for the CTC.
- Secure services for the CTC.

Measure:

- #1: Obtain through lease of purchase of a location to house the CTC.
- #2: Select and appoint staff for the CTC.
- #3: Secure contracts, MOUs, or other agreements to provide services through the CTC.

Progress: #1: In progress. Location secured. Build-out of site in progress. #2: In Progress. Reentry Program Manager classification developed, approved, selected, and appointed. Office Assistant position pending selection. #3 In Progress.

Goal: Enhance Supervision of highest risk reentry population.

Objective:

- Provide staff to assist local law enforcement effort.

Measure:

- #1 Select and assign staff to partner with local law enforcement.

Progress: In progress.

Goal: Increase capacity to provide services to reentry population.

Objective:

- Provide enhanced educational and employment courses through local community college.
- Support for substance abuse treatment.
- Provide direct aid to clients for emergency housing and immediate concrete services.

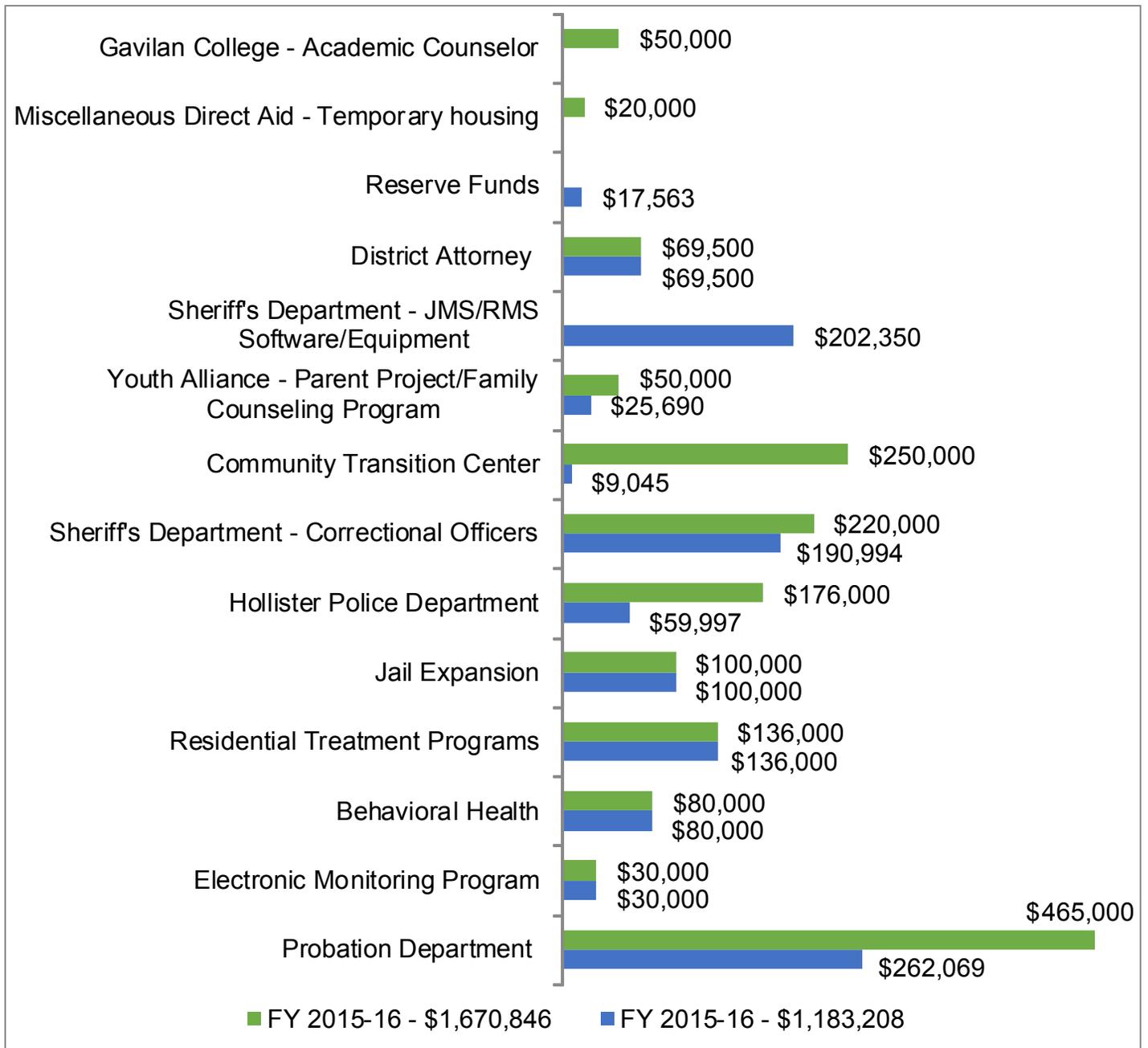
Measure:

- #1: MOU with community college to provide courses and a part-time academic counselor.
- #2: MOU with Behavioral Health Care Services to contract with Residential Treatment Provider.
- #3: Finalize process for accessing and accounting for direct aid.

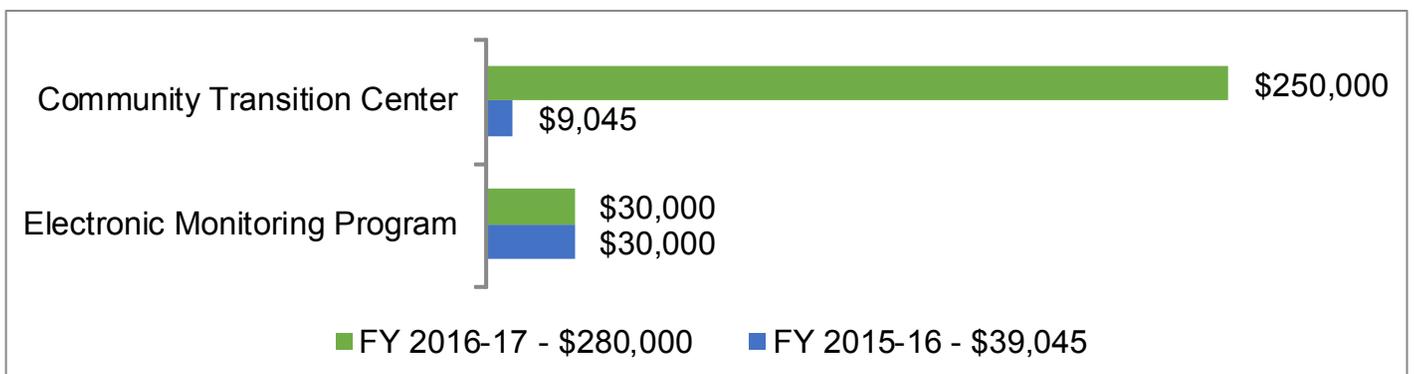
Progress: #1: In progress. #2: Completed. #3 Completed.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

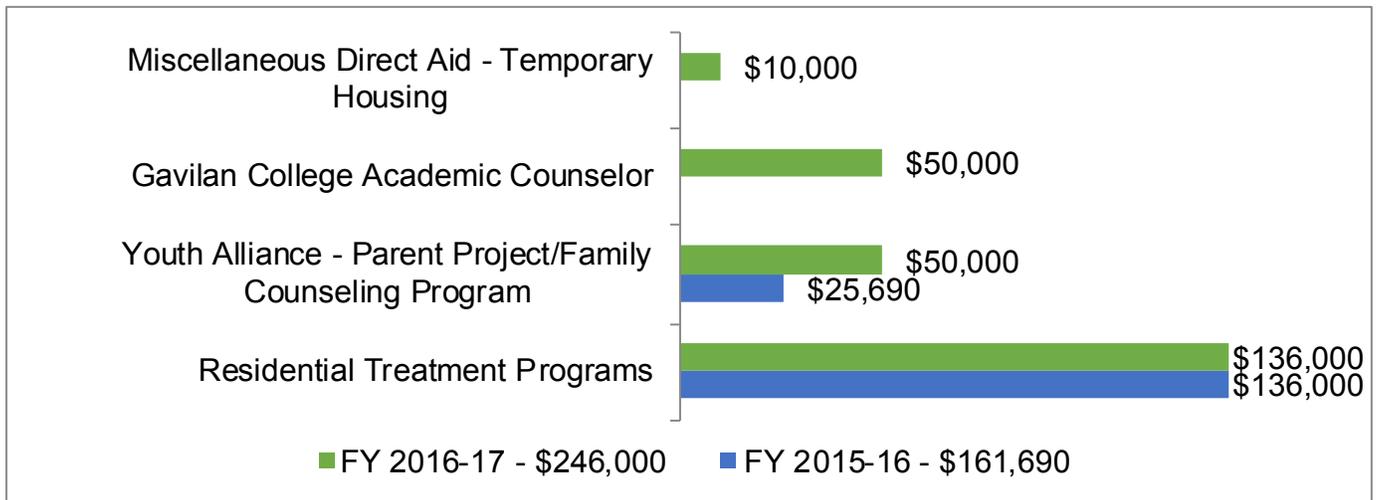
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Cognitive Behavior Therapy.
Parent Project/Family Counseling.
Substance Abuse Counseling.
Residential Drug Treatment.

What challenges does your county face in meeting these programming and service needs?

The county declined to respond to this question.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

Community Corrections Partnership Membership
(October 21, 2016)

Michelle Brown
Chief Probation Officer

Nancy Eberhardt
Presiding judge or designee

Gary McBride
County supervisor or chief administrative officer or designee

Michael Ramos
District Attorney

Phyllis Morris
Public Defender

John McMahon
Sheriff

Karen Comstock
Chief of Police

CaSonya Thomas
Department of Social Services

Kelly Reenders
Department of Employment

Veronica Kelly
Department of Mental Health

Trudy Raymundo
Alcohol and Substance Abuse Programs

Theodore Alejandro
Office of Education

Vacant
Community-based organization

Flerida Alarcon
Victims' interests

The CCP meets semi-annually

San Bernardino County

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Decrease likelihood of recidivism through employment opportunities for offenders.

- Objective:**
- Increase accessibility to employment/vocational programs for offenders reporting to one of three Day Reporting Centers (DRC's) located throughout the county.
 - Reduction in recidivism by this population.
 - Increased self esteem, confidence and productivity of probationers.

Measure: • Increase sustainable employment rate to 25%.

Progress: Probation has partnered with Workforce Development (WFD) to develop a comprehensive Probation to Work Program. Development partnering with the probation officer has seen an increase in successful program completion and employment acquisition. Although the population entering the program has remained fairly consistent throughout the three regional areas with a successful sustainable employment rate of 21% of the 721 offenders who attended the program for 2015/2016. Adding additional educational and vocational resources along with a high attendance rate in this program for 2016/2017 period will increase the success rate for adult offenders participating in readiness programs and gaining steady and sustainable employment.

Goal: Decrease the potential for recidivism in the homeless offender population coming out of the jail facilities by linking them to housing opportunities prior to release from custody.

- Objective:**
- Reduce homelessness with the use of Probation Detention Liaison Officers (DLO) in the jails.
 - Assist with transportation from jail facilities to the Day Reporting Centers or housing upon release from custody.

Measure:

- Reduction in homelessness and recidivism among this population.
- Increase transportation of homeless offenders through immediate transportation from jail to DRC or housing.

Progress: DLO's were assigned to three of four jail facilities along with implementation of guidelines to coordinate effective re-entry placement of offenders by the end of the 2016/2017 reporting period.

Goal: Reduce Recidivism and Hospitalization of Mentally Ill Offenders on Probation.

- Objective:**
- Provide services, by specially trained probation officers, to clients with a serious mental illness. These services are delivered with the Department of Behavioral Health and community-based service treatment providers.
 - Provide clients with information on what is required by the courts, as well as services to help them live independent and crime-free lives.

- Measure:**
- Reduction in recidivism, hospitalizations and homelessness.
 - Increased educational and employment engagement of probationers under mental health supervision.

Progress: Implement guidelines to coordinate the care of Adult probation clients, with symptoms of mental illness and/or substance use addictions. The purpose is to ensure the continuum of care in all regions of the County of San Bernardino. Out of 146 mental health clients on this probation program, only 22 are currently incarcerated. Zero (0) are homeless and only 2 are currently hospitalized.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

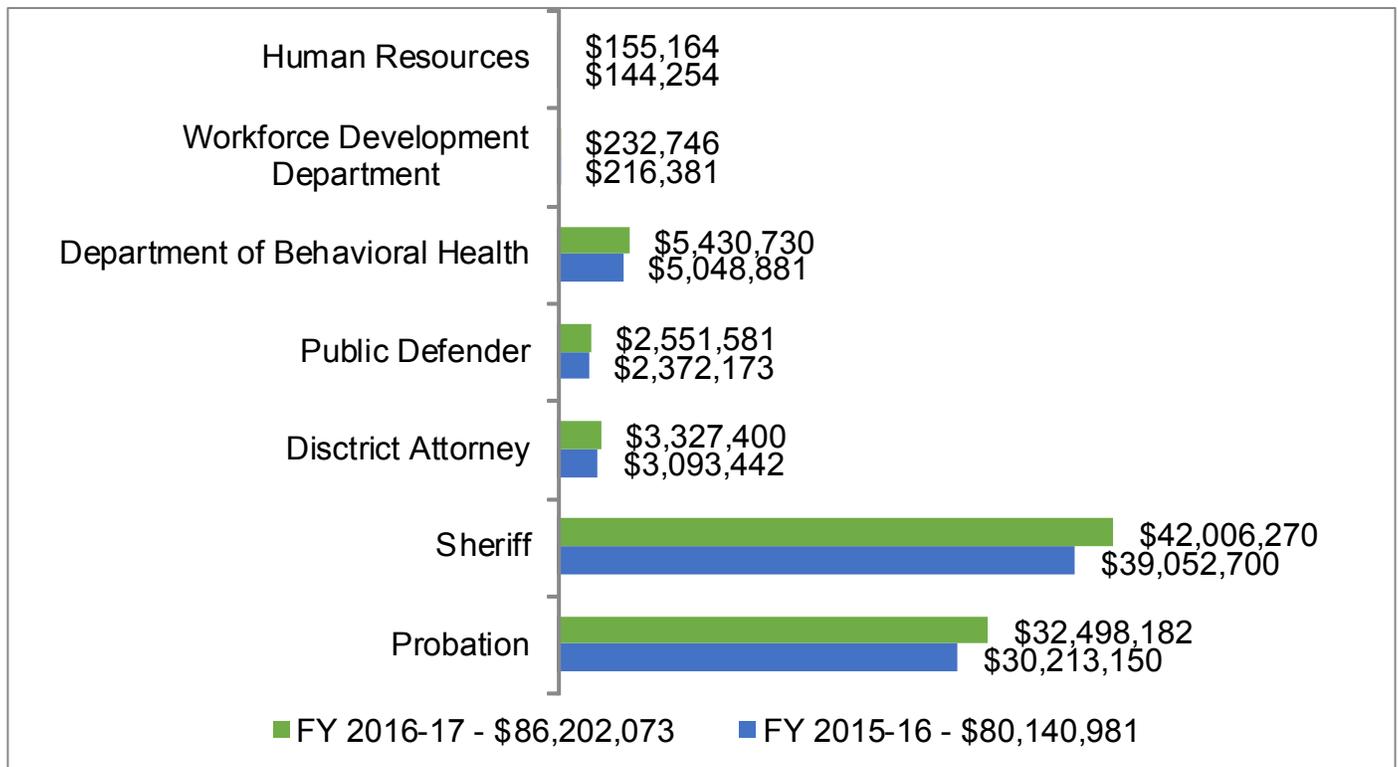
Goal: The safe transition of medically and mentally fragile clients from custody to the community.

- Objective:**
- Establish the Custody to Community Partnership (CTC) with all county stakeholders including; Probation, Sheriff, State Corrections, Behavioral Health, County Hospital, District Attorney, Public Defender and Social Services.
 - Early identification of Medically Fragile Clients requiring a skilled nursing facility, housing, medications, medical equipment, hospice, medical transport, etc. prior to release from custody.
 - Early identification of Mentally Fragile Clients requiring housing, medication behavioral health, substance abuse treatment etc. prior to release from custody.

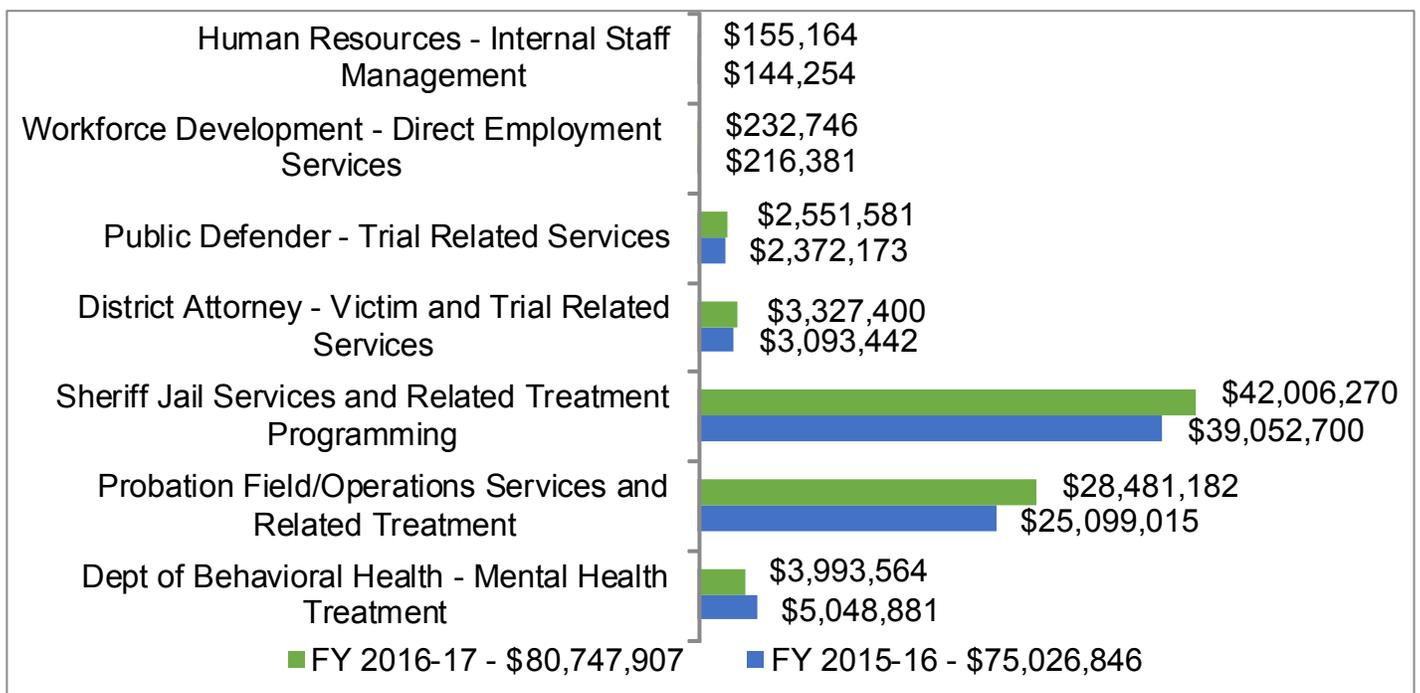
- Measure:**
- Placement of Medically Fragile Clients in an appropriate facility directly from a jail facility, prison or hospital.
 - Reduction of homeless medically fragile clients.

Progress: All ten (10) Medically Fragile Clients have been placed and treated immediately upon release from custody under the supervision of a Senior Probation Officer.

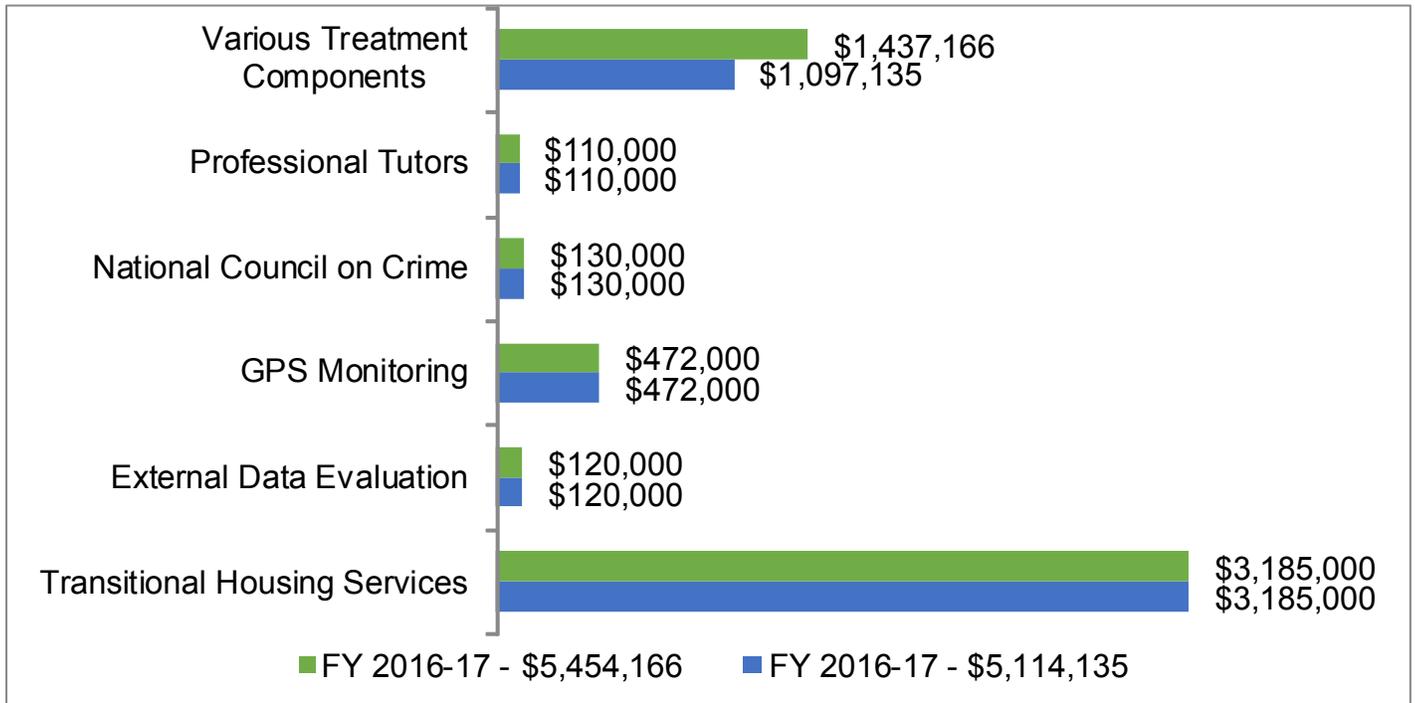
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Evaluations are dependent on the program/service.

Does the county consider evaluation results when funding programs and/or services?

Yes. For example, contracted services for completion of GED requirements by program participants are compared to State averages.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21% to 40%

We would like to better understand your 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?

San Bernardino County provides the following community-based services targeted for individuals with a criminal justice system history:

- Clinical assessment and comprehensive recovery-oriented treatment planning.
- Intensive case management.
- Intensive outpatient treatment for mental health and substance abuse disorders.
- Psychiatric and medication support services.
- Supportive housing, medical, financial and vocational assistance.
- Day treatment rehabilitation services.
- Group therapy.
- Substance and alcohol screening and education.
- Drug and alcohol – individual, family and group counseling.
- Crisis intervention.

In addition to these targeted services, the County provides a comprehensive continuum of behavioral health services that include both outpatient and acute inpatient care. Residential and crisis management services include mobile community response teams, out-stationed triage engagement teams and crisis walk-in centers with some programs operating 24/7. The Probation Department also has three (3) Day Reporting Centers where offenders can report and receives services or referrals, as well as Department of Behavioral Health staff who are stationed at these and other probation locations. San Bernardino County has a 211 phone system for all residents to call for assistance/referrals.

In Custody Programs:

- Alcoholics Anonymous/Narcotics Anonymous meetings at Central Detention Center (CDC), High Desert Detention Center (HDDC) and male Fire Camp.
- Individual counseling and transition planning for male and female fire camp.
Job readiness classes for male and female fire camp.
- Volunteer Journaling Program (independent study) at CDC, HDDC and West Valley Detention Center (WVDC).
- Living Skills classes for male and female Fire Camp.
- Microsoft Office Specialist Certification at Glen Helen Rehabilitation Center (GHRC).
- Pre-Trail Assistance to California Counties (PACC) at HDDC.
- Parenting and Trauma classes for Female Fire Camp.
- Social Worker II visits and resource distribution at WVDC, male and female fire camps.
- Substance Abuse classes at CDC and WVDC.
- TALK classes for Female Fire Camp.

What challenges does your county face in meeting these programming and service needs?

Geography is a significant issue, especially in rural areas such as Morongo Valley, Needles, and Barstow.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Sheriff Department has established the “24” Program at each of their four Type II jail facilities and has also been collaborating with Abundant Living Church to establish the “24” program. The “24” Program provides full end-to-end service assisting inmates with a smoother transition into the community following their release from custody. Abundant Living make contact with the inmate 24 days prior to release in order to establish rapport and conduct an assessment – including a personalized case management plan - of what services and resources will be necessary prior, during, and after release. The Abundant Living Church staff will meet with the inmate and their family, providing transportation to the Probation Day Reporting Center (DRC) if necessary. The Individual Service Plan will continue with the goal of a positive re-integration into the community and reduced negative contact with law enforcement. The “24” staff will also provide case management and monitor progress in several areas including employment, education, and individual/family counseling.

Additionally, Five Keys is a charter school that provides students both in and out of custody with an opportunity to advance their educational level either by earning a high school diploma or a GED. Our curriculum includes Career Skills and Life Skills and additional courses related to careers in Construction, Hospitality, Sewing, Computer Services and Multimedia. Our partnership with the Sheriff’s Department and the Probation Department bring actual job opportunities, housing, and other necessary services that enable students to move promptly in the right direction, upon their release. Many community partnerships have been forged through the commitment to Restorative Justice and building safer communities. Our programs link students up with educational programs as well as other county agencies including Workforce Development and Transitional Assistance to assist clients in getting educational, vocational and life skills needed to be productive in their community.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Adolfo Gonzales
Chief Probation Officer

Hon. David Danielsen
Presiding judge or
designee

Ron Lane
County supervisor or
chief administrative
officer or designee

Bonnie M. Dumanis
District Attorney

Henry Coker
Public Defender

William D. Gore
Sheriff

Jim Redman
Chief of Police

Nick Macchione
Department of Social
Services, Department of
Mental Health and
Alcohol and Substance
Abuse Programs

Andy Hall
Department of
Employment

Vacant
Office of Education

Charlene Autolino
Community-based
organization

Vacant
Victims' interests

The CCP meets
semi-annually

San Diego County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Incorporate evidence-based practices into supervision and case management of PRCS and MS offenders; encourage the use of evidence-based practices in sentencing for felony offenders.

Objectives:

- Encourage the use of evidence-based practices in sentencing for felony offenders: Provide results of risk and need assessments to all sentencing parties; train all parties on alternative sentencing and best practices for recidivism reduction.
- Provide evidence-based supervision and intervention services for PRCS offenders: Employ risk-based supervision - more intense supervision for higher risk offenders; employ swift and sure sanctions for non-compliant behavior; provide incentives for compliant behavior; refer to and monitor use of community-based treatment services.

Measure:

- Use of risk and needs assessments in sentencing and supervision efforts.
- Risk-based supervision and referrals to appropriate community-based services.
- Use of incentives and sanctions and use of Integrated Behavioral Intervention Strategies (IBIS) in supervision and engagement efforts.

Progress: San Diego County Probation has worked to enhance the incorporation of evidence-based practices into the supervision and case management of individuals supervised by Probation. In January 2013, San Diego County Probation began transporting PRCS offenders directly from state prison to the Community Transition Center (CTC). The CTC was created by Probation, in partnership with the San Diego County District Attorney's Office, to facilitate the successful re-entry of PRCS offenders. Upon arrival from prison, offenders are assessed for risk and criminogenic, behavioral health and physical health needs. Offenders' risk and needs are assessed by Probation Officers using the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment. The PRCS offenders are then linked to appropriate services based on their assessed needs identified by the COMPAS assessment.

In February 2013, *Blueprint for Success* was implemented which is an intensive supervision model utilized to increase the chances of successful reintegration into the community. It is a collaborative effort that outlines how reentry is facilitated for MS Offenders using the COMPAS

Progress Continued: assessment. It begins with developing a preliminary case plan that describes the services the offender will receive in custody and a guide to link to services during community supervision. It also outlines the pre-release hearing and subsequent status hearings to monitor progress in the community through MS Court. Once sentenced, eligible offenders participate in the Sheriff's Reentry Program while in custody. The Reentry Program includes correctional counselors and on-site Probation Officers that assist the offender in completing their goals as identified in their individualized case plan. As part of MS Court, each MS offender attends a court hearing 30 days prior to release where his/her in-custody progress is reviewed, a transition and supervision plan is presented and conditions of MS are reinforced. Upon release, the supervision Probation Officer continues working with the offender on their case plan, monitoring compliance and placing the offender in appropriate programs based on his/her identified risk and needs.

San Diego County Probation applies an evidence-based approach by utilizing the offender's case plan to target their highest needs and to provide intensive supervision services, while maintaining a steady balance between offender rehabilitation and community safety. During the course of community supervision, Probation Officers positively reinforce progress and sanction negative behavior with the goal of reinforcing long-term positive behavior change. COMPAS assessments completed revealed that in FY 2015-16, 71% of PRCS and 57% of MS offenders were assessed as high-risk.

In FY 2015-16, Probation implemented a Stratified Supervision model within the PRCS Division. Prior to Stratified Supervision, all PRCS offenders, including those assessed as low and medium risk were supervised on a high-risk caseload. The Stratified Supervision model consists of regionalized medium-risk caseloads.

These newly created caseloads target medium and low risk offenders that have exhibited sustained compliance while under supervision in the community. This has provided an opportunity for a step-down approach and incentive based supervision. Research has consistently shown that engagement between an offender and a Probation Officer is one of the best ways to reduce recidivism. Motivational Interviewing and cognitive behavioral interventions have also been linked to reduced recidivism. Through San Diego County's Probation Department's adoption of Integrated Behavioral Intervention Strategies (IBIS), Probation Officers are taught how to use Motivational Interviewing and cognitive behavioral skills as tools to allow greater engagement and reduce recidivism. Utilizing specialized training and support, Probation Officers use these skills when meeting with PRO both in the office and in the field. Probation Officers undergo 2 days of intensive IBIS training. In Fiscal Year 2015-16, 99% of the PRO Division officers were trained in Motivational Interviewing, cognitive behavioral interventions and IBIS. As a result, officers delivered improved supervision by holding offenders accountable and providing access to appropriate community based rehabilitative services through engaging with offenders and assisting them in making long term behavior change. Using Probation's Community Resource Directory (CRD), an average of 91% of MS and PRCS offenders were referred to at least one treatment service through the CRD to meet an assessed criminogenic need.

During FY 2015-16, 63% (925 out of 1,471) of PRCS offenders and 85% (398 out of 470) of MS offenders successfully completed their term of supervision without a new conviction for a felony or misdemeanor offense during their term of supervision. San Diego County Probation emphasizes offender engagement, mentoring and coaching with the PRO Division as a means to enhance their successful reentry into the community. As a means to measure the success of this effort, Probation actively monitors the percentage of PRCS individuals who are granted a discretionary discharge from their PRCS term.

Goal: To incorporate re-entry principles into in-custody programming.

Objective:

- Provide in-custody programming.
- Expand re-entry beds in jail(s).
- Create Mandatory Supervision (MS) Court to transition persons from jail to community supervision.

Measure:

- Number of offenders served.
- Open new reentry facilities and expand capacity.

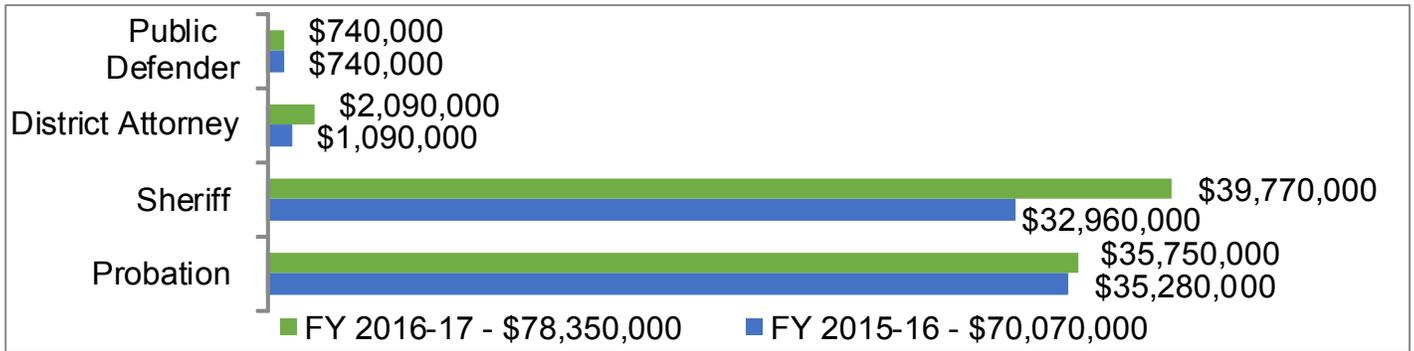
Progress: In June 2014, the County of San Diego Sheriff's Department opened the East Mesa Re-entry Facility (EMRF). The design of the EMRF is to target sentenced offenders and conduct an initial assessment to determine the specific programming the offender will complete. In January 2016, the Las Colinas Detention and Reentry Facility for female offenders became fully operational. The design of the facility provides a more normative environment and the operational philosophy incorporates gender responsive and trauma informed principles. While East Mesa and Las Colinas are the primary reentry facilities, all Sheriff's facilities provide in custody programming for education, vocation, psycho-social and wellness. The programs include cognitive behavioral therapy (CBT), substance abuse treatment, vocational certificate programs, college and high school equivalency courses and stress management/healthy lifestyles classes. The Sheriff's Department is expanding programming for high classification and specialized populations. The skills individuals learn while incarcerated enable them to continue their education or further their vocational skills upon release. A gentleman recently released from EMRF emailed staff to thank them. Here's what he wrote: *"Thank you. I mean, really, thank you. To everyone at Mesa who believes that rehabilitation is possible and important. I have been reflecting on how rich and beautiful this holiday season is compared to the last two I served in custody. The skills and tools that I learned while at East Mesa have allowed me to return to a productive and meaningful life. I owe such a debt to all of you who helped me find my path, and I strive to show my gratitude daily in how I live today. So thank you, so very much, for everything. You have given this man his life back. As you approach these holidays, please take a moment to realize that you all are doing a marvelous job, and that the fruits of your labors may not always be evident, but for this man, they are priceless."*

Planning for release begins months and even years ahead of time for a smooth transition and success in the community. At EMRF and the Las Colinas Detention and Reentry Facility, inmates are offered the opportunity to enroll in health care options offered through the Affordable Care Act prior to their release from custody. To date, 4,500 individuals in custody and 1735 under Probation supervision have been enrolled. Community providers assist with enrollment, engagement and ongoing care in the community.

In November 2015, the new DMV Identification Program began offering eligible inmates the opportunity to apply for and receive a California DMV identification card prior to being released from custody. To date, more than 460 applications have been processed, with an 84% validation rate. In 2016, in collaboration with the San Diego Workforce Partnership, the U.S. Department of Labor awarded a grant to fund an onsite America's Job Center at the EMRF. The project will target 600 participants of which 100 will receive intensive case management both in custody and out of custody with the goal of obtaining employment in the community. A second job center has opened at the Las Colinas Detention and Reentry Facility which is also funded by the Department of Labor.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



The total noted here represents the budgeted amounts adopted by the Board of Supervisors for FY 2015-16. At the time the FY 2015-16 budget was developed, only estimated allocation information was available. Additionally, the amount of FY 2014-15 growth funds was not known and not included in the budget adopted in August of 2015. Therefore, Adopted Budget amounts may not match final budgeted amounts or the total cash received at the close of this fiscal year.

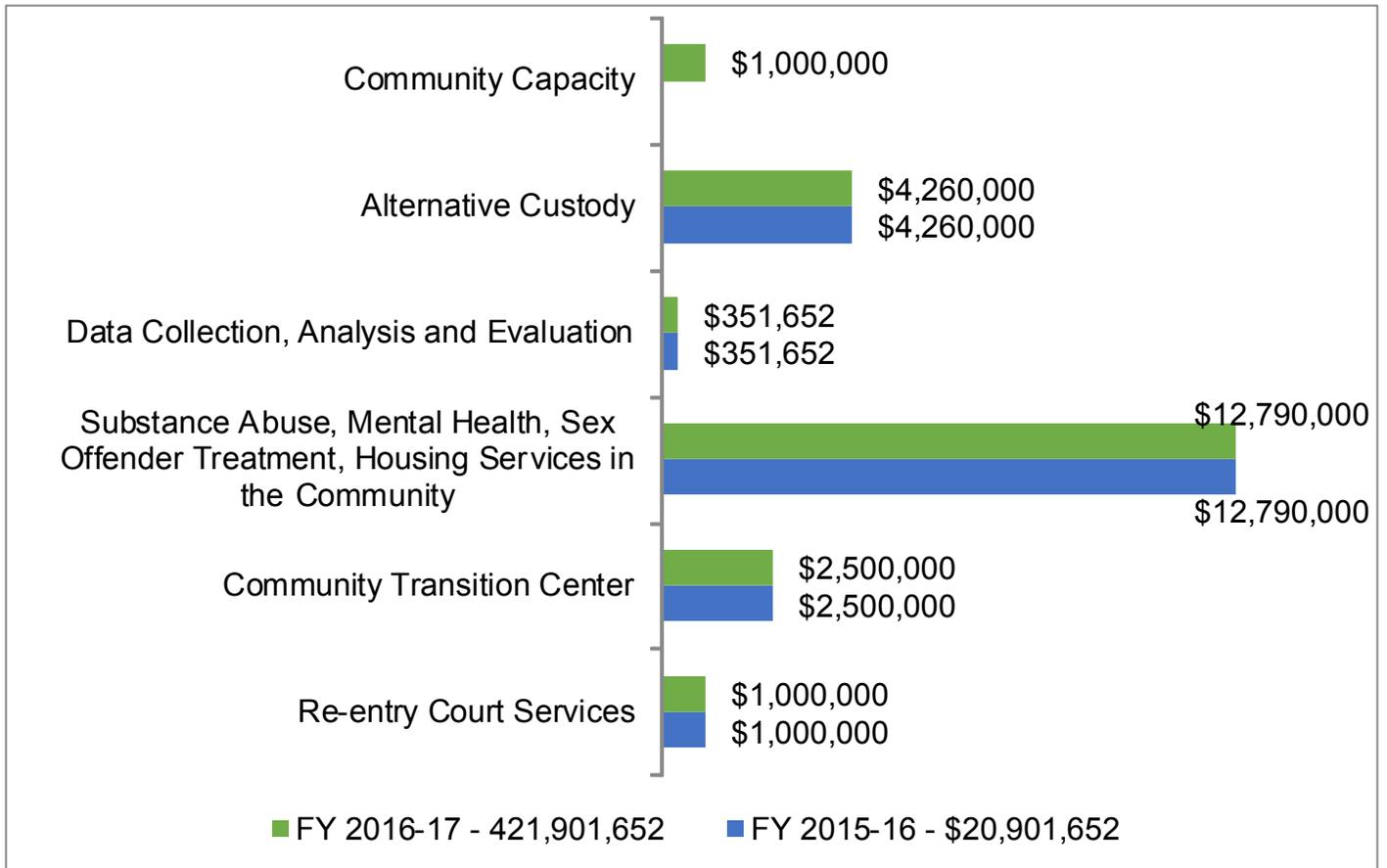
The total noted here represents the budgeted amounts adopted by the Board of Supervisors for FY 2016-17. At the time the FY 2016-17 budget was developed, only estimated allocation information was available. Additionally, the amount of FY 2015-16 growth funds was not known and not included in the budget adopted in August of 2016. Therefore, Adopted Budget amounts may not match final budgeted amounts or the total cash received at the close of this fiscal year.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



This total represents the amount budgeted by Board of Supervisors for FY 2015-16 and FY 2016-17.

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



This total represents the amount budgeted by Board of Supervisors for FY 2015-16 and FY 2016-17.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The County of San Diego justice partners including Probation, the District Attorney's Office, Sheriff's Department and the Health and Human Services Agency have implemented a multi-agency data warehouse known as the "data hub." The San Diego Association of Governments (SANDAG) was selected as a research partner to utilize this data to fully measure and report on outcomes. SANDAG's initial evaluation report on AB 109 will describe the characteristics of the population and provide preliminary recidivism measures. A subsequent report will assess the programs and services offenders received by utilizing data from the "hub" to document the offender's need and relate it to the services they received and how these data relate to positive outcomes. Preliminary data from the Hub have been shared with partners for feedback with interim reports published and shared with the public including how often PRCS and MS offenders have been arrested while under community supervision (compared to traditional probationers) and analyzing the effects of public safety realignment on the jail/local prison and probation department populations.

Additionally, within the Sheriff's Evidence-Based Practice System (EBPS) is a module called Offender 360, which was developed by Tribridge using the Microsoft Dynamics Customer Relationship Management. Offender 360 EBPS allows the County of San Diego's justice partners to collect, share and analyze programming information to measure the success of re-entry services by offender, population and agency. The Offender 360 is fully operational and all Sheriff's Re-entry Services Divisions and the County Parole and Alternative Custody Unit staff began using the system in July 2015. The Sheriff's Department is continuing to work with Tribridge on enhancements for provider access and the availability of analytics.

Does the county consider evaluation results when funding programs and/or services?

The County of San Diego considers all available outcome data and evaluation results in combination with data on assessed needs, when prioritizing available funding. In February 2015, the San Diego County Probation Department contracted with the University of Cincinnati Corrections Institute to become certified to implement the Evidence-Based Correctional Program Checklist (CPC) evaluation. The CPC evaluates programs that are funded to provide treatment services to the realigned population. The CPC was designed to assess correctional intervention programs and evaluate the extent to which these programs adhere to EBP including the principles of effective intervention. Indicators included in the CPC have been found to be correlated with reductions in recidivism and the process provides a standardized measure of program integrity and quality. The CPC report identifies the strengths and areas for improvement for a program as well as specific recommendations that will bring the program closer in adherence to evidence-based practices. By implementing the CPC, the San Diego County Probation Department has been able to promote accountability, help programs increase the quality of the services they provide to our realigned population, assist in program development, stimulate research on the effectiveness of local treatment programs and use the outcome measures to evaluate funding proposals as well as enhance external service contracts.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

We would like to better understand your 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?

The County of San Diego has developed a robust continuum of mental health and substance use disorder services for our offenders through a partnership with the County of San Diego's Health and Human Services Agency's Behavioral Health Division. PRCS individuals are first served at the County of San Diego Probation Department's CTC. Shortly after arriving at the CTC, each PRCS offender is assessed using the COMPAS assessment and screened by a Behavioral Health Screening Team (BHST). Through the assessment and screening process, the offender's criminogenic and behavioral health needs are identified. Offenders are then linked to appropriate community-based treatment intervention programs as indicated by their assessed need. Services range from mental health clinics, full service partnership/Assertive Community Treatment programs (ACT), outpatient substance abuse programs, residential substance abuse programs, detoxification programs, dual diagnosis programs, CBT, employment services, and transitional housing. The CTC is co-located with a large residential substance abuse treatment program that can provide a seamless transition for those who would benefit from the program on-site.

For MS Offenders, Probation prepares an MS Pre-Release Plan which includes a COMPAS assessment and a case plan based on the offender's identified risks and needs. Once sentenced, the offender participates in prescribed programming based on the assessments while in custody, including CBT, vocational programming, anger management, life skills and substance abuse treatment. With correctional counselors and on-site Probation Officers, MS offenders work to complete the goals as identified in Probation's case plan. After release from incarceration, regular status hearings are calendared in MS Court for continued monitoring of the offender's progress. The Probation Officer continues to update the case plan, monitor compliance and place the offender in appropriate programs based on the offender's assessed risks and needs.

What challenges does your county face in meeting these programming and service needs?

There are two key challenges the County of San Diego is facing. The first is system capacity. The vast majority of PRCS and MS offenders need some level of behavioral health services and substance abuse treatment. It is often the most intensive interventions of residential substance abuse treatment or Full Service Partnership programming for those who are severely mentally ill or individuals with a dual diagnosis. Unfortunately, local program capacity does not always meet our County's ongoing need, so at times offenders have to wait for services. While waiting, they may stay at the CTC or receive lower level services on an interim basis.

In FY 2015-16, the Probation Department initiated the procurement process to expand the number of service providers and overall capacity of residential substance abuse programs. Through this effort, the Probation Department added 28 additional treatment beds and 5 new service providers. These new resources became operational in July 2016. The County of San Diego continues to address managing needed capacity for treatment services.

The second challenge is the majority of our County's community-based providers serve both the offender population and individuals in the community who are not justice involved. Interventions that may be appropriate for the general population may not be effective for the offender population, particularly high risk offenders. In 2015, the County of San Diego implemented the CPC tool to evaluate the extent to which local treatment and intervention programs adhere to the principles of effective intervention. The indicators included in the CPC have been found to be correlated with reductions in recidivism. The process provides a measure of program integrity and quality and

provides useful recommendations for program improvement. Since the inception of the CPC, eight evaluations have been completed on programs that serve PRCS and MS individuals. The evaluations conducted identified a gap in our treatment community regarding the unique treatment needs of our offender population. This key finding led to community outreach, training development, and electronic access to Probation's COMPAS risk and need assessment results. For that reason, Probation's Treatment and Clinical Services Division trained fifty-three community providers in the specifics of addressing criminogenic needs of the justice-involved population and utilizing the COMPAS assessment tool to support the offender's unique case plan. In 2016, the County of San Diego began conducting one-year follow up CPC evaluations. To date, two follow-up evaluations have been conducted and both providers yielded a noticeable improvement in their score by applying recommendations provided in their initial CPC evaluation.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In FY 2015-16, the County of San Diego Probation Department implemented Stratified Supervision of PRCS offenders. As previously described in question seven, Stratified Supervision has assisted PRCS supervision Probation Officers in providing improved services by allowing for a step-down approach and an opportunity to increase incentive-based supervision.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In February 2013, the MS Court Program was developed. Every offender sentenced to a split term participates in MS Court. To manage the MS offender population, Probation prepares an MS Pre-Release Plan which includes a COMPAS assessment and a case plan based on the offender's identified risks and needs. Once sentenced, the offender participates in prescribed programming based on their assessment and while in custody meets with correctional counselors and on-site Probation Officers. The MS offenders work to complete their unique goals as identified in their case plan.

Approximately thirty days prior to release, the offender attends a pre-release Court hearing where the Court and the multi-disciplinary team, which includes an assigned Deputy District Attorney and Deputy Public Defender, a Correctional Counselor, and assigned Probation Officer review the offender's progress in custody and discuss the plan for transition to the community. The offender is then brought into Court and the Court informs the MS offender of the conditions and requirements of their mandatory supervision.

After release from incarceration, regular status hearings are calendared in MS Court for continued monitoring of the offender's progress. MS Court is held on a bi-weekly basis. In addition to these regular status hearings, the Probation Officer will continue to update the case plan, monitor compliance and place the offender in appropriate programs based on the offender's assessed risks and needs. All warrants are brought before the Judge and all revocations and modifications to the conditions are heard in MS Court. During FY 2015-16, 85% (398 out of 470) MS split-sentenced offenders completed their term of supervision in the community without receiving a subsequent misdemeanor or felony conviction during the term of supervision.

Another local best practice in the County of San Diego is our CTC. The CTC was created and became operational in January of 2013 to facilitate the re-entry of PRCS offenders. Prior to the implementation of the CTC, PRCS offenders absconded directly upon release at an overall rate of 10%. As part of the operation of the CTC, every PRCS offender is picked up at state prison upon release and transported directly to the CTC. This transportation service effectively eliminates an

offender's ability to abscond. A PRCS offender recently told a Probation Officer at the CTC that, *"The mandated release to probation allowed me to come somewhere safe instead of thrown to the streets."* He also stated, *"Probation Officers at the CTC give off this positive aura of being approachable."*

With the implementation of the CTC, Probation Officers are able to immediately assess and engage the offenders and connect them with services needed to successfully reintegrate into society. Upon arrival at the CTC, offenders are assessed for criminogenic needs and meet with the BHST. The BHST screens each individual for substance abuse and mental health needs. Onsite staff are available to conduct benefit eligibility screening and application assistance. While at the CTC, a preliminary case plan is developed and offenders are referred to treatment and intervention services. Upon leaving the CTC and reporting to the assigned supervision Probation Officer, offenders may be referred to additional services based on their specialized case plan.

Another innovative use of the CTC allows offenders (including MS offenders) who violate their community supervision terms and are in need of treatment to be referred to, and housed at the CTC while awaiting availability of a residential treatment program.

This temporary housing helps to save limited jail bed space and keeps the offender in a therapeutic environment until they can enter a program. During FY 2015-16, the CTC served a total of 1,864 offenders (1,132 PRCS, 247 MS, 366 PRCS violators, and 119 MS violators).

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Community Corrections Partnership Membership
(October 21, 2016)

Karen Fletcher
Chief Probation Officer

Mark Culkins
Presiding judge or designee

John Avalos
County supervisor or chief administrative officer or designee

George Gascón
District Attorney

Jeff Adachi
Public Defender

Vicki Hennessy
Sheriff

Toney Chaplin
Chief of Police

Noelle Simmons
Department of Social Services

Jeffrey Mori
Department of Employment

Barbara Garcia
Department of Mental Health and Alcohol and Substance Abuse Programs

Steve Good
Office of Education

Frank Williams
Community-based organization

Beverly Upton
Victims' interests

The CCP meets semi-annually

San Francisco County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Strengthen justice system partner collaboration and reduce recidivism of individuals on community supervision.

- Objective:**
- Investigate existing probation department case management system (CMS) functionality, limitations, and linkages with justice system partners' systems.
 - Identify and assign key leadership staff to the CMS planning and implementation effort.

- Measure:**
- Development of a CMS implementation plan.
 - Assignment of key leadership staff to the CMS effort.
 - Identification of needed CMS functionality, including data reporting requirements and interfaces with justice system partners.

Progress: In FY 15/16, the probation department assigned key leadership staff from the Information Technology, Records, and Reentry divisions to this CMS effort. CMS functionality has been identified and this information will be used to inform the process for selecting and implementing a new CMS. Improved CMS functionality will allow for increased communication between justice system partners, and more efficient and effective management of operations and progress toward recidivism reduction goals.

Goal: Increase successful termination rate of those completing community supervision in San Francisco.

- Objective:**
- 80% of individuals who terminate from community supervision in FY 15/16 will terminate successfully.

- Measure:**
- Number of individuals who successfully terminate community supervision in FY 15/16.

Progress: In FY 15/16, 77% of individuals completing community supervision terminated successfully.

Goals, Objectives, Outcome Measures and Progress FY 2016-17

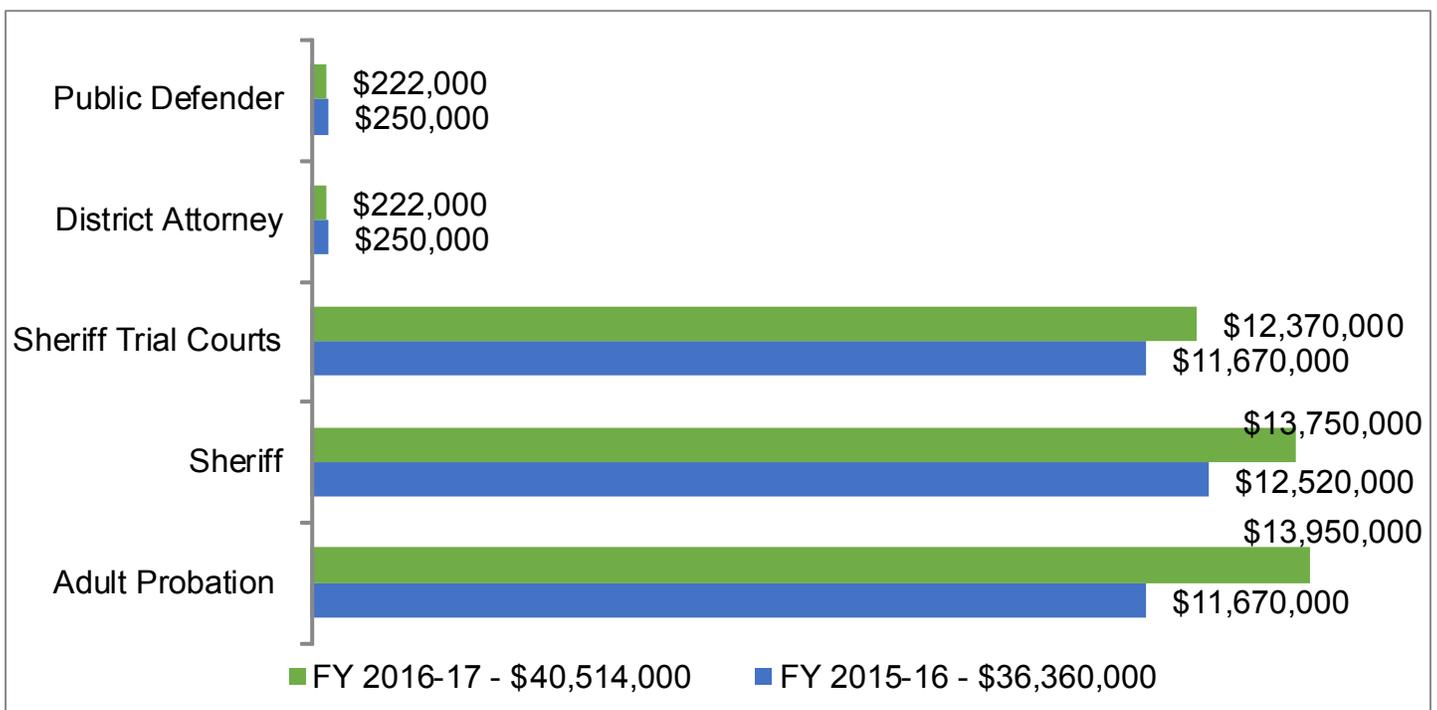
Goal: Increase the knowledge of racial and ethnic disparities in the San Francisco Criminal Justice System.

- Objective:**
- Use county-specific findings on racial and ethnic disparities to inform decision-making.
 - Convene justice system partners to review findings and collaborate on potential ways to address racial and ethnic disparities in San Francisco.
 - Have 100% of probation department staff participate in training on recognizing and understanding individual differences.

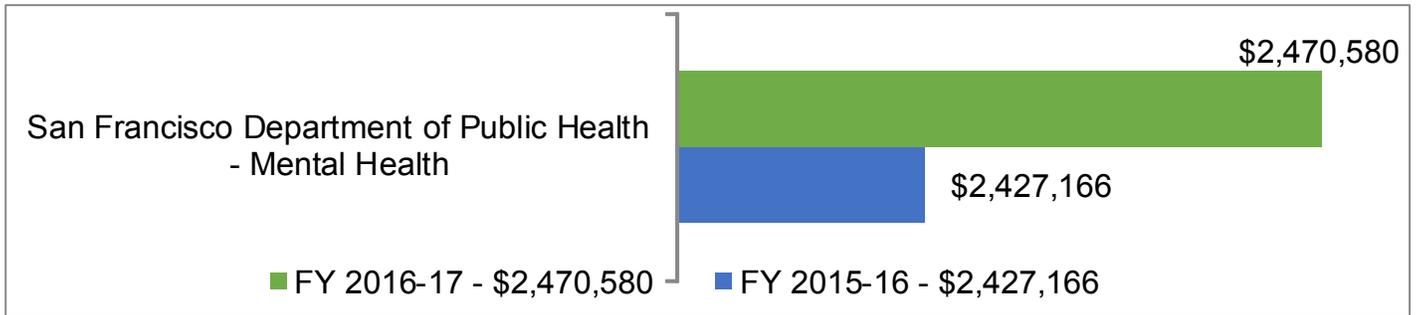
- Measure:**
- A report on the state of racial and ethnic disparities in the San Francisco criminal justice system.
 - Identification of a formal subcommittee or working group comprised of justice system partners who will meet to discuss racial and ethnic disparities.
 - Number of probation department staff who complete training on leadership and diversity.

Progress: In FY 15/16, the San Francisco Reentry Council commissioned a report on the state of racial and ethnic disparities in San Francisco. The W. Haywood Burns Institute delivered a report in June 2015. The Reentry Council, which includes justice system partners in San Francisco, discussed the findings of this report and identified next steps for addressing racial and ethnic disparities in San Francisco. Next steps included: conduct interviews with justice system partners and stakeholders to discuss report findings; summarize interview findings and proposed solutions; develop plans for conducting agency-specific analyses on racial and ethnic characteristics to understand the extent to which disparities exist at each decision point in the criminal justice system; continue to use the Reentry Council as a mechanism for convening justice system partners to discuss this topic. In addition, 93 probation department staff (approximately 2/3) have completed training on leadership and diversity.

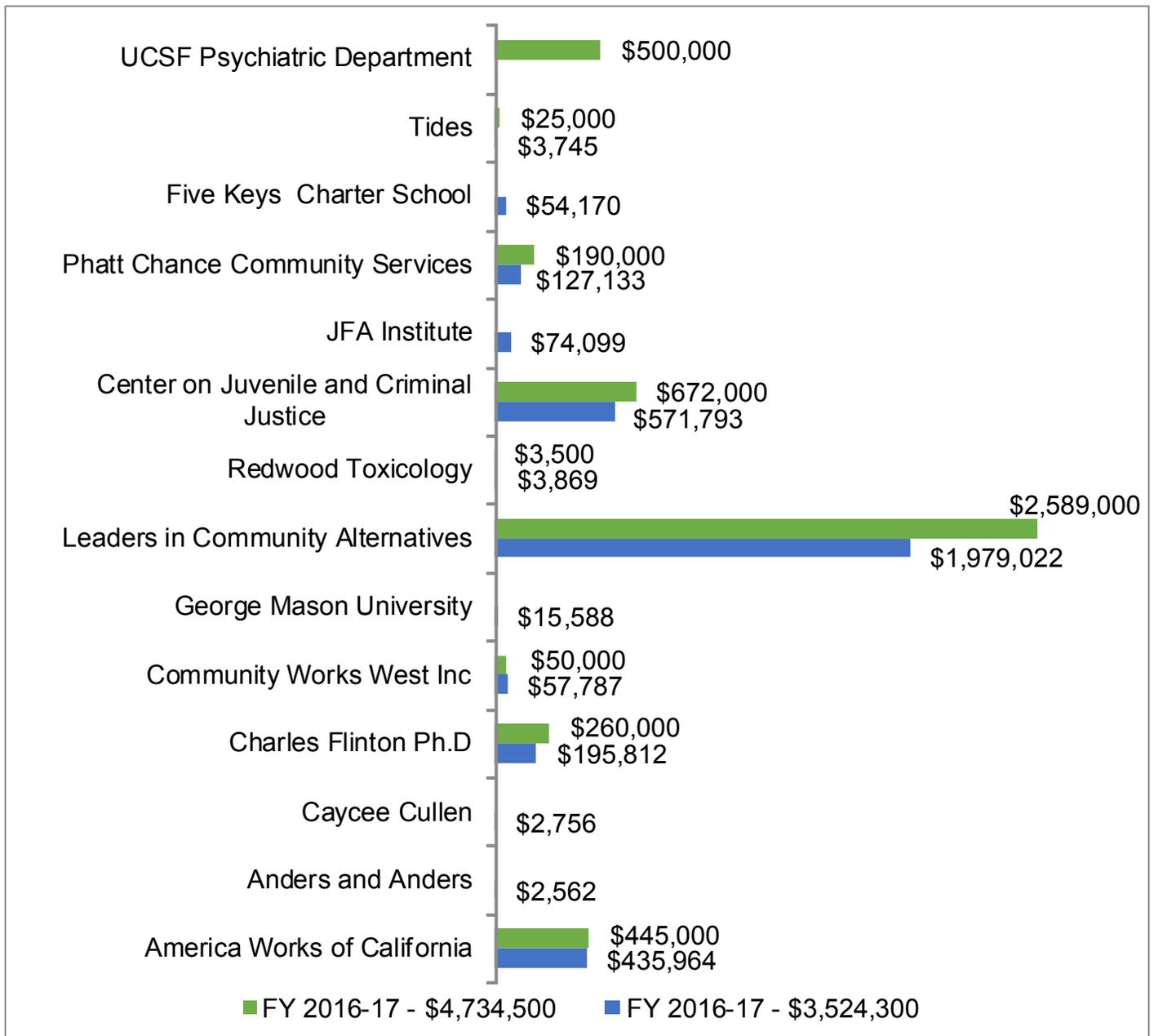
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The Adult Probation Department evaluates programs and services in a variety of ways: Monthly client referrals and engagement/utilization reporting as well as quarterly and annual program reporting. The Department has been working with the Public Policy Institute of California (PPIC) on a multi-county recidivism reduction evaluation.

Does the county consider evaluation results when funding programs and/or services?

Yes. The Adult Probation Department, like other agencies in the City and County of San Francisco, conducts a competitive bid process to identify organizations that can integrate research-driven best practices into service design and delivery. Once organizations are selected through the competitive bid process, the Department uses monthly, quarterly, and annual report submissions in its consideration of continued funding. The agreement with the PPIC will also help the Department better understand local best practices for recidivism reduction and will integrate report information into future funding decisions.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

The Adult Probation Department work ordered \$2.4 million of AB 109 funds to the Department of Public Health (DPH) for behavioral health services and stabilization housing. The funds helped launch a Behavioral Health Access Center (BHAC) for APD clients. BHAC services include behavioral health intake, assessment, care coordination of inpatient and outpatient substance dependency services, and mental health services. Funds are also used for clean and sober stabilization housing. During FY 16/17, the BHAC will be relocated in APD's Community Assessment & Services Center (CASC) in order to provide more directed and immediate assistance to our clients.

The Adult Probation Department funds an intensive case management program for clients under probation supervision who have complex mental health challenges, but who may not meet the medical necessity required to access the local public health system of care. This program's services include intensive case management and the use of peer advocates, who help clients navigate many layers of barrier removal.

The Adult Probation Department also funds substance dependency education services at the CASC and works with the CASC's lead services provider to ensure space is available for anonymous groups as well.

What challenges does your county face in meeting these programming and service needs?

San Francisco continues to struggle with ample inpatient treatment capacity and detoxification beds.

Most clients under SF Adult Probation Department supervision have multiple contacts with the criminal justice system over long periods of time and they face a complex array of behavioral health needs. Costs associated with high-impact behavioral health programs are high as they require:

- hiring expert intensive case management and peer navigator staff;
- integration of medical experts (psychiatrists) who can assist in diagnosis and medication management;
- barrier removal funds;
- detoxification beds;
- inpatient services; and
- continuing services even once a person's probation supervision expires.

Locally, statewide, and nationally, there must be recognition of the needs for a long-term continuation of care, and that high-quality community-based behavioral health services come at a premium.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Increased focus on behavioral health interventions, including moving the BHAC into the CASC.
- Emphasis on victim restitution.
- Continued efforts to integrate pro-social recreational and skills building activities into our service design.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Implementation of a statewide recidivism monitoring process whereby counties can easily access statewide arrest and conviction data to determine recidivism rates of our clients outside of our own counties.

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Community Corrections Partnership Membership
(October 21, 2016)

Stephanie L. James
Chief Probation Officer

Helen Ellis
Presiding judge or designee

Carlos Villapudua
County supervisor or chief administrative officer or designee

Tori Verber-Salazar
District Attorney

Miriam Lyell
Public Defender

Steve Moore
Sheriff

Mike Borges
Chief of Police

Greg Diederich
Department of Social Services

John Solis
Department of Employment

Jim Garrett
Department of Mental Health and Alcohol and Substance Abuse Programs

James Mousalimas
Office of Education

Geneva Haynes
Community-based organization

Gabriela Jaurequi
Victims' interests

The CCP meets bi-weekly

San Joaquin County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce the Recidivism Rate of AB109 Clients in San Joaquin County.

- Objective:**
- Evaluate AB109 clients at the 1-year, 2-year, and 3-year time frames.
 - Evaluate various programs and strategies funded by the CCP for effectiveness at reducing recidivism.

- Measure:**
- Rate of Technical Violations.
 - Rate of Arrests.
 - Rate of Convictions.

Progress: The 2016 Annual Report: An Examination of AB109 Recidivism in San Joaquin County in Year 4 evaluates recidivism rates for Post-Release Community Supervision (PRCS) and Mandatory Supervision (MS) clients at the 1-year, 2-year, and 3-year timeframes from the start of supervision. Findings indicate that rates of arrests and convictions have continued to decrease for both PRCS and MS clients (see below table).

	Arrests	Convictions
One Year Recidivism Check		
Clients released 10/1/2011 to 9/30/2012	44.1%	26.7%
Clients released 10/1/2012 to 9/30/2013	44.4%	24.3%
Clients released 10/1/2013 to 9/30/2014	42.7%	23.2%
Two Year Recidivism Check		
Clients released 10/1/2011 to 9/30/2012	62.5%	46.1%
Clients released 10/1/2012 to 9/30/2013	57.9%	42.0%
Three Year Recidivism Check		
Clients released 10/1/2011 to 9/30/2012	69.4%	55%

San Joaquin County finally reached its first full three-year period to establish baseline recidivism rates. The official recidivism measure (using the Board of State and Community Corrections definition) was 55% (conviction of a

Progress Continued:

new crime for an arrest occurring within 3-years from the start of supervision). This is critical as it will show our progress moving forward. Lastly, for the most recent 1-year period (10/1/2013 to 9/30/2014), see the below table for information regarding conviction rates for various programs and strategies funded through the CCP.

Program/Strategy (number of clients)	Percentage of Program Participants with a Conviction
Collaborative Court Program	
Post Release Supervision Court (91)	13.6%
Monitoring Court (41)	26.8%
Parole Re-Entry Court (93)	31.2%
Mandatory Supervision Court (34) <i>90 day period</i>	8.8%
Community Based Organization	
Community Partnership for Families (41)	26.8%
El Concilio (56)	19.6%
Fathers & Families of San Joaquin (74)	10.8%
Mary Magdalene Community Services (40)	25.0%
Service/Program Referral	
Behavioral Health Services (51)	25.5%
Human Services Agency (HSA) Homeless (43)	16.3%
HSA (General Assistance approved) (62)	17.7%
HSA (Cal-Fresh) (23)	8.7%
WorkNet (one workshop) (16)	25.0%
Supervision Unit	
Day Reporting Center (150)	28.7%
High Risk Unit (622)	22.3%
Violent Crimes Unit (99)	13.1%

Goal: Increase the Success of the Pre-Trial Assessment and Monitoring Program in San Joaquin County.

- Objective:**
- Increase the success of pre-trial defendants appearing for all scheduled court appearances.
 - Decrease the number of pre-trial defendants committing a new offense while going through the court process.
 - Increase the percentage of time the judge follows the detain/release recommendation from Pre-Trial Services.

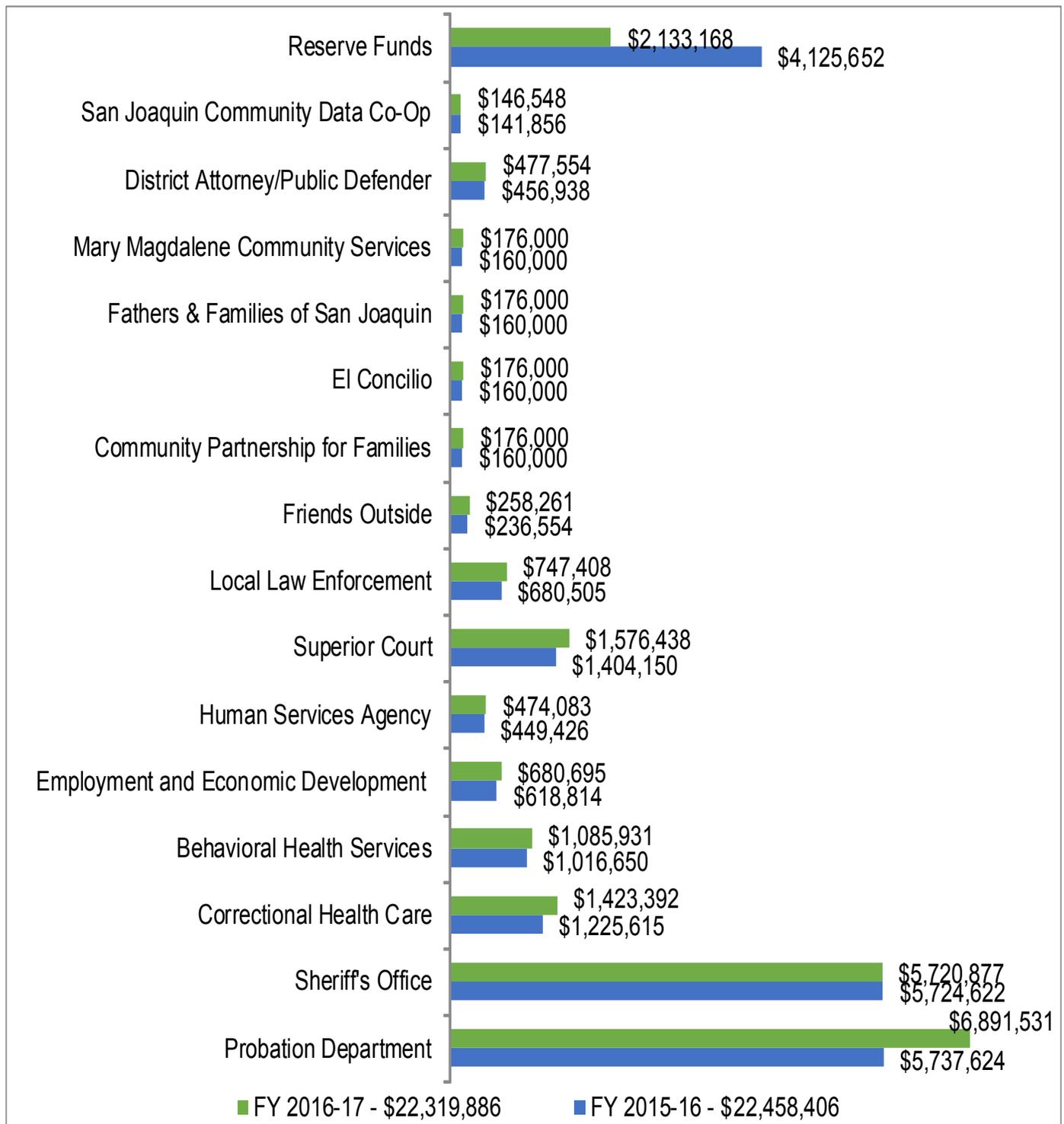
- Measure:**
- Percentage of defendants attending all scheduled court appearances.
 - Percentage of defendants who do not commit a new offense while going through the court process.
 - Percentage of defendants who do not receive a court remand while going through the court process.
 - Percentage of time the judge follows the pre-trial recommendation.

Progress: San Joaquin County has completed a comprehensive annual evaluation report since implementing the Pretrial Assessment and Monitoring Program in October 2014. See the below table for comparisons between Year 1 and Year 2 for all clients of the Pretrial Monitoring Unit:

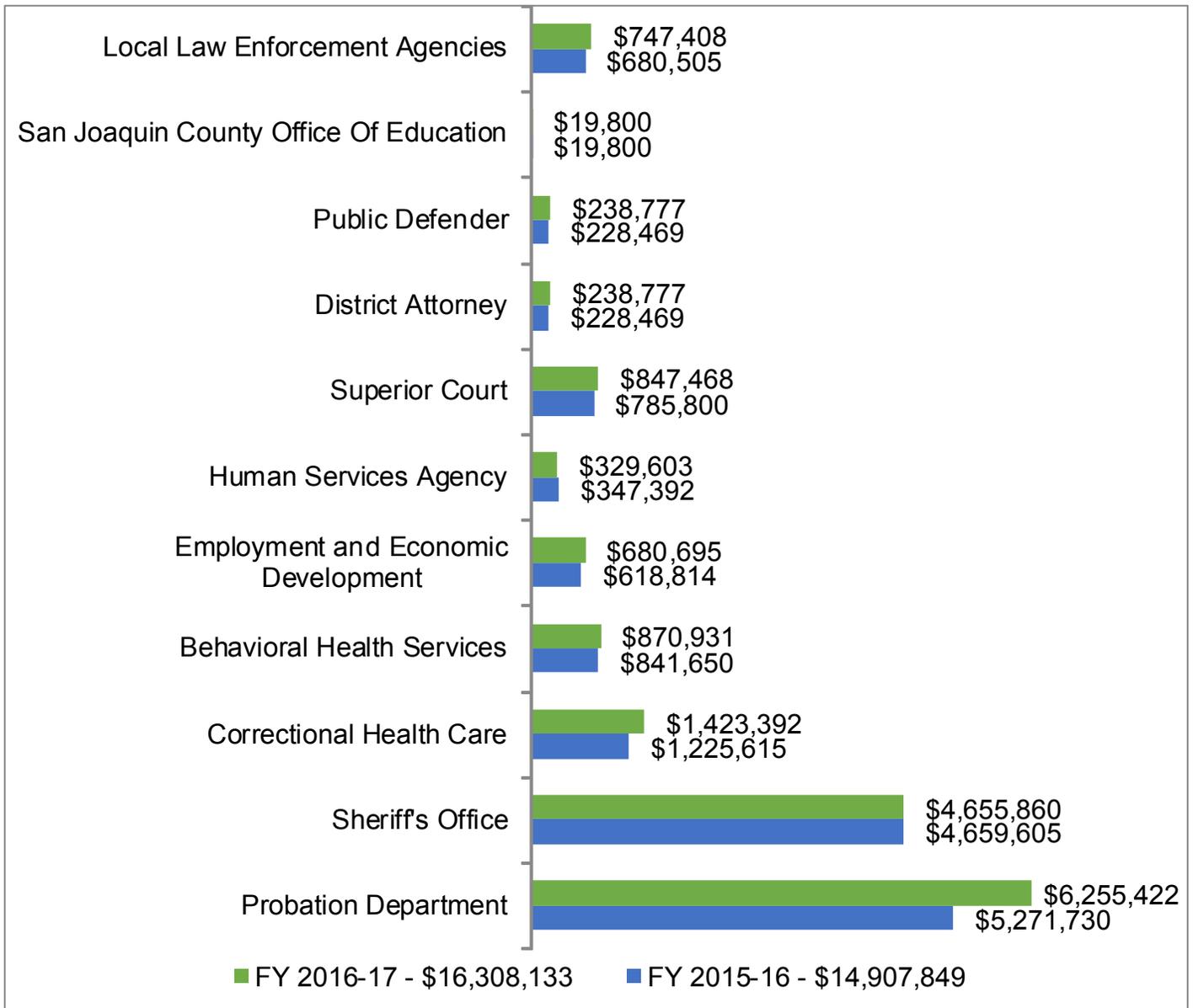
	Year 1 (1,024)	Year 2 (855)
Clients who made all scheduled court appearances	90.7%	92.7%
No arrests during pretrial stage	97.9%	98.2%
Did not have a court remand during pretrial stage	96.6%	98%
Judge followed recommendation	73.6%	68.2%

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

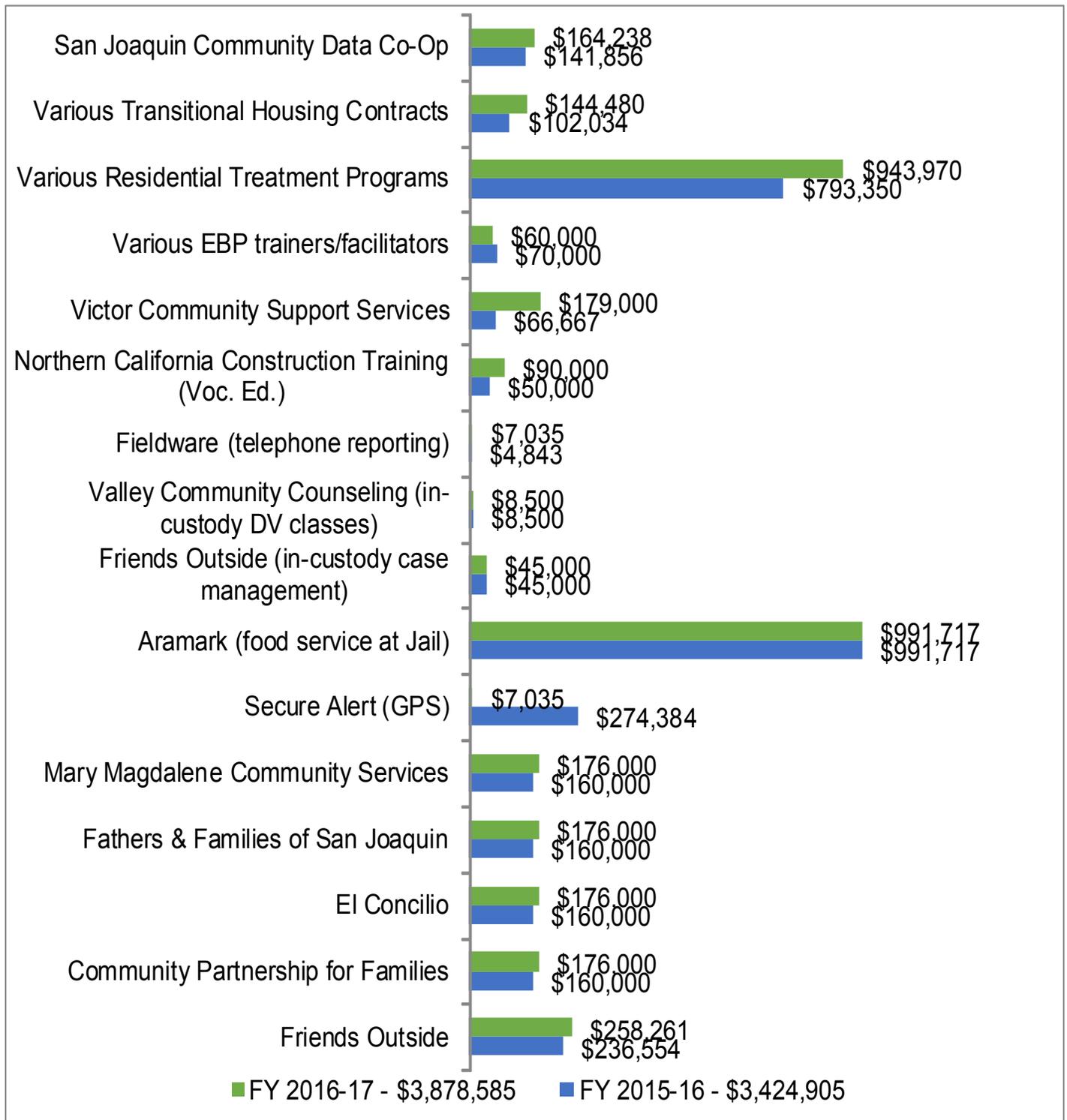
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CCP contracts with the San Joaquin County Data Co-Op to conduct a variety of evaluation studies. A monthly data dashboard is presented to the CCP on a monthly basis showing AB109 impacts and an annual evaluation report is completed. In addition, a monthly Pretrial Dashboard, a quarterly Pretrial Outcomes Report, and an Annual Pretrial Outcomes Report are completed. Lastly, evaluation studies are completed on the dosage of evidence based programming received by AB109 clients and the effects increased dosage hours has on reducing recidivism.

Does the county consider evaluation results when funding programs and/or services?

Yes. The CCP reviews the Evaluation Report as it is determining its annual on-going budget for the following year. Additionally, success of programs and strategies is considered when approving one-time requests for funding.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61% to 80%

The San Joaquin County Probation Department follows the eight Principles of Effective Interventions in providing pre-trial and supervision services. Our CCP Plan incorporates these principles not just from the work of the Probation Department but through our partner agencies. These principles include using a validated risk and need assessment, using motivational interviewing and Effective Practices in Community Supervision, developing case plans that target interventions to the top three criminogenic needs, using a Sanctions Matrix for alternatives to detention, increasing positive reinforcement through a Rewards Matrix, engaging on-going support in natural communities through the work of the community based organizations, providing a range of cognitive behavioral interventions that are provided by probation officers, behavioral health services staff, and community based organizations, as well as being committed to evaluation efforts to ensure our programs and strategies are having the intended results.

In addition to using Motivational Interviewing and Effective Practices in Community Supervision, we offer a range of cognitive behavioral interventions to our clients, which include Thinking for a Change, Common Sense Parenting, Women Moving On, Aggression Replacement Training, Cognitive Behavioral Interventions – Substance Abuse, Matrix and Seeking Safety. University of Cincinnati Corrections Institute (UCCI) also broke up some of the components in Thinking for a Change and Aggression Replacement Training so there are more entry points. These groups are called Orientation, Foundations, Anger Control Training, Social Skills, Problem Solving, and Advanced Practice.

We would like to better understand your 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?

We can access many different types of substance abuse services in our county ranging from private providers to county-operated programs. We use four different residential treatment programs for those suffering from substance addictions: Recovery House, which is a county program, New Directions, Circle of Friends and Salvation Army.

In our county, we use the following providers for outpatient treatment for substance addictions: Chemical Dependency Counseling Center, which is a county program, and Service First, Valley Community Counseling and Pacific Center for Addiction Services.

For mental health services in our county, we have been able to team up with San Joaquin County Behavioral Health Services for the placement of a Mental Health Clinician in each of our Court programs. The clinician is able to place an individual needing assistance on a fast track to much needed mental health services. The clinician is also able to notify the court of missed appointments or any issues with medication compliance. We are also able to contract with Holt Counseling, who provides various counseling services such as domestic violence, family issues, victims of sexual assaults and post-traumatic stress.

We have a number of ancillary services used as well. For example, we use the Gleason House to help cover the cost of client's prescription medications; Community Medical Center (Channel Medical) for those needing free and low cost medical attention; St. Mary's Dining Room for assistance with meals, dental needs and identification vouchers; the Gospel Center Rescue Mission and the Stockton Shelter for the Homeless as emergency shelters; the Women's Center for no cost counseling for victims of domestic violence and sexual assault; the Community Center for the Blind and Visually Impaired for assistance with glasses; and, Fathers & Families of San Joaquin, Friends Outside, and Mary Magdalene Community Services to assist clients with supportive and transitional services.

Behavioral Health Services staff are co-located in the Probation Department's Assessment Center and the Mobile Crisis Team is located in the Probation Department's facility.

What challenges does your county face in meeting these programming and service needs?

Even with these resources, we are still faced with serious challenges to help our clients successfully reintegrate. These challenges are:

1. Our county lacks social and/or medical detox facilities.
2. We currently only have two programs to assist with job training, who also provide employment opportunities: WorkNet and Goodwill.
3. There is a lack of affordable long-term housing.
4. Many times, clients are on a waiting list for our County's residential treatment programs.
5. Behavioral Health Services has been affected by a statewide shortage of Masters-level (LCSW, LMFT, LPCC) clinicians, as well as the nationwide shortage of psychiatrists, leading to potential services delays.
6. Uncertainty of continued Medi-Cal coverage for childless adults under the Affordable Care Acts Medicaid Expansion.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The process we created for the compliance monitoring of community-based organizations has helped to ensure accountability, consistency, and transparency to make sure there is fiscal responsibility. This comprehensive process is completed once a year with a report going to the Executive Committee. The process includes a self-monitoring report, a site visit, a semi-annual review, a final summary evaluation, a follow-up/assistance report, a corrective action plan, and a corrective action plan progress review.

Additionally, we have created guidelines and forms for agencies requesting funding from the CCP. In addition, to the annual funding process, it has been created for Budget Modifications, One-Time Requests, and Program Enhancements.

We would be willing to share any of this information with other counties.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

With the assistance of the University of Cincinnati Corrections Institute (UCCI), the Day Reporting Center was re-designed in January 2015. The goal of the redesign was multi-fold: to increase client participation, increase the dosage of evidence based programming and reduce the wait time between entry points for closed groups. The program consists of three phases and aftercare. During Phase I, clients report 5 days a week and focus on orientation, assessment and treatment planning. Phase II requires clients to report four days per week, complete the Foundations class (which is a component of Thinking for a Change created by UCCI), 10 Social Skills groups and two cycles of Problem Solving groups. In Phase III, clients are required to report three days a week. During this phase, clients will complete a treatment series based on their top criminogenic needs: Option 1 – Cognitive Behavioral Interventions for Substance Abuse (28 classes); Option 2 – ACT, Social Skills 2, and 1 series of Problem Solving (23 classes); or Option 3 – Social Skills 2, Social Skills 3, and 1 series of Problem Solving (23 classes). To track dosage hours, we have created a passport, that also serves as a visible update for program completion. In Phase III, clients are also eligible to participate in a Vocational Education Program ran by Northern California Construction and Training (NCCT) in partnership with the San Joaquin County Fairgrounds. During the first four months of the NCCT program, participants completed the following classes: Safety, Footings and Foundations, Framing, Blueprint Reading and Construction Math.

In the first year of the Day Reporting Center Redesign, there were 165 clients that started the program. In looking at 120-day study period, it was statistically significant that as evidence programming dosage hours increased, there were decreases in violations of probation, arrests, and convictions.

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Community Corrections Partnership Membership
(October 21, 2016)

James E. Salio
Chief Probation Officer

Michael Powell
Presiding judge or designee

Geoff O'Quest
County supervisor or chief administrative officer or designee

Dan Dow
District Attorney

Patricia Ashbaugh
Public Defender

Ian Parkinson
Sheriff

Robert Burton
Chief of Police

Lee Collins
Department of Social Services

Vacant
Department of Employment

Anne Robin
Department of Mental Health

Star Graber
Alcohol and Substance Abuse Programs

Vacant
Office of Education

Elizabeth Steinberg
Community-based organization

Diana McPartlan
Victims' interests

The CCP meets monthly

San Luis Obispo County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Prevent new law violation convictions among Post Release and Mandatory Supervision offenders.

Objective: The county declined to respond to this question.

Measure:

- Percentage of PRCS and Mandatory Supervision offenders with current risk and needs assessment.

Progress: Between March 2016 and June 2016, the percentage of PRCS and Mandatory Supervision offenders with a current risk and needs assessment was 94%. The assessment tool results are used to assign the level of supervision and to plan offender treatment and programming. Increased attention and intensity of probation supervision is allocated to those with a high risk to re-offend.

Goal: Provide evidence based treatment to PRCS and Mandatory Supervision offenders for substance abuse and co-occurring disorder.

Objective:

- 25% of those who were engaged in substance abuse or co-occurring disorder treatment services will have a successful completion status.

Measure:

- Percentage of participants who had a successful completion status.

Progress: In FY 2015-2016, the average stay of treatment was over 180 days and the percentage of participants who successfully completed evidence based treatment was 56%.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Provide programs, services, and activities that target risk factors in accordance with the LSI-R to Mandatory Supervision and PRCS inmates sentenced to more than 120 days of custody time.

Objective:

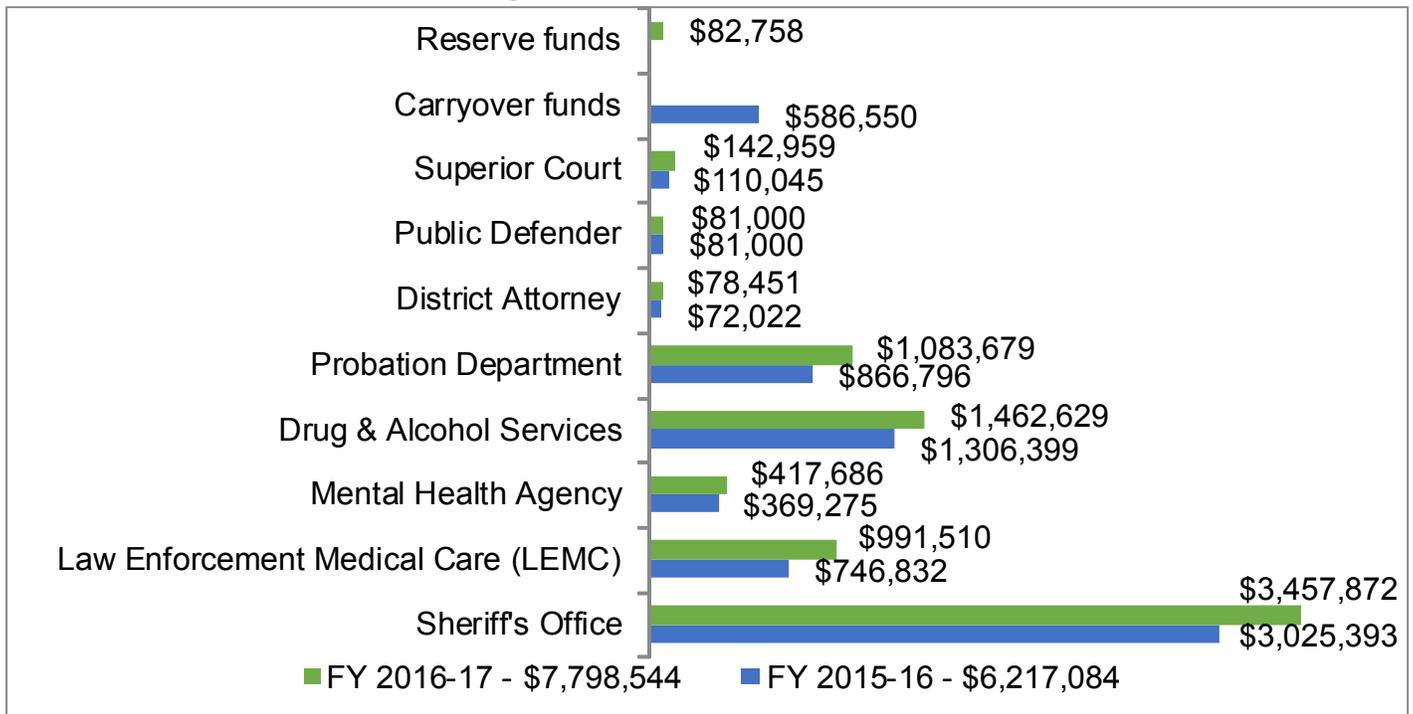
- 80% of Mandatory Supervision and PRCS sentenced inmates, in custody for more than 120 days with a current LSI-R will be identified by Jail Programs staff.
- 65% of Mandatory Supervision and PRCS sentenced inmates, in custody for more than 120 days with a qualifying LSI-R will receive a program, class, or service while in custody.

Measure:

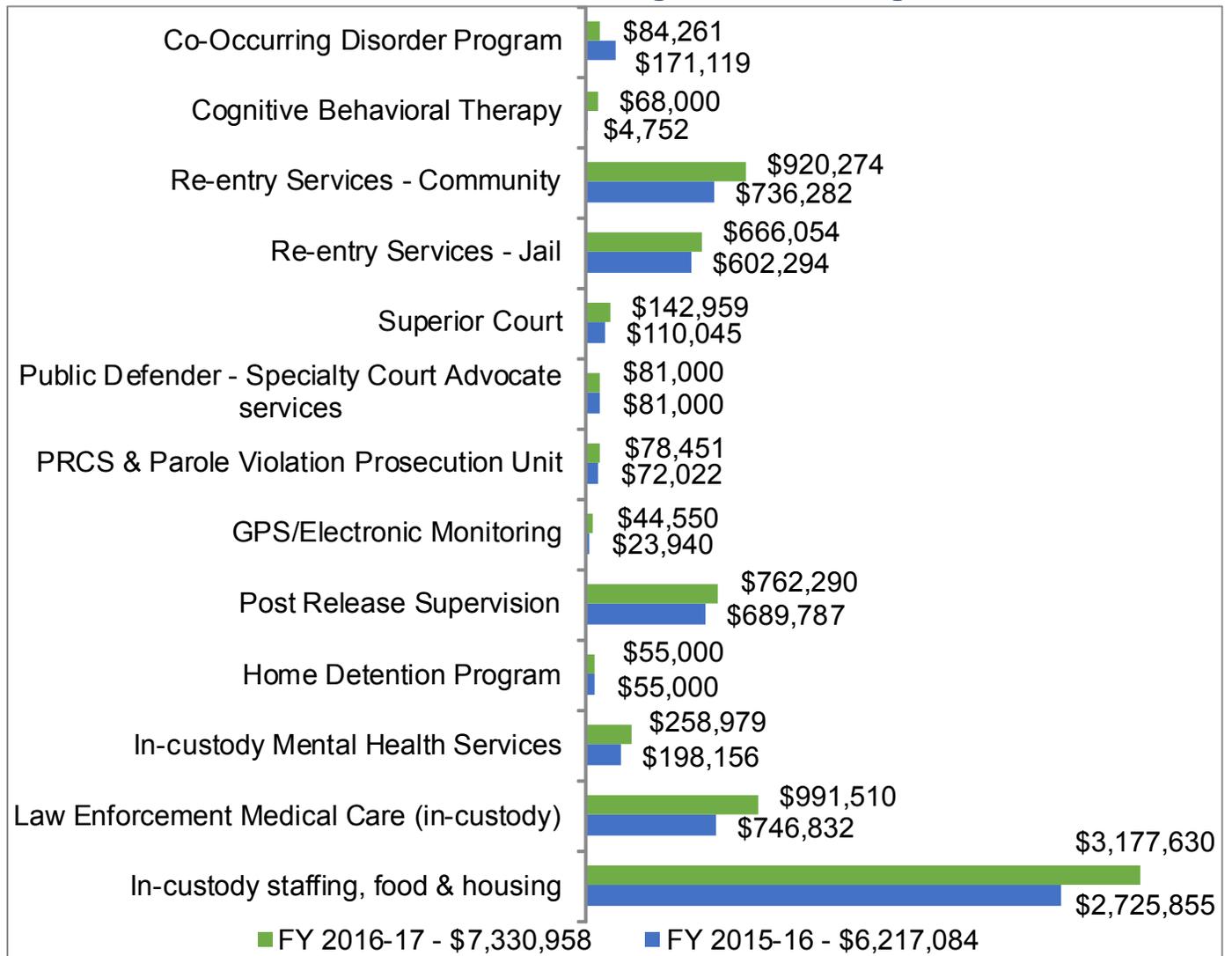
- Percentage of Mandatory Supervision and PRCS inmates sentenced to more than 120 days that have a current LSI-R and receive a program, class, or service.

Progress: New goal for Fiscal Year 2016-17.

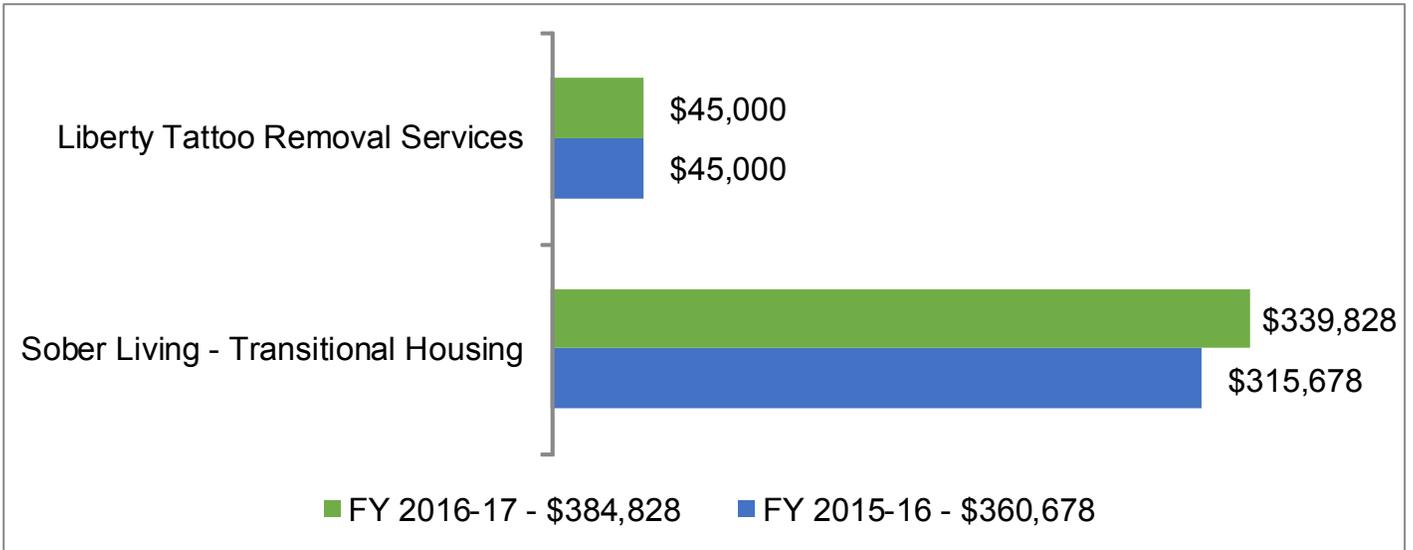
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The Sheriff's Office, Probation Department and Behavioral Health Department are developing an integrated database system in order to measure outcomes of programs and services to ensure alignment with the strategic goals of the Realignment Plan and determine effectiveness in changing offender behavior and reducing recidivism. This project is ongoing.

Does the county consider evaluation results when funding programs and/or services?

Yes. New programs or services requesting realignment funding must include desired results to be achieved in their proposal.

Does the county use BSCC definitions when collecting data? If so, which?

No, BSCC definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21% to 40%

We would like to better understand your 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?

The following are available services to AB 109 offenders:

- Substance abuse treatment (Jail and community).
- Co-occurring disorder treatment (community).
- Cognitive behavioral treatment (Jail and community).
- Tattoo removal services (community).
- Case management services (community and Jail).
- Sober living placement (community).
- Post Release Offender Meeting (wraparound service outreach).
- Welding apprenticeship program (Jail).
- Vocational workshops (Jail).
- Mentoring services (Jail and community).
- Bakery apprenticeship program (Jail).
- Trauma workshops (Jail).
- Employment training workshops (Jail).
- Adult Education Services (Community and Jail).
- Employment Service Coordinator (Probation).

What challenges does your county face in meeting these programming and service needs?

The challenges include addressing housing and employment needs of inmates and offenders, expand jail programs and services to meet the needs of inmates in the higher security housing areas, maintain timely and quality treatment services, and ongoing prioritization of developing an integrated database system and enhancing data collection capacity.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Post Release Offender Meeting (PROM): This meeting is an opportunity for newly released PRCS and Mandatory Supervision offenders to hear about the services available to assist them in their successful reintegration into the community. PROM service providers include the Liberty Tattoo Removal Program, America's Job Center, Department of Rehabilitation, Department of Social Services, Drug and Alcohol Services, County Mental Health and the Probation Department. Offenders also are screened for treatment and case management services and meet with their Probation Officer. Two positive outcomes were identified as the result of the PROM strategy.

1. Behavioral Health screened 170 PRCS and Mandatory Supervision offenders for community-based post release services. Of the 170, 56% (86 offenders) needed a recovery residence in which to stay and all them were placed into appropriate facilities. Additionally, San Luis Obispo County focused on improving the collaborative relationship with recovery residence staff through training and quarterly roundtable meetings. Recovery staff was provided training in crisis intervention and medication assisted treatment.

2. The Probation Department identified a reduction in recidivism among the AB 109 population. In FY 2015-16, the recidivism rate was 34.7% compared to 39.1% in FY 2014-15. Since the implementation of AB 109 in 2011, approximately 43% of Post Release offenders have been successfully discharged.

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Community Corrections Partnership Membership
(October 21, 2016)

John T. Keene
Chief Probation Officer

Rodina Catalano
Presiding judge or designee

Adrienne Tissier
County supervisor or chief administrative officer or designee

Steve Wagstaffe
District Attorney

John Digiacinto
Public Defender

Carlos Bolanos
Sheriff

Susan Manheimer
Chief of Police

Iliana Rodriguez
Department of Social Services

Jennifer Valencia
Department of Employment

Louise Rogers
Department of Mental Health

Stephen Kaplan
Alcohol and Substance Abuse Programs

Anne Campbell
Office of Education

Karen Francone
Community-based organization

Becky Arredondo
Victims' interests

The CCP meets quarterly

San Mateo County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce the public safety impact of the PRCS and Mandatory Supervision offenders to the community by implementing evidence based supervision strategies.

Objective: • 70% of supervisees will successfully complete supervision.

- Measure:**
- Percent of supervisees who successfully complete supervision (normal and early termination).
 - Percent of supervisees who unsuccessfully complete supervision.
 - Percent of supervisees who violate a condition of their supervision by committing a new crime in San Mateo County.

Progress: Between July 2015 and June 2016, 85% of supervisees successfully completed supervision.

Goal: Measure the impact of the realignment population on San Mateo County Adult Correctional Facilities.

Objective: • % of realignment inmates were booked into the San Mateo County Jail for a new crime committed in San Mateo County.

- Measure:**
- % of realignment inmates booked into jail for a new crime in San Mateo County.
 - % of new crimes by categories (i.e. crimes against persons, property, drug/alcohol (possession/sale) of the realignment population booked into jail for a new crime in San Mateo County.

Progress: The annual average percentage of in custody AB 109 population is 15.3%. The top crime categories for the newly sentenced 1170 (h) population are: 26% (drug & alcohol); 65% (property); 3% (crimes against persons) and 6% (other).

Goal: Increase rehabilitative services (including employment, health benefits, mental health and alcohol and drug treatment) received by PRCS and Mandatory Supervision clients post-incarceration.

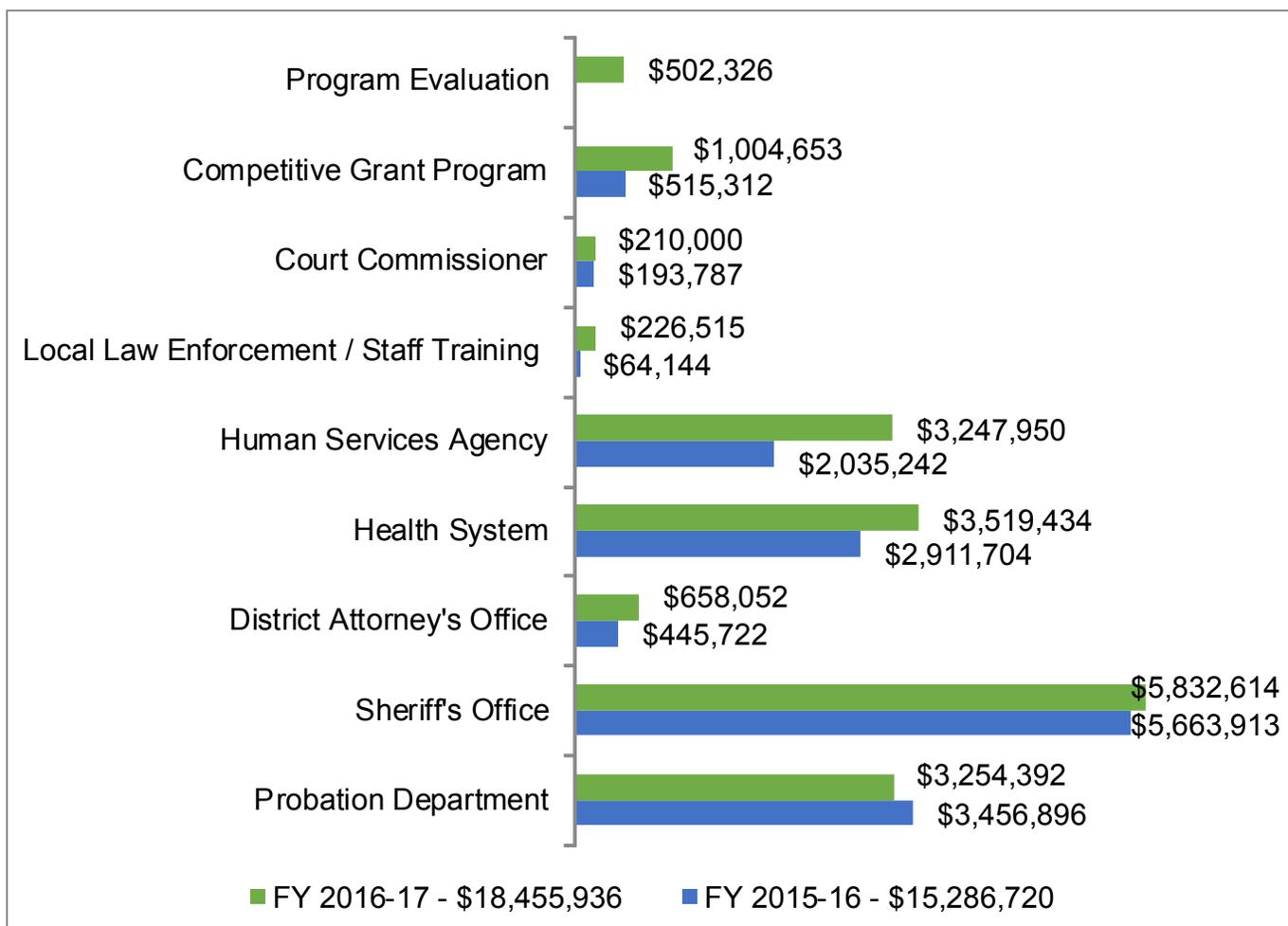
- Objective:**
- 83% of inmates will receive a comprehensive medical visits/assessment through the Public Health Mobile Clinic.
 - 57% of supervisees who participated in the 550Jobs! program will secure employment.

- Measure:**
- Percent of inmates receiving comprehensive medical visits/assessment through the Public Health Mobile Clinic.
 - Percent of supervisees who have participated in the 550Jobs! program who secure employment.
 - Percent of supervisees that entered and completed AOD treatment programs

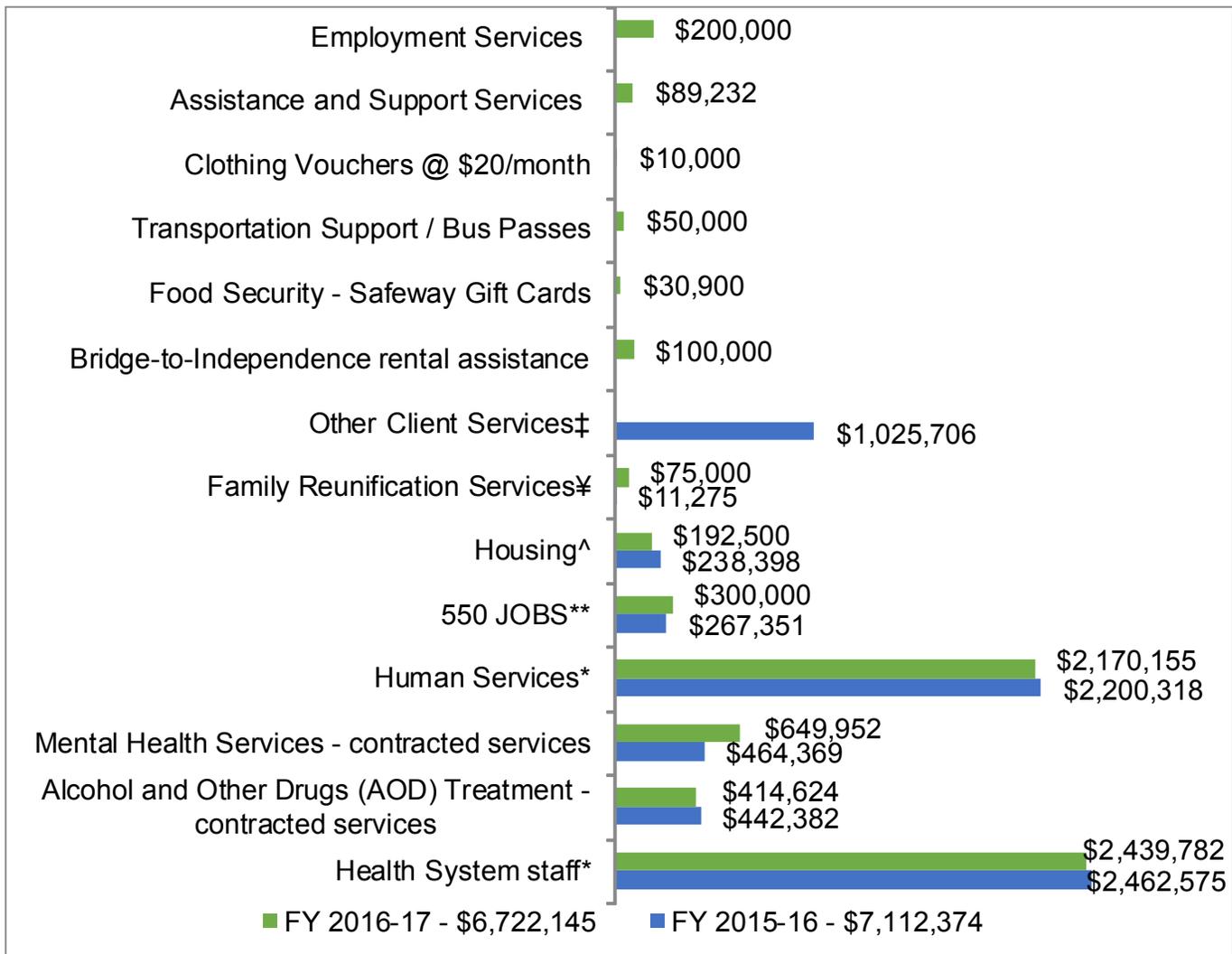
Progress: Between July 2015-June 2016, 54% of supervisees that participated in 550Jobs! secured employment, 98% received comprehensive medical visits through the Public Mobile Health Clinic and 68% satisfactorily completed AOD treatments.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

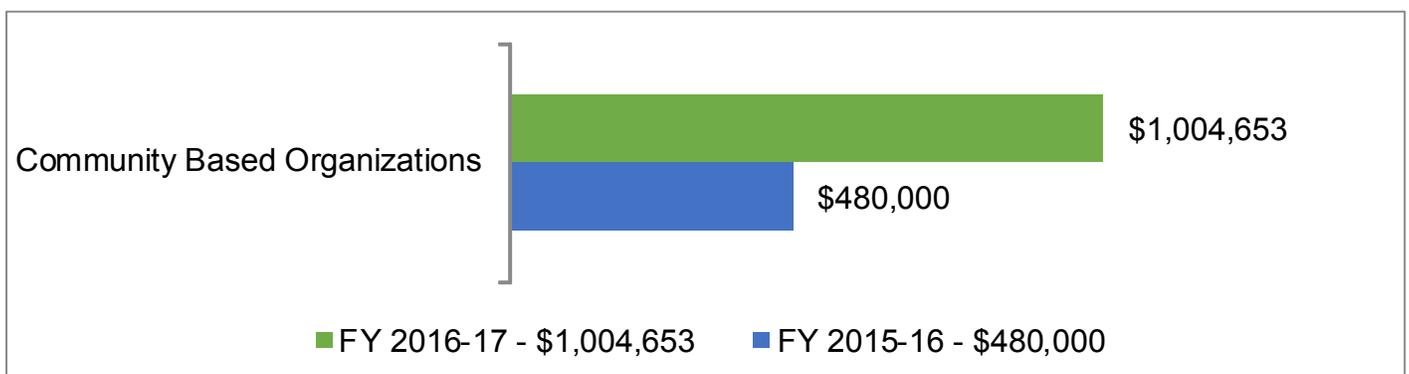


FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



* Includes salaries, benefits and operating costs; ** Vocational Training Program & Job Development Specialist position; ^ Includes Emergency Housing/Hotel Vouchers & Transitional Housing; ¥ Includes Community Mentor & Family Reunification Meetings; ‡ Includes Assistance and support services such as DMV, Licensing, Assessments, Food, clothing, transportation vouchers (bus passes, grocery gift cards) and Social Worker Supervisor, Social Worker, Benefits Analyst and Community Worker

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. San Mateo County includes performance measures and goals in the contracts executed with community based organizations (CBOs). In our Request for Proposal (RFP) documents, the County establishes that all those who apply must be able to meet performance goals and measures as well as maintain files and records for reporting requirements. CBOs awarded CCP grants work closely with County staff to ensure that these goals are met or if there are improvements that are needed to maintain effective service delivery to clients.

Does the county consider evaluation results when funding programs and/or services?

Yes. San Mateo County is committed to ensuring that the programs and services provided to the realignment population truly help clients become productive members of the society and are able to assist them as they reenter their own communities. Monthly multi-disciplinary meetings are held to assess the effectiveness of client centered programs. These are also reported to the CCP on an as-needed basis.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

The San Mateo County Health System's Behavioral Health and Recovery Services Division assists adults, older adults, and families with prevention, early intervention, and treatment of complex mental illness and/or substance abuse conditions. The Public Health Division's mobile clinic receives patients from our reentry population, initiates care, and supports establishment of primary health care relationships throughout our county. San Mateo Medical Center's Medical Emergency and Psychiatric Emergency departments stabilize clients at acute risk. Each of these entities coordinates with a larger network of privately and publicly funded providers. Behavioral Health provides mental health services to individuals eligible for Medi-Cal and/or members of the Health Plan of San Mateo through outpatient clinics and a network of community agencies and independent providers offering outpatient services, residential treatment, rehabilitation, and other services.

Our county created the Service Connect Program as a multi-departmental partnership to meet the reentry needs of our realigned population. We have since expanded eligibility to a larger portion of our reentry population, including a small pilot group of state parolees. The Service Connect Behavioral Health team screens for care needs including medical, mental health, and substance use recovery. Mental health providers at Service Connect assess, diagnose, treat, and offer clinical case management to our clients. This includes psychiatry offered on site and arranged through our county's clinics and provider network. Behavioral Health contracts with Telecare Corporation in a full

service partnership to meet broader needs such as housing, rep payee, and most health care for severely mentally ill adults who require such extensive service. Clients receive peer support from individuals with lived criminal justice, rehabilitation, and recovery experience. Both Human Services Agency and Behavioral Health employ peer mentors to accompany new clients from custody to our program site. These experienced and skilled peers might also guide clients through any of the service contacts they need to complete anywhere within the health system or other service systems. Behavioral Health additionally contracts with Voices of Recovery, a peer organization, for group and individual support to clients on site and in the community.

Behavioral Health and Recovery Services offers a broad range of services for the prevention and treatment of drug and alcohol disorders. We administer funds from federal, state and local sources and provide substance use consultation, assessment, linkages, and referrals to a network of contracted community-based substance use treatment providers throughout the County.

Alcohol and Other Drug treatment services include: detoxification, outpatient, residential, and medication assisted treatment. Services are available to San Mateo County residents on sliding fee scale. No one is turned away for lack of funds. Pregnant and parenting women receive priority admission.

Assessment: The Alcohol and Other Drug Services (AOD) staff provides assessment services to San Mateo County residents involved in court programs, CalWORKs, Child Protective Services, Prop 36, Shelter Network, other county programs. After assessment, clients gain referrals to appropriate substance abuse treatment providers. Clients may also receive referrals to other supportive programs to receive services such as counseling, job training and placement, housing resources, and childcare.

Ancillary Services: Through co-location with Human Services Agency, including Vocational Rehabilitation Services, Service Connect assessors/case managers coordinate closely on site with social workers, benefits analysts, vocational rehabilitation counselors, and job developers. Through referrals, clients may access a much broader range of services in education, parenting, citizenship, etc.

Detoxification Services: These facilities provide 24-hour, supervised, non-medical withdrawal from alcohol and other drugs.

Drug Court : As a specialized program, the San Mateo County Drug Court addresses the needs of nonviolent, drug-dependent defendants. Those eligible for Drug Court may participate in it instead of serving a County Jail sentence. A participant must attend all court reviews, enroll and complete a substance abuse treatment program, submit clean drug tests, and abide by any other directives of Drug Court. The Drug Court utilizes a team case management approach to serve the clients. The "team" is comprised of the judge (team leader), probation officers, OR program, prosecutors, defense attorneys, AOD Services Case Managers/Assessment Specialists and treatment professionals. The team works collaboratively to develop a strategy to address the client's needs in an effort to decrease the likelihood of relapse, re-offense, and re-entry into the criminal justice system.

Outpatient Treatment: Outpatient sites offer flexible service intensity matching the acuity of recovery need. This includes individual, group, vocational, and educational counseling offered during convenient hours, including evenings.

Prevention Services: information and referral, education, and support services are available both to the community at large (including people in the earliest stages of experiencing alcohol and other drug problems) and for family members and significant others of clients enrolled in the managed care system.

Residential Treatment: Residential treatment consists of structured, live-in programs at licensed treatment facilities for men, women, and women with children ages five and under. The treatment goal here is client stabilization. Services include individual, group, vocational, and educational counseling. Our County has dedicated funding to cover 90-day residential treatment courses for our realigned and some reentry populations.

Transitional Housing: This service is geared exclusively for those in outpatient treatment who either need a safe environment or who require temporary housing. It provides a great opportunity for clients to develop a support system while receiving outpatient services. There is also specialized housing for women in reunification. Our county has dedicated funding to cover 60-day transitional housing stays for our realigned and some reentry populations.

Special Programs Addiction Medicine and Therapy Program: This outpatient program offers medication assistance treatment for opioid addiction. The program offers both medically supervised withdrawal and maintenance treatment for persons who are opiate-dependent. Treatment requires rehabilitation counseling and offer clients HIV counseling and testing.

Integrated Medication-Assisted Treatment (IMAT) Program: Launched in 2015, this program works closely with emergency departments and County/Community providers to coordinate outreach, assessment, prescription, and ongoing administration of medication to help adults recover from substance dependence, including alcohol dependence.

Perinatal Services: Intensive individual and group counseling is available for pregnant and parenting women. Opiate-dependent women may receive medically supervised methadone maintenance or detoxification treatment. Programs focus on women's issues, domestic violence, and parenting. Children through age three may join on-site child care.

Assisted Outpatient Treatment: In 2016, Behavioral Health and Recovery Services has implemented an Assisted Outpatient Treatment program, including a full service partnership with Caminar LLC (in accordance with Laura's Law) to address members of our community who present a severe mental illness without a demonstrated ability to participate voluntarily in mental health treatment.

What challenges does your county face in meeting these programming and service needs?

The challenges that San Mateo County faces is the consistent with last year's report. Real estate and housing costs continue to rise in our county, jeopardizing the viability of providers who also grapple with changes in federal and state requirements for reimbursement of their services. Clients unable to stabilize their housing often cannot focus their energy fully on their medical health, mental health, or substance use recovery. Several circumstances connected to homelessness exacerbate medical and mental health symptoms and promote substance use. Clients subject to sex offender registration continue to encounter more challenges than the rest of our population in securing permanent housing.

A countywide workgroup has been convened to look deeper into the populations that are most chronically homeless and what types of targeted services can be offered to transition them into permanent housing, given the current market conditions within the county. We will likely remain on a perpetual learning curve in developing a consistent, thoroughly informed, evidence-based, and culturally sensitive approach to the unique, complex trauma history that nearly every client carries into our contacts. Even a summary assessment typically reveals multifaceted trauma spanning from an early age and layering through community violence, family disruption, incarceration, and many other experiences. To adequately address these trauma experiences alongside client health and basic resource concerns continually challenges our individual service relationships (e.g., managing client trauma reactions to shared living arrangements in order for the client to complete residential treatment). It also challenges our larger program decisions (e.g., how to keep our program site sufficiently structured/safe/secure and also sufficiently welcoming to our clients who associate guards, checkpoints, and access restriction with incarceration).

Balancing our clients' needs as both victims and perpetrators poses several challenges for us. At the same time that we can improve our address of trauma histories, we also find much potential to improve consistency and coordination in addressing antisocial thought, behaviors, attitudes, and tactics. Especially when we share a person's case among several departments, what we assess and how we would address it can look very different to each partner in the collaboration. These varying conceptualizations and approaches may or may not prove compatible. Many times, we can rally around setting a particular limit or promoting a particular support, but doing both in the context of several situations over the course of a week can elude our current capacity for coordination. The successes of our multidisciplinary reentry programs have prompted broader financial and political support and prompted an expansion of scale in client referrals, staffing, and partnerships. We are outgrowing several of the operational models that have served us on a smaller scale. As we evolve our program models, we seek to efficiently serve more people in coordination with more providers while maintaining fidelity to key principles and practices that have worked well for our clients. Any change within one department's operation creates multiple unanticipated impacts for the other departments interfacing to provide services to clients in common. Coordinating our procedures, especially during further program development, challenges us to balance several shifting perspectives.

Utilization management and aftercare require further development, as a growing number of reentry clients proceed through our service course and then seek further supports in the community. Even while we have expanded, we cannot continue serving many of these clients and also welcome new clients at the pace they are referred for service. This situation obliges us to include within our services preparation for clients to usefully engage other services and systems. We also need to remain distinct from those systems in the ways that make our program uniquely conducive to engaging our new clients.

As well, we seek to cultivate within those systems some movement toward compatibility with the ways of working that we have developed, as well as increasing receptivity to the clients that we send them. Many of the clients who come to us have experienced failures in meeting their needs through the service systems to which we would send them. Many logistic, attitudinal, and operational barriers contributing to those failures remain intact in our systems, challenging us to continue building relationships with a broad range of providers. Through those relationships, we can advocate changes to improve service outcomes for our population.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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**Community Corrections
Partnership Membership**

(October 21, 2016)

Guadalupe Rabago
Chief Probation Officer

Darrel Parker
Presiding judge or
designee

Janet Wolf
County supervisor or
chief administrative
officer or designee

Joyce Dudley
District Attorney

Ken Clayman
Public Defender

Bill Brown
Sheriff

Pat Walsh
Chief of Police

Daniel Nielson
Department of Social
Services

Ray McDonald
Department of
Employment

Alice Gleghorn
Department of Mental
Health and Alcohol and
Substance Abuse
Programs

Bill Cirone
Office of Education

Eduardo Cué
Community-based
organization

Idalia Gomez
Victims' interests

The CCP meets
bi-monthly

Santa Barbara County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Enhance public safety by reducing recidivism.

- Objective:**
- Expand the use of best practices for evidence-based sentencing and adjudication that uses offender-specific risk, needs, and responsivity measures.
 - Support professional training to advance system-wide knowledge of evidence-based practices in the criminal

- Measure:**
- The results of evidence-based assessments will be incorporated into sentencing reports and revocation petitions for Realigned offenders.
 - Training related to evidence-based practices and/or interventions will be made available to all Realignment

Progress: Evidence-based risk and needs assessments were incorporated into pre-sentence and pre-plea reports in August 2015. The assessment information has also been included as an attachment in revocation petitions for Post Release Community Supervision (PRCS) offenders.

Goal: Enhance the use of alternative detention (pre and post-sentence) for appropriate offenders.

- Objective:**
- Expand the use of an evidence-based assessment tool for pre-trial and post-sentence jail release decisions.
 - Strive to maximize jail capacity by appropriately identifying offenders who can safely be released and those who should be held in physical custody.

- Measure:**
- Ensure evidence-based risk assessment information is available for at least 90% of inmates in the county jail.
 - Continue efforts to pilot a Pre-Trial Services assessment and provide the results to the Court

Progress: On February 23, 2016, evidence-based risk assessment information was available for 93% of the jail inmates. Efforts to pilot the use of a pre-trial risk assessment tool continued through FY 2015-2016. Stakeholders participated in additional training with the goal of full implementation and submission of the assessment to the Court as early in the judicial process as possible.

Goal: Provide for successful re-entry of offenders back into the community.

- Objective:**
- Provide services and treatment to offenders in partnership with existing community providers.
 - Facilitate access to sober living and transitional housing as well as long-term housing.
 - Strive to support the specialized needs of offenders to improve their successful re-entry into the community.

- Measure:**
- Provide gender specific, trauma informed treatment interventions to Realigned offenders.
 - Increase participation in cognitive behavioral treatment such as Reasoning & Rehabilitation (R&R), Thinking for a Change (T4C), and MRT for Realigned offenders to at least 75%.
 - Provide access to psychiatric services through AB109 Clinic for Post-Sentence Supervision (PSS) offenders.

Progress: Gender specific, trauma informed treatment intervention, specifically Seeking Safety, is available to all Realigned offenders at both Probation Report and Resource Centers (PRRC) and through a community-based provider in the Lompoc area.

From July 1, 2015, through February 1, 2016, 82% of the Realigned offenders under probation supervision were enrolled in or completed a cognitive behavioral therapy (CBT) intervention, such as Reasoning and Rehabilitation (R&R), T4C, and MRT.

Five (5) PSS clients have received psychiatric services at the PRRCs to assist in bridging their care, in addition to serving 86 PRCS offenders between July 1, 2015, and February 1, 2016.

Goal: Coordinate efforts to eliminate duplication, increase efficiencies, and promote best practices.

- Objective:**
- Identify additional resources that address gaps in services and leverage funding collaboratively whenever possible.
 - Focus funding on evidence-based and data driven programming that is matched to offender risk and needs.
 - Partner with local law enforcement for information sharing, compliance checks, and warrant apprehension.
 - Capture and integrate data necessary to measure outcomes.

- Measure:**
- Ensure Quality Assurance (QA) Committee meets on a quarterly basis and strives to include as many criminal justice stakeholders and community partners as possible.
 - Produce an outcome evaluation each year in partnership with UCSB.
 - Conduct process evaluations of the two (2) Substance Abuse Treatment Courts (SATC) to ensure adherence to best practices and to support the efforts of team members in remaining current with latest research related to treatment addicted criminal offenders.

Progress: Between July 1, 2015, and January 31, 2016, the QA Committee expanded participation to include as many criminal justice stakeholders and community partners as possible and met three (3) times, exceeding the anticipated quarterly outcome.

The outcome evaluation is an ongoing partnership with UCSB and an annual report is published each year in order to assess the implementation and ongoing impact of Realignment on Santa Barbara County.

A process evaluation was conducted on the northern region's Mental Health Treatment Court (MHTC) and the southern region's SATC to ensure adherence to best practices and to support the efforts of team members in remaining current with latest research related to treatment addicted criminal offenders.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Enhance the use of alternative detention (pre and post-sentence) for appropriate offenders.

- Objective:**
- Expand the use of an evidence-based assessment tool for pre-trial and post-sentence jail release decisions.
 - Strive to maximize jail capacity by appropriately identifying offenders who can safely be released and those who should be held in physical custody.

- Measure:**
- Strive to ensure that no more than 10% of the total housed jail population are low risk offenders.
 - Continue to ensure evidence-based risk assessment information is available for at least 90% of inmates in the county jail.
 - Ensure that all defendants assigned to Pre-Trial Services are assessed utilizing the Virginia Pretrial Risk Assessment Instrument (VPRAI).
 - Increase the pre-trial release of inmates through the use of the VPRAI

Progress: Progress has been made in the areas associated to this goal. Mid-year analysis will be conducted and presented in future reporting.

Goal: Provide for successful re-entry of offenders back into the community.

- Objective:**
- Provide services and treatment to offenders in partnership with existing community providers.
 - Facilitate access to sober living and transitional housing as well as long-term housing.
 - Strive to support the specialized needs of offenders to improve their successful re-entry into the community.

- Measure:**
- Increase participation in an employment/vocational development program to at least 75% of those unemployed Realigned offenders who are available for supervision.
 - Increase participation in CBT such as R&R, T4C, and MRT for Realigned offenders to at least 80%.
 - Ensure that at least 94% of Realigned offenders have housing through collaborative re-entry process and subsidized housing.
 - Discharge Planning team will process at least 800 referral requests for assistance from inmates in the county jail for discharge planning.
 - Ensure PRCS offenders referred for psychiatric services are seen and clinical assessments and treatment plans are completed within ten days of referral from Probation.

Progress: Progress has been made in the areas associated to this goal. Mid-year analysis will be conducted and presented in future reporting.

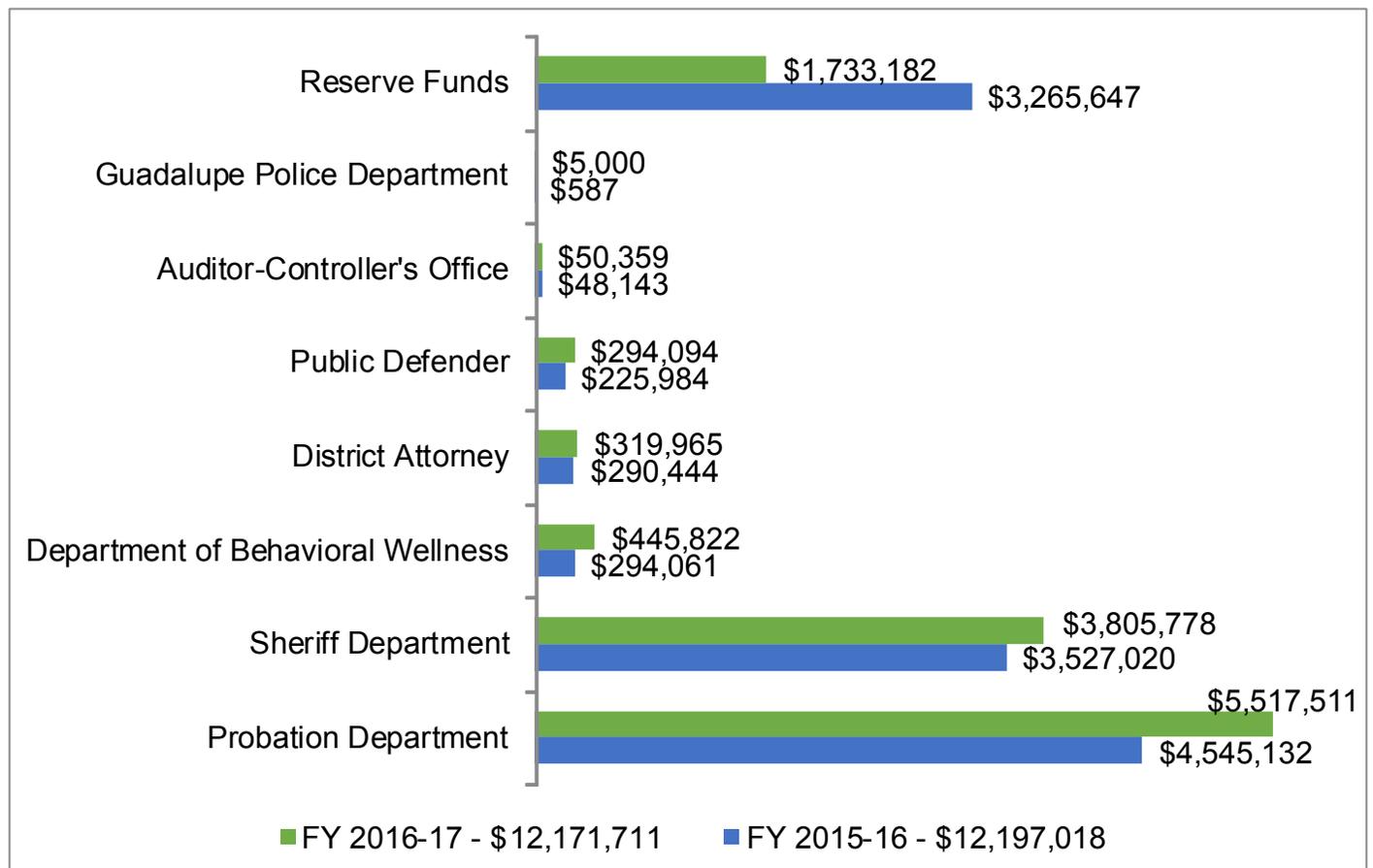
Goal: Coordinate efforts to eliminate duplication, increase efficiencies, and promote best practices.

- Objective:**
- Identify additional resources that address gaps in services and leverage funding collaboratively whenever possible.
 - Focus funding on evidence-based and data driven programming that is matched to offender risk and needs.
 - Partner with local law enforcement for information sharing, compliance checks, and warrant apprehension.
 - Capture and integrate data necessary to measure outcomes.

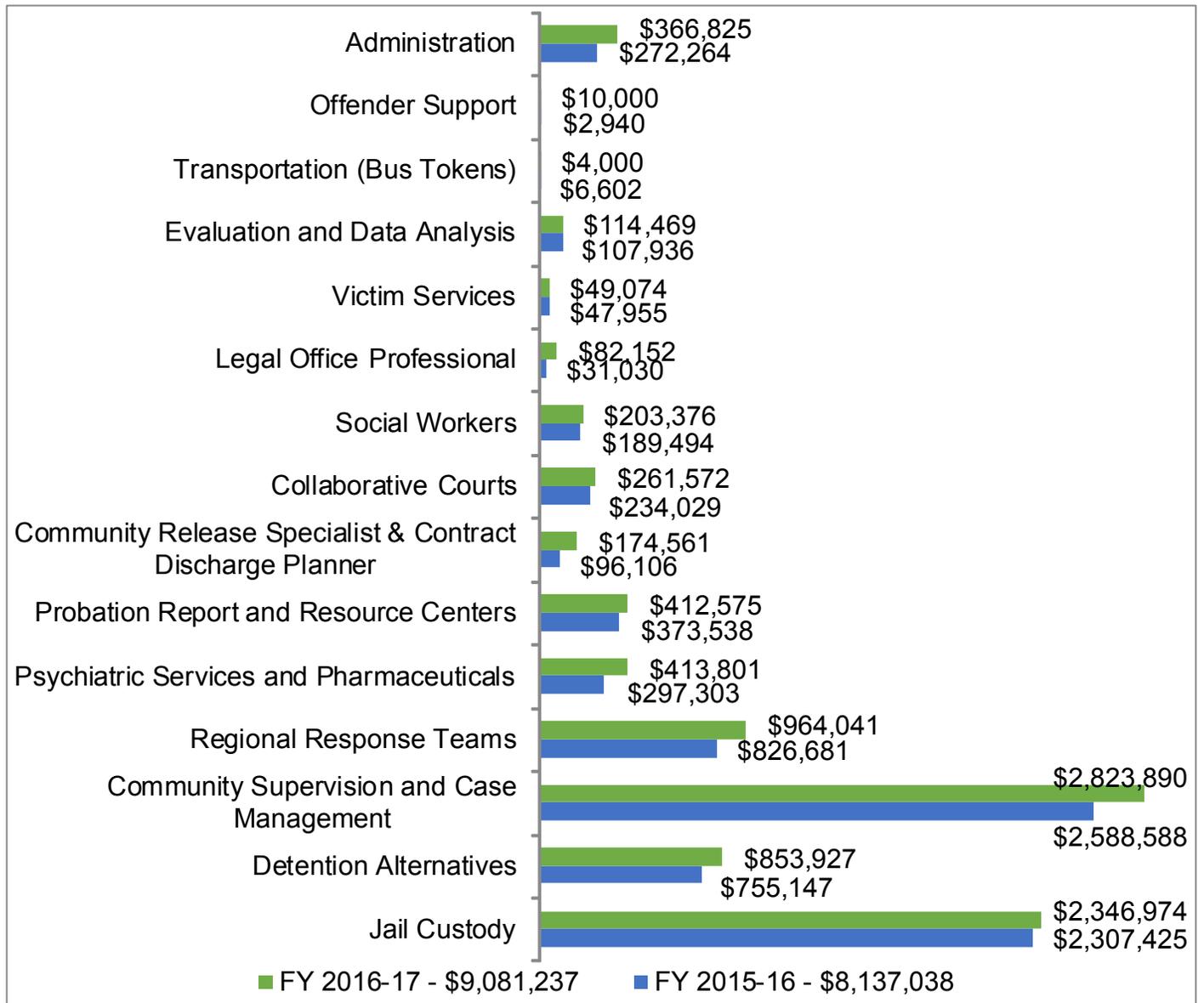
- Measure:**
- Ensure the QA Committee continues to meet on a quarterly basis and strives to include as many criminal justice stakeholders and community partners as possible.
 - Assist treatment programs in implementing self-assessment program fidelity reviews, as overseen by the QA Committee.
 - Conduct a process evaluation of two Collaborative Court programs to ensure adherence to best practices and to support the efforts of team members in remaining current with latest research and continue production of annual Realignment evaluation.
 - In an effort to ensure that delays in providing victim information do not result in unnecessary continuances, the Victim Witness Advocate will make contact with at least 25% of known victims pre-arraignment.

Progress: Progress has been made in the areas associated to this goal. Mid-year analysis will be conducted and presented in future reporting.

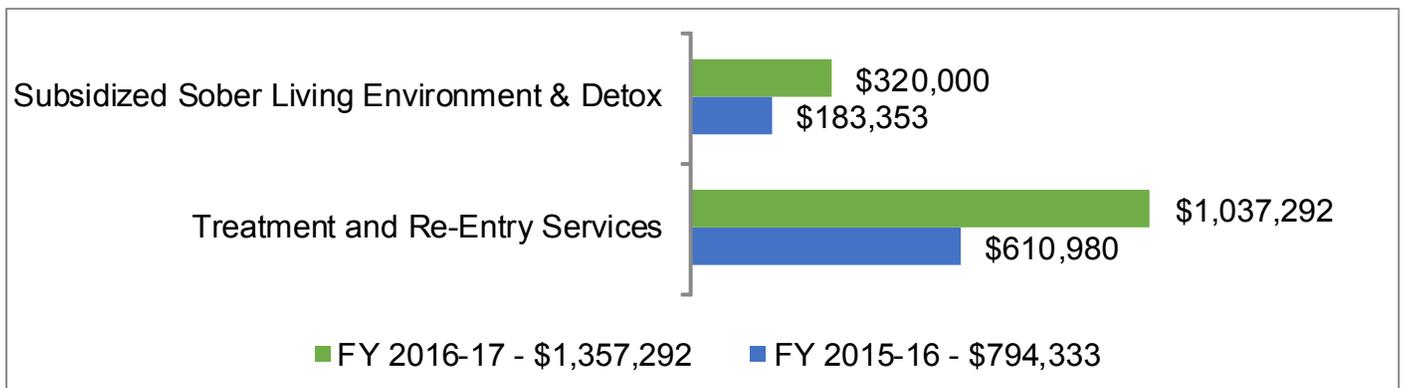
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The Santa Barbara County Probation Department contracts with the University of California, Santa Barbara to assess the implementation and ongoing impact of California's Public Safety Realignment Act for Santa Barbara County. The evaluation reports are presented to the CCP and the Board of Supervisors (BOS) each year. They are also available to the public via the Probation Department's website.

Does the county consider evaluation results when funding programs and/or services?

Yes. The evaluation is utilized by the CCP workgroup to review the systems' impact on criminal offender outcomes and the data is utilized to make adjustments for continuous process improvement. Annually, the evaluation findings are presented to the CCP and the BOS prior to budget planning and discussion. The utilization of the evaluation in this manner allows for the building of capacity through less restrictive options, thereby reducing reliance on incarceration, and identifying ways to improve effectiveness of the criminal justice system.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Conviction, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

- Batterers Intervention Program.
- Sex Offender Treatment.
- Alcohol and Other Drugs (AOD) Treatment Groups.
- Residential Substance Abuse Detoxification (Detox).
- Reasoning and Rehabilitation (R&R).
- Seeking Safety.
- Moral Reconciliation Therapy™ (MRT™).
- Mental Health Screening and Treatment Program.
- Recovery-Oriented System of Care (ROSC) Support Groups.
- Secure Continuous Remote Alcohol Monitoring (SCRAM).
- Education and Employment Assistance.
- Work and Gain Economic Self Sufficiency (WAGE\$\$) - Employment Readiness.
- Thinking for a Change (T4C).
- Cognitive Behavioral Interventions for Employment (CBI-EMP).
- Clean and Sober Housing.
- Shelter Services.

What challenges does your county face in meeting these programming and service needs?

- Staff turnover within County departments and community based services continues to present as a challenge.
- Housing and treatment options for high need mental health and transient clients continue to provide challenges.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- The Criminal Justice Funding Decision Protocol was established to collaboratively review funding opportunities being considered by County agencies. It is an opportunity to ensure new projects are aligned with the CCP's goals and to present cost benefit analysis for consideration.
- An independent consultant conducted a study examining the first five (5) years of CCP/ Realignment funding and programs, and a review of the County's strategies to ensure the Realignment Plan is adequately achieving the goals of the "justice reinvestment" outlined in Penal Code sections 1230.1 and 3450.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Although still a work in progress, the collaboration amongst County stakeholders in the area of discharge planning is a best practice. Through jail based services, re-entry and discharge planning have incorporated the fundamental evidence-based practice of a collaborative structure and joint ownership between County departments and community based organizations (CBO). Discharge planning services include, but are not limited to, residential program screening, coordination and transportation, assistance with entitlements such as Medi-Cal, supplemental and disability social security (SSI and SSDI), and veterans' benefits, referrals/linkage with behavioral health and/or public health, referral to and coordination with Collaborative Courts and aftercare.

Community Corrections Partnership Membership
(October 21, 2016)

Laura Garnette
Chief Probation Officer

Rebecca Fleming
Presiding judge or designee

Miquel Marquez
County supervisor or chief administrative officer or designee

Jeff Rosen
District Attorney

Molly O'Neal
Public Defender

Laurie Smith
Sheriff

Vacant
Chief of Police

Robert Menicocci
Department of Social Services

John Dam
Department of Employment

Toni Tullys
Department of Mental Health

Bruce Copley
Alcohol and Substance Abuse Programs

Jon Gundry
Office of Education

Rose Amador
Community-based organization

Kasey Halcon
Victims' interests

The CCP meets quarterly

Santa Clara County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Increase the number and percentage of formerly incarcerated individuals successfully participating in and completing job training/preparation that will lead to gainful employment.

- Objective:**
- Establish on the job training programs.
 - Create paid peer mentor positions to help formerly incarcerated individuals to navigate the reentry process and service systems.
 - Connect individuals to expungement programs to begin clearing their criminal records.

- Measure:**
- 670 enrollments in job readiness and 161 subsidized employment.
 - Ten peer mentors at the Reentry Resource Center to assist clients to navigate reentry process and services.
 - Approximately 3,110 people contacted the Reentry Expungement Program from 9/16/13 to 6/30/16. 200 discretionary petitions heard in court of which 197 were granted relief. 155 cases for discretionary petitions filed in court.

Progress: Total referrals: 808. 55% goal met for enrollments in job readiness and 124% goal met for subsidized employment. Behavioral Health's Faith Based staff initiated a monthly peer mentor/community worker roundtable discussion to discuss best practices and identify the challenges and successes for client transition and case management support.

Goal: Establish reentry programming in the County's correctional facilities.

- Objective:**
- Develop in custody job readiness programming.
 - Develop family skill building programming.
 - Strengthen family relationships for offenders to help reduce risk of repeat incarceration.

Measure: The county declined to respond to this question.

Progress: Two vendors were selected to provide in-custody job readiness program in-custody. From March 2016 to June 2016, one vendor served 575 unique inmates. Beginning on February 2016 two vendors are providing services weekly to inmates.

Goal: Improve short and long-term affordable housing for formerly incarcerated individuals who are at moderate and high risk of recidivating in Santa Clara County.

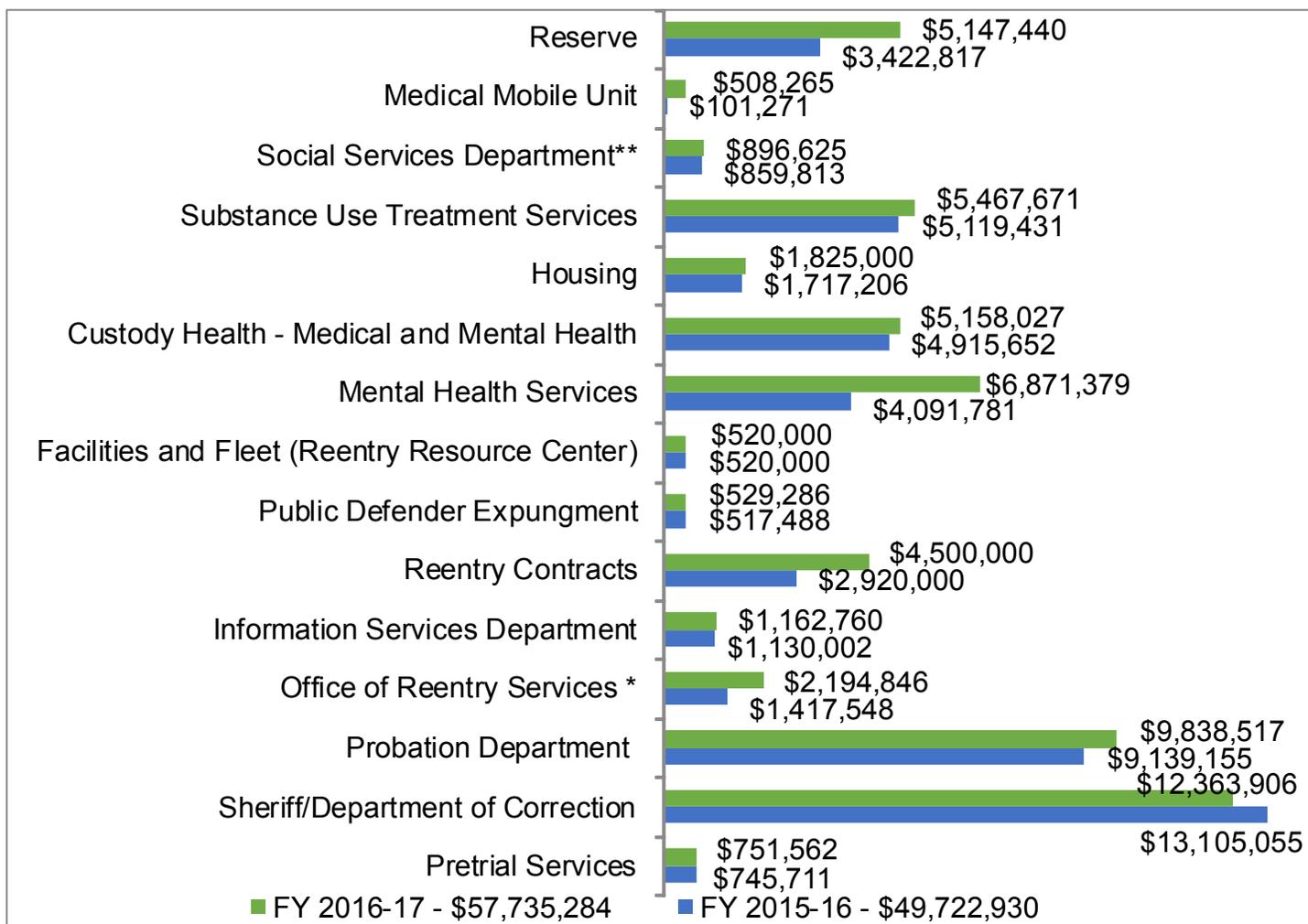
- Objective:**
- Develop pre-release plans that realistically address the housing needs of individuals.
 - Continue to implement housing programs along the entire continuum of housing needs.

Progress: Between July 1, 2015 and April 8, 2016, the Office of Reentry Services received 265 unduplicated transition plans (Department of Correction submitted 146 plans, Custody Health submitted 84 plans, and Probation submitted 35 plans). As of April 8, 2016, 145 of the 265 individuals (54%) connected with the Reentry Resource Center (RRC) for post-release for services.

Housing: AB109 Rental Assistance Program offers six months subsidized rent to AB109 clients with potential one additional six month renewal. Since October 2012 to June 2016, 325 referrals of which 86 individuals (137 clients and family members) were housed. Emergency Assistance Program offers one-time subsidy, back-rent payment, deposits, and motel vouchers, up to \$2,000 for eligible client. Since February 2014 to June 2016, 276 referrals of which 247 received some type of housing service.

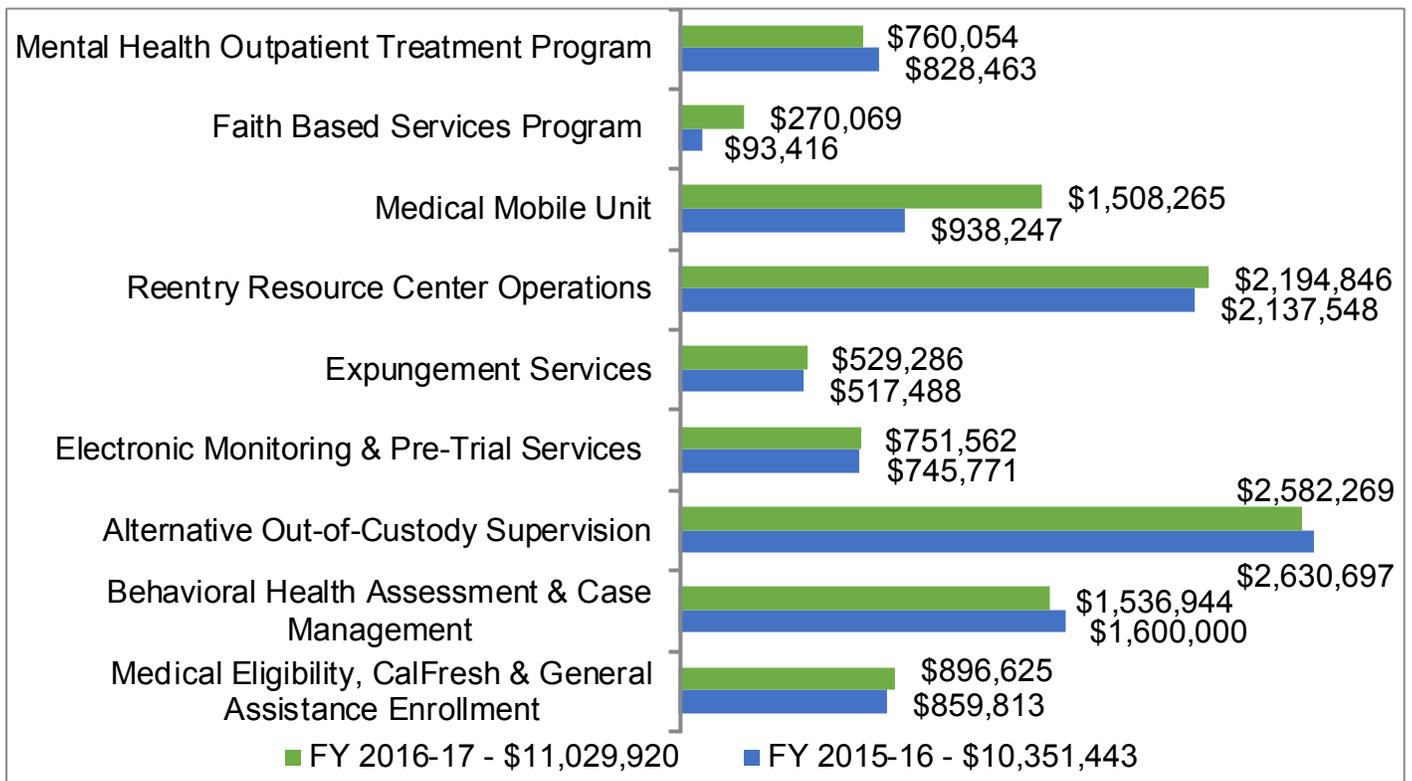
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

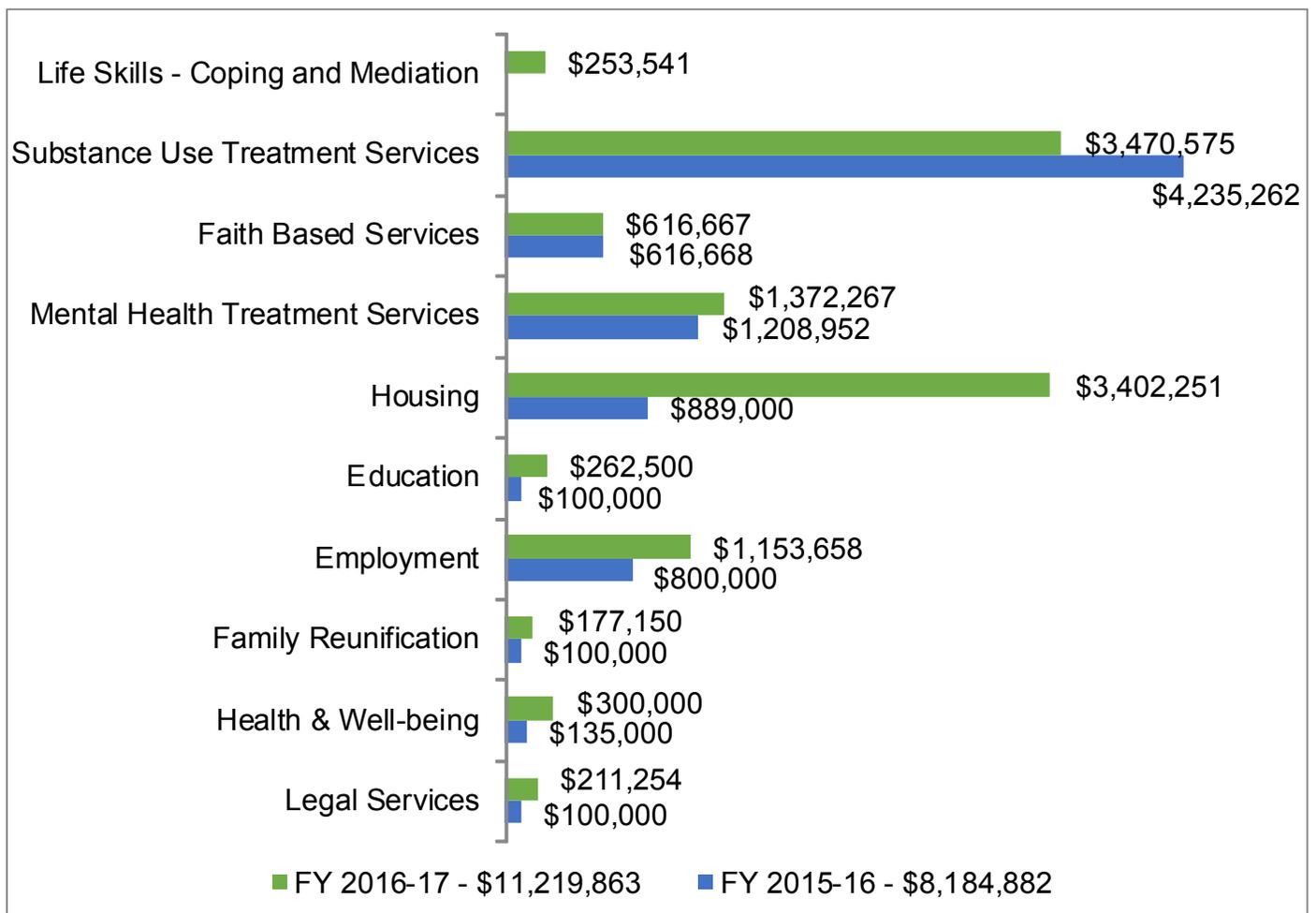


* Includes HR support; ** Social Services Department of Employment and Benefit Services

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Through June 2015, the County had a contract with Resource Development Associates (RDA) to provide a comprehensive Public Safety Realignment (AB109) outcome measurement and process evaluation report. The report entails recidivism rate for AB109 population and impacts on programs and services funded by realignment resources. This process and outcomes evaluation seeks to examine ways in which service provision informs the rates of recidivism among the County's AB109 population. The full evaluation report presents findings including AB109 population characteristics, types of services and programming being accessed, and the impacts of services and programming on recidivism. It also includes an overview of AB109 clients', service providers', and County staff members' perceptions of the reentry system. The full report includes a complete account of process and outcome evaluation findings as well as background information, a detailed description of the methodology used, and further recommendations. Going forward, this comprehensive outcome measurement and evaluation report will be conducted in house. The Probation Department has recently hired a new Director of Outcomes and Measurement who is working with other internal probation staff and staff at the Reentry Resource Center to provide this comprehensive evaluation report for the AB109 population.

Does the county consider evaluation results when funding programs and/or services?

Yes. The County considers evaluation results at many different stages. It is included as part of the RFP when contracting and it is considered in contractor performance and evaluation and when renewing contracts. The Probation Department has an Evidenced Based Program manager who also works on ensuring best practices and fidelity to programs. The Research and Development team also has a focus on measuring performance outcomes and results.

Does the county use BSCC definitions when collecting data? If so, which?

No, BSCC definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

Services for AB109 clients provided by Custody Health Services includes medical and dental care, nursing and mental health services to inmates being retained locally. Custody's Mental Health Services unit provides an array of mental health services to the inmates incarcerated in the Santa Clara County Jail system, inclusive of mental health exams and treatment, crisis evaluations, acute inpatient services, pharmaceutical management, welfare checks, programs and other services.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Community and peer navigators are critical to improve the continuity of care between jail and the community and offers an unparalleled opportunity to foster collaboration between law enforcement agencies, faith based organizations and direct service providers. Community health workers provide case management services, home visits, chronic case management education, medication reconciliation, and make primary care and specialty medical appointments. Peer support workers provide support and navigation to community services for reentry clients by providing peer assistance and mentoring on a one-to-one basis, assist with pre-release support and linkage to community resources. The FY16-17 Recommended Budget adds an additional two community health workers to support the Valley Homeless Healthcare Program's Medical Mobile Unit at the Reentry Resource Center and an additional two peer support workers to support and link individuals released from custody to Faith-based resource centers and other community resources. Effective community peer support will be a priority as the County expands treatment and program services.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

On February 9, 2016 the Board of Supervisors approved five service agreements to support in-custody reentry services in the area of job readiness and employment development training, family reunification and support, and health and well-being for custodial adults. Services are in place and will continue through June 30, 2018. The Department of Correction and the Probation Department will identify and refer individuals to in custody reentry services and programming. The target population for services focuses on inmates in minimum and medium security level housing units identified by Rehabilitation Officers. In the minimum security level housing unit, the target is to provide services to a minimum of 240 females and 1,200 males annually. In the medium security level housing units, the target is to provide services to a minimum of 240 females and 800 males annually.

The Office of Reentry Services (ORS) and the Department of Correction worked collaboratively to negotiate the scope of services, deliverables, and performance standards with selected agencies. ORS will monitor and track agencies for compliance with contractual requirements, quality of services, operational capacity, number of participants enrolled in programs, demographic information for participants, and timely submission of reports. ORS will work with the Department of Correction and selected vendors to evaluate the capacity to expand in-custody reentry services to the Main Jail.

All inmates booked into custody receive a comprehensive health screening which is inclusive of key questions related to the mental health history of the arrestees as well as information related to their current mental status. All arrestees who have a history of mental illness, who have attempted suicide in the past, and/or who are exhibiting signs of mental illness at Booking, are referred to a Mental Health Clinician at Booking who conducts a comprehensive mental status examination on the newly booked inmate. As a result of this examination, a plan of care is initiated for the inmate.

Inmates are evaluated by a Psychiatrist and provided appropriate care and treatment. The Psychiatrists assist in evaluating clients for medication management and provide psychotropic medications and appropriate treatment for the relief of their debilitating symptoms. Furthermore, in order to support the clients' transition into the community, a Substance Use Treatment Services (SUTS) transition team, with co-occurring capable staff, is working with custody health staff and clients to provide planned transition to community services. This team will introduce clients to providers, arrange appointments, secure medications and ensure 'warm handoffs' to the community.

Behavioral Health Services, in collaboration with Probation, Custody Health, Social Services Agency, and the Office of Reentry Services established a reentry model at the Reentry Resource Center (RRC) that consists of a service assessment and delivery model. The Behavioral Health team consisting of licensed clinicians at the RRC who provide clinical assessment for client referral, screening and/or linkage for mental health and drug & alcohol treatment needs at the RRC. Clients are linked to treatment providers and other needed services.

In addition, Rehabilitation Counselors conduct critical needs assessments and refer, and link clients to needed community services. These Rehabilitation Counselors also provide brief and crisis counseling, as well as case management services for those identified as high risk/AB109 clients at RRC. Probation and Office of Reentry Services identify these high risk or high need individuals with priority to AB109 clients for case management.

A Mobile Health Unit is located at the RRC to address the medical needs of the clientele. Given the great need for psychiatric services in the reentry population a full-time Psychiatrist is part of this team. The goal is to provide intake, evaluation and treatment for all AB109 clientele within one week of presenting to the RRC. The Psychiatrist provides bridge services from custody to society and coordinate outreach for patients with known mental health disorders. Investments were made in more balanced, community-based treatment programs that employ evidence based principles. AB 109 funds staffing resources at the Evans Lane program and directed contract services to fund Mental Health full service partnerships and crisis residential services. Evans Lane provides outpatient support in order to help reentry clients acquire skills to increase self-reliance. The focus of this treatment is to assist clients in developing better coping skills resulting in few hospitalizations and lower rates of recidivism.

Full Service Partnership (FSP) programs are intensive, comprehensive programs for adults with Serious Mental Illness (SMI) who are high-risk, frequent users of involuntary care and/or underserved homeless consumers with high levels of need. These programs are based on the AB2034 philosophy that provide a full array of treatment services which include: substance dependency treatment, psychiatric services, mental health counseling, case management, housing, and community resources necessary to meet the needs of each individual's life circumstances. These services are operated by Community Based Organizations and provide client access 24 hours per day seven days per week. FSP targets SMI adults discharged from IMDs, inpatient hospitals, State hospitals, who have been high users of EPS, crisis residential services, have severe co-occurring disorders, involvement with the criminal justice system, and/or are homeless or at risk of homelessness. FSP providers have the flexibility to outreach and engage clients who are homeless or are in a locked setting.

Substance Use Treatment Services (SUTS): Substance Use Treatment Services provides drug and alcohol abuse treatment services for AB109 clients. Services provided include detoxification services, residential treatment, outpatient services, dual-diagnosis treatment, methadone/drug replacement therapy and transitional housing assistance. AB109 Crisis Residential programs provide 24-hour residential services for consumers experiencing acute psychiatric episodes or crisis. These consumers do not present medical complications requiring nursing care. In addition, crisis residential programs serve current and newly referred Santa Clara County DBHS Consumers who meet Medical Necessity Criteria. Priority is given to referrals received from Acute Inpatient Hospitals, Institutes for Mental Disease (IMDs), and consumers at-risk of hospitalization.

What challenges does your county face in meeting these programming and service needs?

Behavioral Health Capacity Needs and Challenges: Historic Workforce Gap. While the BHS System of Care continuum offers a robust array of services, both the County and contract providers are dealing with significant service gaps, due to historic workforce challenges. The Affordable Care Act (ACA) and Mental Health Parity and Addiction Equity Act have moved behavioral health services into a critical health care role and expanded treatment for Individuals with mental illness and addiction disorders.

Psychiatrists and licensed clinicians are in high demand in all health sectors: public services, integrated health care systems, managed care plans, physician groups and individual practices, as well as state prisons. In addition, the State's AB 109 funding expanded behavioral health services for Santa Clara County's criminal justice population, increasing demand for behavioral health staff.

As a result of these new policies, Behavioral Health departments across California are experiencing historic workforce issues. This shortage is not unique to Santa Clara County; however, the Bay Area has been significantly impacted due to the number of health care public and private systems seeking behavioral health staff. In addition, the Bay Area's cost of living is high, the pool of candidates seeking employment is limited and the marketplace is extremely competitive, all of which contribute to recruitment challenges.

Language Services

There continues to be a need for linguistic services, especially for Spanish-speaking providers, for many Medi-Cal beneficiaries. The gap for Spanish speaking providers and peer workers is most significant in South County, which creates wait times for clients in this area that are seeking services. While many contract agencies and the County continue to provide these services, the demand for these services continues to outweigh the available supply. It is important to note that this service gap is not unique to Santa Clara County; many other counties continue to experience the same shortage of available Spanish-speaking providers.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Community and peer navigators are critical to improve the continuity of care between jail and the community and offers an unparalleled opportunity to foster collaboration between law enforcement agencies, faith based organizations and direct service providers. Community health workers provide case management services, home visits, chronic case management education, medication reconciliation, and make primary care and specialty medical appointments. Peer support workers provide support and navigation to community services for reentry clients by providing peer assistance and mentoring on a one-to-one basis, assist with pre-release support and linkage to community resources. The FY 16-17 Recommended Budget adds an additional two community health workers to support the Valley Homeless Healthcare Program's Medical Mobile Unit at the Reentry Resource Center and an additional two peer support workers to support and link individuals released from custody to Faith-based resource centers and other community resources. Effective community peer support will be a priority as the County expands treatment and program services.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

On February 9, 2016 the Board of Supervisors approved five service agreements to support in-custody reentry services in the area of job readiness and employment development training, family reunification and support, and health and well-being for custodial adults. Services are in place and will continue through June 30, 2018. The Department of Correction and the Probation Department will identify and refer individuals to in custody reentry services and programming. The target population for services focuses on inmates in minimum and medium security level housing units identified by Rehabilitation Officers. In the minimum security level housing unit, the target is to provide services to a minimum of 240 females and 1,200 males annually. In the medium security level housing units, the target is to provide services to a minimum of 240 females and 800 males annually.

The Office of Reentry Services (ORS) and the Department of Correction worked collaboratively to negotiate the scope of services, deliverables, and performance standards with selected agencies. ORS will monitor and track agencies for compliance with contractual requirements, quality of services, operational capacity, number of participants enrolled in programs, demographic information for participants, and timely submission of reports. ORS will work with the Department of Correction and selected vendors to evaluate the capacity to expand in-custody reentry services to the Main Jail.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Fernando Giraldo
Chief Probation Officer

Hon. Denine Guy
Presiding judge or
designee

Susan Mauriello
County supervisor or
chief administrative
officer or designee

Jeff Rosell
District Attorney

Larry Biggam
Public Defender

Jim Hart
Sheriff

David Honda
Chief of Police

Cecilia Espinola
Department of Social
Services

Andrew Stone
Department of
Employment

Giang Nguyen
Department of Mental
Health

Eric Riera
Alcohol and Substance
Abuse Programs

Michael Watkins
Office of Education

Karen Delaney
Community-based
organization

Sylvia Nieto
Victims' interests

The CCP meets quarterly

Santa Cruz County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Establish an array of Effective Alternatives to Incarceration to address the impacts that the realigned population will have on the county jail in order to avert crowding and poor conditions of confinement without jeopardizing public safety outcomes.

Objective:

- Establish and maintain a Custody Alternatives Program (CAP) to identify, screen and place appropriate inmates in community alternatives, including the use of electronic monitoring and supervision to ensure public safety.
- Maintain an effective Pretrial Release Program to identify, screen, and place appropriate individuals on community supervision while they are waiting for court processing. This will include the use of validate risk assessment tools and active communication with the courts for pretrial release.

Measure:

- Average daily jail population as a percentage of the rated capacity for each of the County's three facilities.
- Total number of jail bed days saved by CAP; public safety rate of inmates committing new law violations during the period of their custody alternative.
- Total number of jail bed days saved by Pretrial Services; public safety rate of defendants committing new law violations during the period of their pretrial release.

Progress: During 2015-16, the average daily population across the County's three jail facilities was 438, or approximately 99% of combined rated capacity. During 2015-16, CAP supervised a total of 569 participants, saving a total of 23,062 jail bed days. During 2015-16, Pretrial Services supervised a total of 343 individuals, saving a total of 15,403 jail bed days, with a public safety rate of 94.2% of defendants not arrested for new criminal behavior during the period of pretrial release.

Goal: Implement Evidence-Based Probation Supervision that properly assesses risk factors associated with recidivism and provides effective probation interviewing, case planning, and community supervision to ensure public safety and reduce recidivism.

- Objective:**
- Conduct risk assessment on all AB109 individuals within 30 days of sentencing; conduct full assessment of criminogenic needs on all moderate and high risk AB109 individuals within 30 days of sentencing.
 - Develop supervision case plans for all AB109 individuals, including all court ordered terms as well as services and supports directly related to assessed criminogenic needs.
 - Conduct active, risk-based community supervision of all AB109-sentenced individuals, including the use of EPICS, motivational interviewing, and an objective sanctions and rewards grid for response to participant behavior.

- Measure:**
- Number of AB109-designated individuals assessed for risk and criminogenic need.
 - Number of AB-109-designated individuals with supervision case plans.
 - Documented utilization and outcomes of EPICS interventions.

Progress: Among AB109-designated individuals during 2015-16, a total of 170 assessments were conducted for risk level; 148 initial comprehensive assessments were conducted for criminogenic need; and 349 reassessments were conducted to assess change in risk and needs. A total of 828 EPICS interventions were documented among AB109-designated individuals.

Goal: Develop community partnerships for Effective Intervention Services that adhere to the principles of evidence-based practices for maximum recidivism reduction.

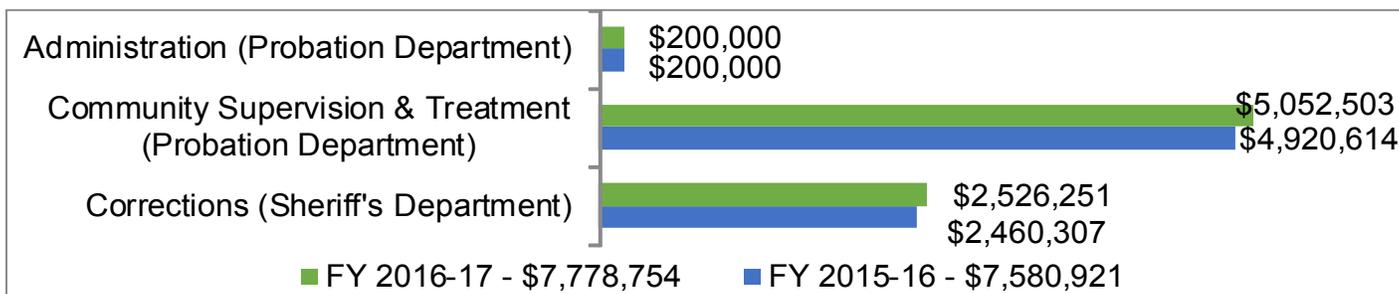
- Objective:**
- Refer all AB109-designated individuals to services and supports that address assessed criminogenic needs and reentry stability factors.
 - Provide a minimum aggregate of 200 hours of appropriate services to high risk individuals and 100 hours for moderate risk individuals in order to reduce the risk of recidivism.

- Measure:**
- Number and percent of AB109-designated individuals referred to services based on assessed need.
 - Number and percent of AB109-designated individuals receiving adequate service dosage based on risk level.

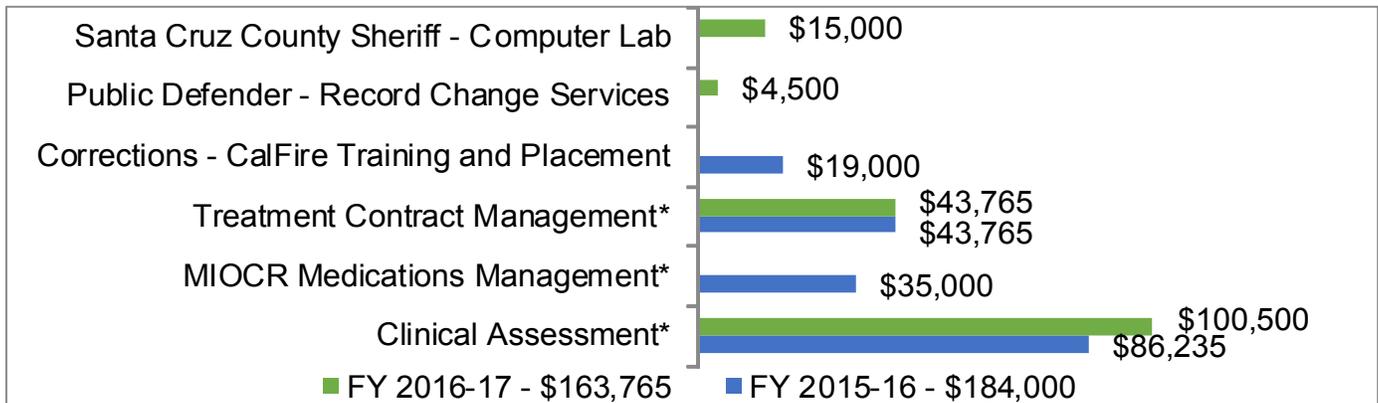
Progress: During 2015-16 a total of 328 AB109-designated individuals received services through the CCP's referral and service model, with an average total dosage of 97 hours of service during 2015-16.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations

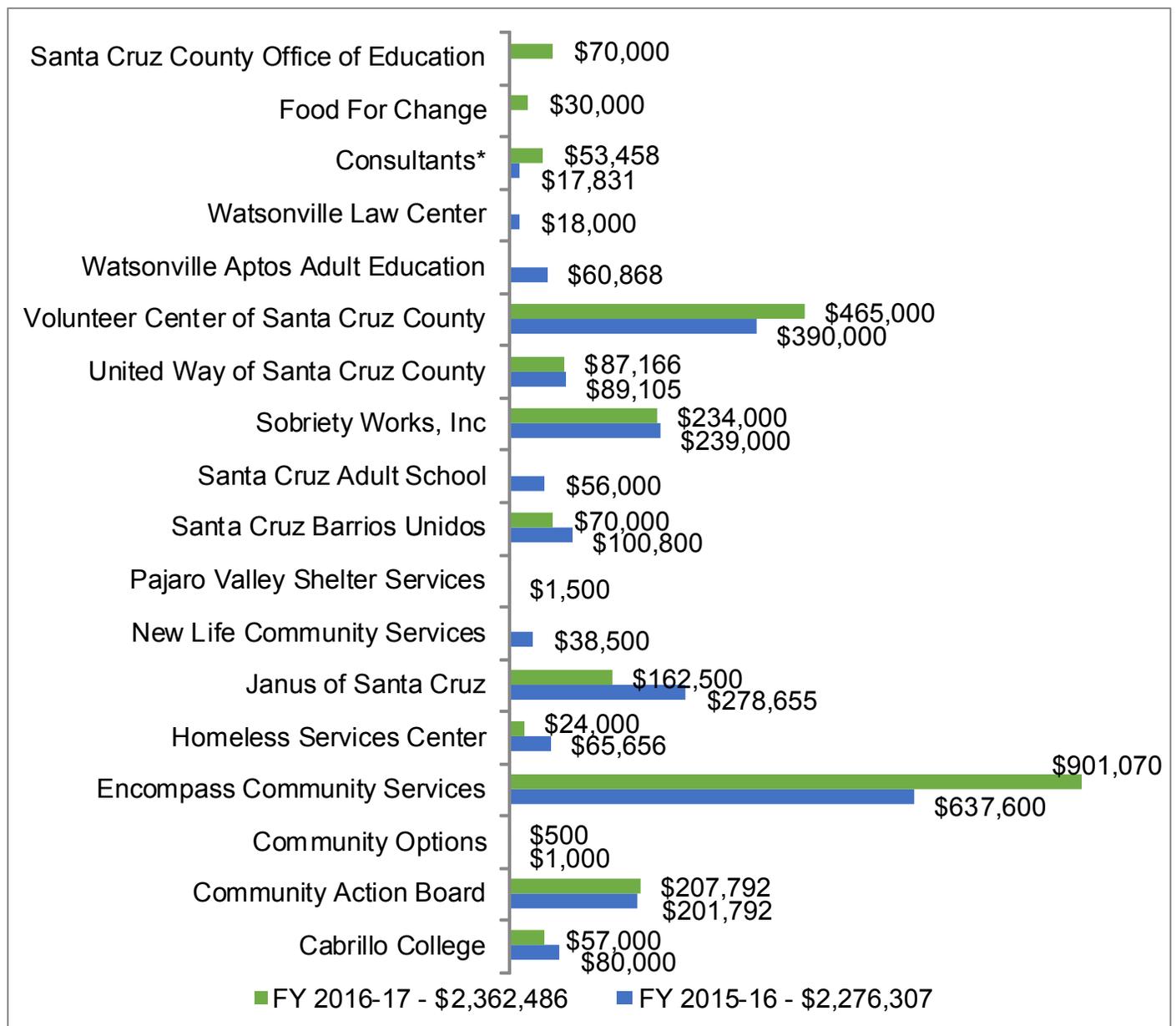


FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*Health Services Agency

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



*Recovery Maintenance, Trauma Services

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Santa Cruz County employs multiple levels to monitor and evaluate AB109 service effectiveness. All providers are required to submit weekly rosters of program participants with service type, dosage hours to date, and any missed appointments or behavioral issues. Quarterly, service providers submit detailed reports on program-specific, pre/post outcomes as defined in their service contract. Depending on the program type, this may include increases in pro-social cognition and behavior; reduction in substance use or mental health symptoms; improved educational or employment status; increased access to and utilization of on-going community support; as well as attainment of individual reentry goals and objectives. Quarterly reports also document program completion rates and provide an opportunity for the program to provide case studies or other evaluation data and findings.

In addition to program reporting, Santa Cruz County has contracted with Research Development Associates (RDA) of Oakland, California, to conduct a comprehensive evaluation of AB109 implementation and outcomes. This 18-month project includes an assessment of data collection and analysis; an implementation evaluation, based on interviews and focus groups with participants, program staff, and justice system stakeholders; and an outcome evaluation of the impact of services on recidivism and criminal justice outcomes. The implementation evaluation is expected to be presented to the Board of Supervisors in February 2017 with the Outcome evaluation due in September 2017.

Does the county consider evaluation results when funding programs and/or services?

Yes. Santa Cruz County continuously monitors service implementation, utilization, completion, and outcomes of all AB109-funded services. The CCP re-releases a request for letters of interest every three years, with programs selected for funding based on evidence-based design and documentation of local successful outcomes. The Board of Supervisors requires that annual contract renewals are based on demonstrated achievement of all service deliverables and client outcomes. The overall mix of services is based on findings from the Risk Needs Responsivity Simulation Tool (GMU) that combines an analysis of multiple years of individual needs assessment data with findings from a standardized provider assessment. This tool identifies gaps and duplication in services: along with service utilization data, this provides an on-going guide for adjusting services to best meet the needs of the target population.

Santa Cruz County has also implemented the Pew/MacArthur Results First initiative, which features a cost/benefit analysis of criminal justice system-linked programs and services. The goal is to increase the utilization of evidence-based programs that match to the needs of the target population and result in a measurable decrease in recidivism and related costs. All AB109 service providers are required to reference Results First data and resources in developing program funding requests. The County assesses the cost/benefit of each program as well as the overall return on investment for all AB109 services.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, conviction, length of stay, recidivism and treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61% to 80%

We would like to better understand your 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?

The Probation Department conducts risk and needs assessment, and develops individualized treatment plans and makes referrals to address the key drivers of criminal behavior. Services are organized by criminogenic needs/responsivity issue, as follows:

- **Substance Use Disorders:** Assessment, detox, outpatient, intensive outpatient, residential, medically-assisted treatment, and sober living environments, provided by Encompass Community Services, Janus of Santa Cruz, Sobriety Works, and New Life Community Services.
- **Mental Health Disorders:** Assessment, counseling and system navigation, and medication management, provided by Encompass Community Services, Health Services Agency and Community Action Board.
- **Reentry Planning and Support:** Benefits assistance and enrollment, driver's license reinstatement, records clearance, and comprehensive reentry planning provided by the Volunteer Center and the Encompass Community Services.
- **Criminal Thinking, Behavior and Identity:** Evidence-based curricula, offered in group and individual settings, including Thinking for a Change, Courage To Change (workbooks), Seeking Safety, and Getting Motivated To Change. Services provided by the Volunteer Center and Encompass Community Services in partnership with Probation Officers.
- **Antisocial Peers:** Prosocial peer mentoring and leadership development, including Barrios Unidos and the AB109 Speakers Bureau provided by the Sobriety Works.
- **Family Conflict:** Parent education and family involvement, including the Papas Fatherhood Involvement Program, provided by Encompass Community Services.
- **Low Educational Attainment:** Academic testing, high school diploma and high school equivalency programs, Adult Basic Education, low level literacy, and post-secondary education, provided by a linked network of the Volunteer Center, the Santa Cruz County Office of Education, and Cabrillo College.
- **Low Vocational Attainment:** Employment readiness workshops, individual job placement services, and employer education and outreach, provided by the Community Action Board and United Way Unstable/Unsafe Housing; emergency and transitional housing provided by the Homeless Service Center, and the Encompass River Street Shelter.

What challenges does your county face in meeting these programming and service needs?

- Maintaining communication, coordination of services, and common goals and language across multiple domains and a dozen service providers. Probation staffs a monthly provider network meeting to assist in identifying and resolving problems, conducting cross-training, and meeting as a group with the Probation AB109 unit to maintain functional referral pathways.
- Staff turnover in all agencies. This creates a need for on-going training and resources for staff who bring their individual area of expertise without the necessary background in evidence based practice for community corrections.
- Data integration with courts, corrections, and probation. The data needed to accurately track recidivism and other criminal justice outcomes is spread between these three domains, each with its own vendor-based electronic information system. The CCP has been supporting a multi-agency effort to build common identifiers and systems to automate the transfer of key data points between the three systems. The local Superior Court recently initiated a new electronic data management system that is not currently equipped to provide ready access to data for tracking misdemeanor recidivism among AB109 clients. Santa Cruz County continues to work with other counties that utilize the same Probation and Court systems, and this consortium hopes to work with the vendors to develop data integration.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Based on needs and service data, the CCP has dramatically expanded funding for cognitive/behavioral interventions targeting criminal thinking, behaviors and identity. This includes a combination of cohort-based curriculum (Thinking For A Change) and a more flexible, individual curriculum (Courage To Change). This provides effective programming for individuals who may not be able to program in group due to facility issues, as well as allowing individuals to engage in cognitive/behavioral change interventions without waiting for the next class cycle to start.
- The CCP has increased the scope and scale of mental health services, including group and individual counseling, and system navigation services. This reflects the need identified during the first two years of AB109 implementation for mental health services to individuals with mental health issues that impair their ability to engage and benefit from services targeting criminogenic needs, but that are not serious enough to warrant services through the County's System of Care.
- As a part of our County's Justice Reinvestment Initiative, Santa Cruz County has worked with California Forward to conduct a Jail Utilization Study (JUS) that provides a wealth of information regarding the overall functioning and outcomes of the local criminal justice system. Key elements include the number and type of all bookings, divided between those resulting from a new law violation vs. those that represent rule violations of court-ordered terms and conditions; average length of stay by type of crime; bail and pre-trial releases; rebookings by crime type and frequency of return to custody; jail use for special populations like mentally ill offenders; and the impact of State-level policy changes such as AB109 and Proposition 47. This study provides a data-based starting point for the development and refinement of criminal justice system policies, procedures, and services.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

During 2015-16 the CCP chose to dramatically expand the Papás Fatherhood Involvement program. This family and community-based program draws on the positive motivation of fatherhood to engage AB109-designated individuals to build personal skills and pro-social networks of support. The locally-developed program is based on a nine-year clinical trial intervention under funding from the Office of Child Abuse Prevention and in collaboration with U.C. Berkeley and Yale University. Papás was rated as an evidence-based intervention by the California Evidence-Based Clearinghouse, demonstrating significant and consistent increases across multiple measures of individual and family wellness. The program has proven extremely popular among jail inmates, the majority of whom continue to engage with the on-going drop-in groups and supports of the program following release to the community. Over 70% of participating fathers demonstrated increased knowledge and skills regarding parenting and communication as a result of program participation.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Tracie Neal
Chief Probation Officer

Melissa Fowler-Bradley
Presiding judge or
designee

Elaine Grossman
County supervisor or
chief administrative
officer or designee

Stephen Carlton
District Attorney

Jeffrey Gorder
Public Defender

Tom Bosenko
Sheriff

Rob Paoletti
Chief of Police

Dianna Wagner
Department of Social
Services

Melissa Janulewicz
Department of
Employment

Donnell Ewert
Department of Mental
Health

Dean True
Alcohol and Substance
Abuse Programs

Tom Armelino
Office of Education

Tom Wright
Community-based
organization

Angela Jones
Victims' interests

The CCP meets quarterly

Shasta County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Implement community resource program for offenders being released from custody (jail or prison).

- Objective:**
- Determine resources available in the community to provide services to offenders.
 - Arrange time and location on a monthly basis.
 - Provide offenders with information about treatment services appropriate to their top criminogenic needs.

- Measure:**
- Each newly released offender will have at least 1 treatment referral.

Progress: The Probation Department conducted the first Successful Transition On Probation Parole (STOPP) meeting in January 2016. This monthly event occurs in conjunction with parole to provide access to treatment and community services for those offenders being placed on probation, post release community supervision (PRCS), mandatory supervision (MS) and parole. Offenders being released from custody and under the supervision of either agency are required to attend this mandatory 2 hour monthly meeting within 30 days of release. This event exposes offenders to necessary treatment and community services in one location as quickly as possible. Services range from treatment providers, health care, life skills, Identification and Social Security services, Veterans Services, housing, etc. During the STOPP meeting, offenders are required to meet with a minimum of five service providers and sign up for a minimum of one treatment program or service. Between referrals from both Probation and Parole, approximately 80 offenders were referred each month.

Goal: Increase the number of offenders serviced by Pre-arraignment Supervised Own Recognizance (PSOR) and Supervised Own Recognizance (SOR Programs).

Objective:

- Evaluate bookings in the county jail to expand the type of offenders who are eligible for the PSOR and SOR Programs.
- Solicit stakeholder feedback to improve the program.
- Continue to educate justice partners about program and level of supervision received by offenders.

Measure:

- Increase the number of offenders who successfully complete and are sentenced.

Progress: The SOR Program was implemented in FY 2013. The PSOR program was developed and implemented July 1, 2016 with the goal of providing pre-arraignment services on the weekends and holidays. During FY 2015-2016, the number of offenders on the program increased by 21.8%. The failure to appear rate for the offenders on the SOR and PSOR Program was 15.8% a decrease from the prior fiscal year of 3%. Sixty-five percent of the offenders on the programs were sentenced and exited from the program.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Develop resources to evaluate Correction Program Checklist (CCP) funded programs and provide information for areas of improvement.

Objective:

- Solicit training from the University of Cincinnati Corrections Institute on Dr. Edward Latessa's Evidence-based CCP and Evaluation Protocol.
- Select up to 8 Probation Staff to attend training.
- Select 2 CCP funded programs to be evaluated.

Measure:

- 8 Probation Staff will be trained on Dr. Edward Latessa's Evidence-based CCP and Evaluation Protocol.

Goal: Update the current Probation adult case plan to better link goals and interventions with the appropriate criminogenic need.

Objective:

- Work with contracted assessment provider to link goals and interventions with the appropriate criminogenic need.
- Train staff on the resulting changes to the adult case plan.
- Perform inter-rater reliability process through contracted assessment provider to ensure staff understand how to implement resulting changes.

Measure:

- Staff are able to correctly use the case plan to link goals and interventions to appropriate criminogenic needs.

Goal: Hire an Alcohol and Drug Counselor for the Collaborative Courts (BHC and REC).

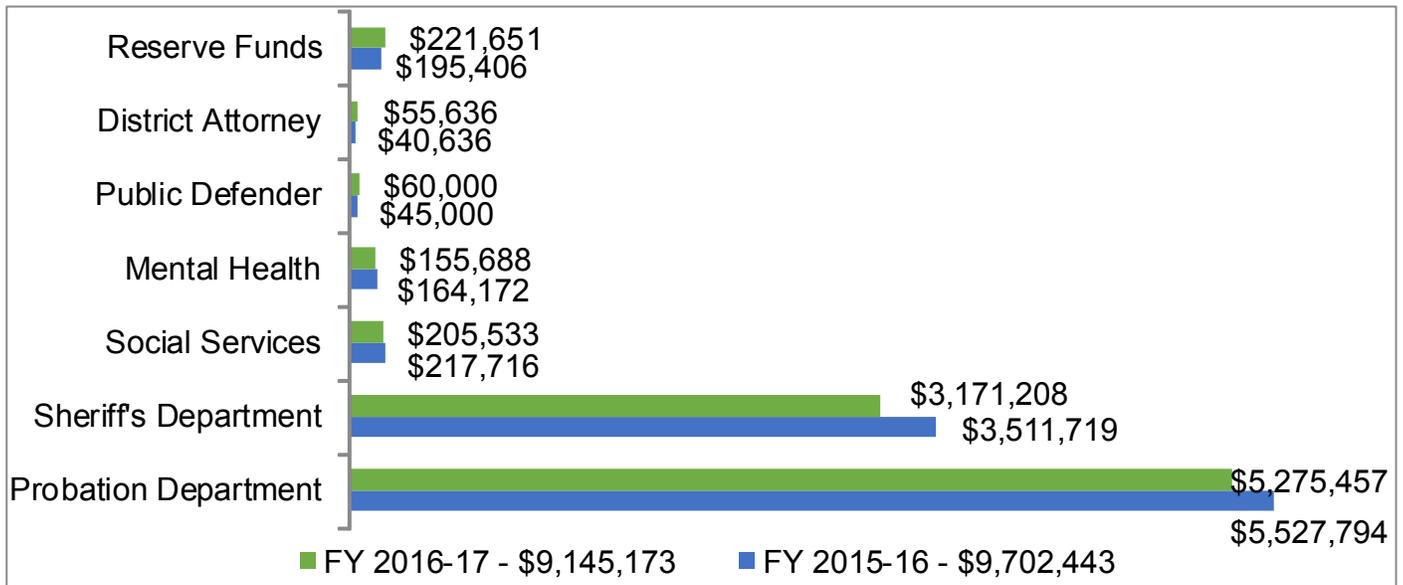
Objective:

- Assist offenders in navigating the Criminal Justice System and treatment community.
- Build a peer to peer support system that would support an aftercare program and connection to the AOD community.

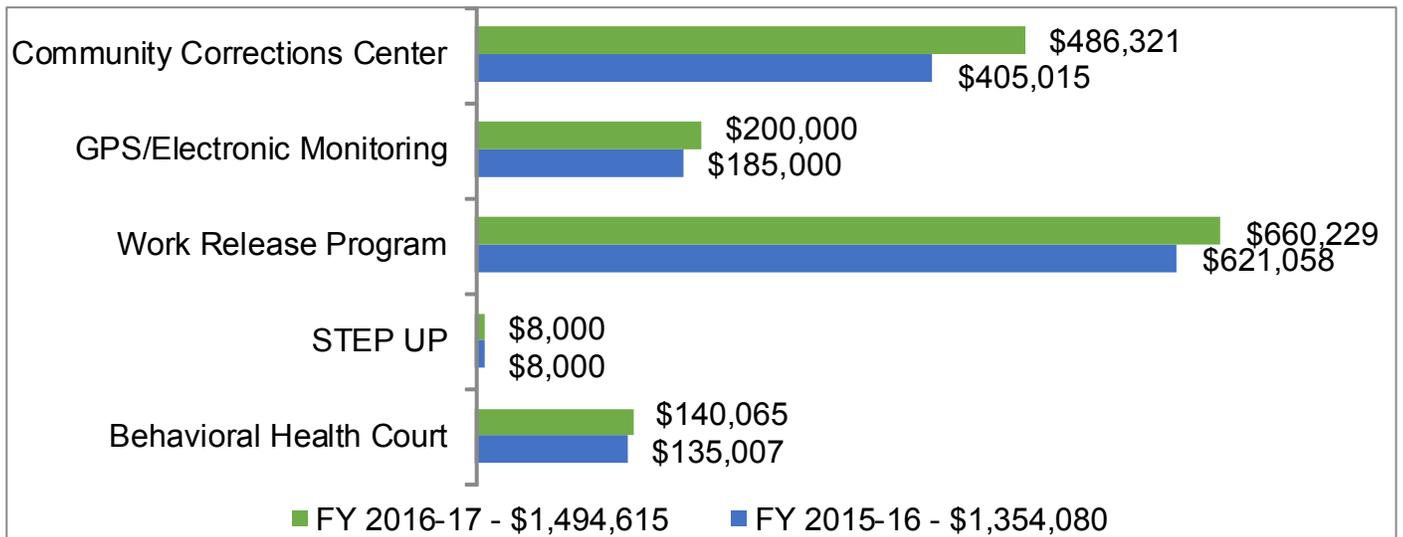
Measure:

- Increase AOD services for offenders participating in the Collaborative Courts.
- Increase the coordinated care between the Collaborative Courts and community service providers.

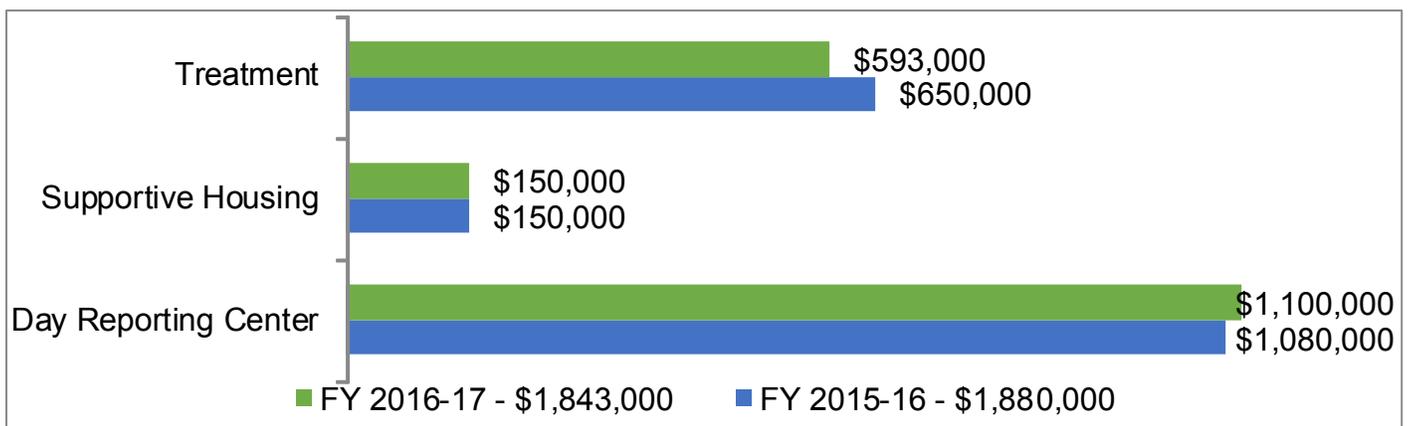
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The county does evaluate the effectiveness of many of the programs/services funded with its Public Safety Realignment allocation. Contracted providers provide monthly updates on attendance and completion of the program. At a minimum of annually, Probation staff review recidivism (as measured by re-entry into the criminal justice system and convictions) of the offenders participating in these contracted programs. The Day Reporting Center, in conjunction with the CCP and the Probation Department, establishes annual goals and outcomes and reports on the progress on a quarterly basis at CCP meetings.

Does the county consider evaluation results when funding programs and/or services?

Yes. The contractor performance and, when available, the outcomes for the offenders are considered when renewing contracts. It is the goal to move toward an improved evaluation process for all contractors as well as internally funded programs. This is an identified goal for FY 2016-2017.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

Less than 20%

We would like to better understand your 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?

We currently offer a Day Reporting Center, inpatient and outpatient alcohol and drug treatment, sober living, Thinking for a Change, Moral Reconciliation Therapy, Parenting Counseling, Domestic Violence Treatment, Behavioral Health Collaborative Court, Re-Entry Collaborative Court and Mental Health and Alcohol and Drug assessments at the Community Corrections Center. For offenders with a low to moderate mental health need services are available through Partnership Community Health. County Mental Health services are available to offenders with a severe mental health need.

What challenges does your county face in meeting these programming and service needs?

Offender attendance to and engagement in programming and services is a significant challenge. This challenge is difficult to address as some offenders are simply not ready to change. Efforts have been made to regularly communicate with the providers to determine attendance or engagement issues early. When these issues are identified, Probation Officers work more closely with the offenders to assist. Evidence Based Programming that specifically addresses the top criminogenic needs is of prime importance. For some of these criminogenic needs, there are not currently enough agencies in Shasta County that are certified to provide these services especially related to mental health services. Shasta County does not currently have a crisis stabilization unit available which significantly impacts the County's ability to address the needs of this population. In addition, many

of the programs currently available in the county are not evidence-based, including some of the programs that provide both inpatient and outpatient substance abuse treatment programming.

The Pre-Arrestment Supervised Own Recognizance (PSOR) program has experienced challenges related to eligibility for the program, specifically the criteria in 1319.5 PC. Shasta County struggles with a high failure to appear rate. The current law requires that all offenders with 3 or more failure to appear must go before a bench officer at arraignment to be placed on a supervised released program. The majority of defendants reviewed for the program have 3 or more failure to appear decreasing the number of defendants eligible for the program over the weekend and requiring the defendants to be arraigned prior to placement in the program.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Probation Department conducted the first STOPP meeting in January 2016. This monthly event occurs in conjunction with parole to provide access to treatment and services for those offenders being placed on probation, post release community supervision (PRCS), mandatory supervision (MS) and parole. Offenders being released from custody and under the supervision of either agency are required to attend this mandatory monthly meeting within 30 days of release. This event exposes offenders to necessary treatment and services in one-location as quickly as possible. During the STOPP meeting, offenders are required to meet with a minimum of five service providers and sign up for a minimum of one treatment program or service. Between referrals from both Probation and Parole, approximately 80 offenders are referred each month. While the program has been successful in the first several months of implementation, the Probation Department is hoping to see continued growth in attendance for those offenders referred to the program.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Probation Department contracts with a community based organization, Northern Valley Catholic Social Services to provide a housing program for offenders on supervision. The goal of the program is for each offender to obtain, safe, stable and suitable permanent housing, learn to budget their income, develop communication skills with landlords/property management, and gain the tools to properly deal with other tenants and/or issues involved with living in a community complex. The housing program is located at our Community Correction Center and started in October 2013. Since the program started, they have successfully housed (30 days or longer) 144 offenders. They have transitioned 273 people off the street and into an alternative living environment.

As of March 2016, the Day Reporting Center (DRC) has had 69 offenders complete the program since its opening in April 2013. Of the 69 offenders that have completed the program, 10 have re-entered the Criminal Justice System, a 14.5% recidivism rate. Of the 10 offenders who have re-entered the system, 2 have received new convictions, a 3% recidivism rate. Graduations are scheduled for the DRC in the early summer and winter of each year. The next graduation is scheduled for January 2017 and it is anticipated that there will be 20 graduates.

The SOR/PSOR Program supervised 298 offenders in FY 2015/2016, an increase from the prior year of 233 offenders. Of these, 65.1% were successful in making it to sentencing. The program's failure to appear rate was 15.8%. Assessing defendants and placing them on the SOR/PSOR program when eligible has proven to be successful in our community and has reduced the failure to appear rate among the population. Additionally, it has increased the number of offenders being sentenced by the court and has allowed SOR/PSOR staff the ability to talk with the defendants about treatment programs and other community services available to them pending the court process.

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Community Corrections Partnership Membership
(October 21, 2016)

Jeff Bosworth
Chief Probation Officer

Hon. William Pangman
Presiding judge or designee

Scott Schlefstein
County supervisor or chief administrative officer or designee

Larry Allen
District Attorney

J Lon Cooper
Public Defender

Tim Standley
Sheriff

Vacant
Chief of Police

Lea Salas
Department of Social Services

Vacant
Department of Employment

Vacant
Department of Mental Health

Vacant
Alcohol and Substance Abuse Programs

Merrill Grant
Office of Education and Community-based organization

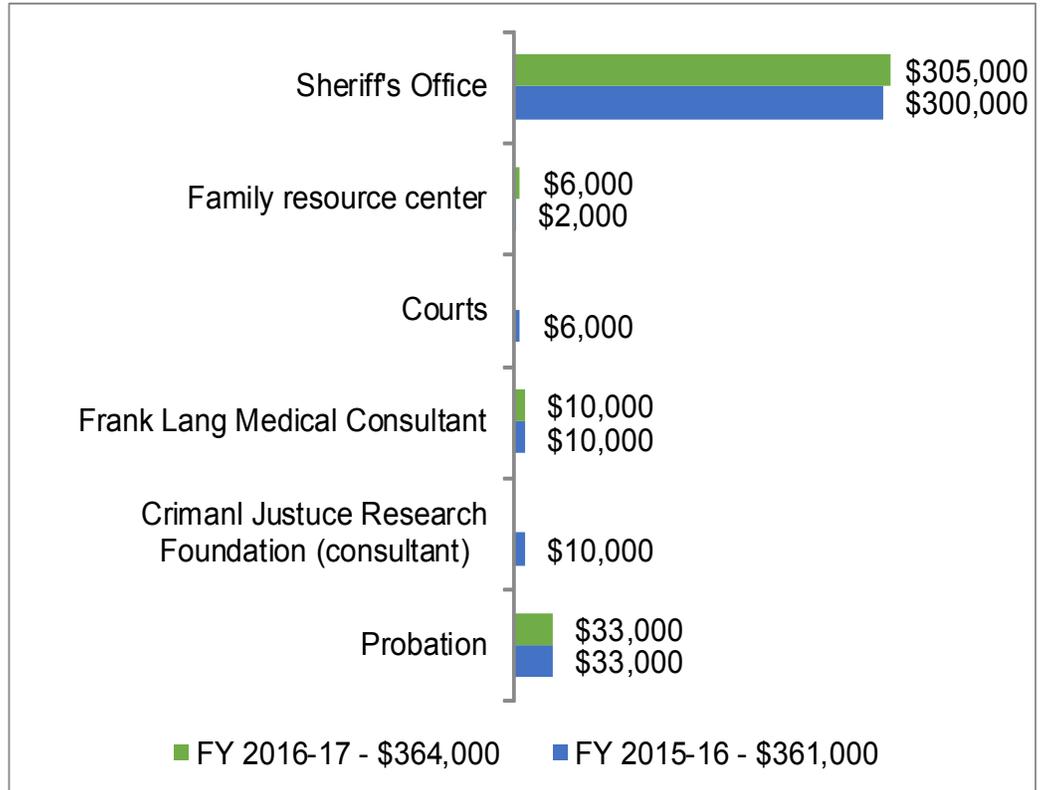
Sandy Marshall
Victims' interests

The CCP meets as needed

Sierra County

The CCP did not provide goals for FY 2015-16 or 2016-17

FY 2015-16 and 2016-17 Budget Allocations



The county did not provide figures for allocations in FY 2015-16 or 2016-17 for public or non-public agencies for programs and services.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

No, BSCC definitions are not used.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

The county declined to respond to this question.

We would like to better understand your 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?

Usually just services provided by county – will occasionally use private entities when needed.

What challenges does your county face in meeting these programming and service needs?

County far too small for many specific programs, for example, hard to have a DV program when you only have 1-2 defendants on probation for DV at any given time.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Because of our small size, very few counties relate to us.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We started a pre-trial electronic monitoring program a couple of years ago. So far, not one person has been convicted of a new crime while on program.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Todd Heie

Chief Probation Officer

William J. Davis

Presiding judge or
designee

Brandon Criss

County supervisor or
chief administrative
officer or designee

Kirk Andrus

District Attorney

Lael Kayfetz

Public Defender

Jon Lopey

Sheriff

Martin Nicholas

Chief of Police

Stacey Cryer

Department of Social
Services, Department of
Employment,
Department of Mental
Health and
Alcohol and Substance
Abuse Programs

Kermith Walters

Office of Education

Carla Charraga

Community-based
organization

Coleen Chiles

Victims' interests

The CCP meets quarterly

Siskiyou County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce jail overcrowding while maintaining community safety and improving criminal justice outcomes.

- Objective:**
- Implement a pre-trial supervision program in which newly arrested defendants are safely and effectively released back into the community while awaiting trial.
 - Maintain or increase use of alternative sentencing options and increase access to services and programs for those serving alternative sentences.
 - Increase use of evidence-based programming and practices.

- Measure:**
- a) Pre-trial program is initiated, program data is reviewed periodically to assess success and areas of needed improvement; b) Develop and implement a process for tracking Failure to Appear (FTA).
 - a) Number of individuals serving alternative sentences remains stable or is increased as compared to the previous year; b) Increased number of services and programs accessed by those serving alternative sentences, as compared to the previous year; c) Incorporate a greater variety of vocational training programs as compared to the previous year.
 - a) Ongoing data collection, analysis and annual reporting on crime trends and recidivism; b) Certify current domestic violence batterers' program; c) Reconvene the CCP Evaluation/Data Subcommittee; d) Adopt a comprehensive Public Safety Realignment & Post Release Supervision Program Evaluation Plan.

Progress: Year end reporting in process.

Goal: Increase access to evidence informed services and supports to reduce recidivism.

- Objective:**
- Enhanced utilization of evidence-based screening and case management tools
 - Consistent use of graduated sanctions for reoffending probationers.
 - Promote Evidence Based Practices (EBP) training opportunities inclusive of judges, probation officers, prosecutors, defense attorneys, and law enforcement.

- Measure:**
- Review case plan procedures conducted on certain risk levels to determine effectiveness in developing rehabilitation plans.
 - Formalize a matrix for using graduated sanctions.
 - Identify training needs and resources; Ongoing CCP-funded and associated training attendee reporting.
-

Goal: Increase use of best practices shown to improve criminal justice outcomes.

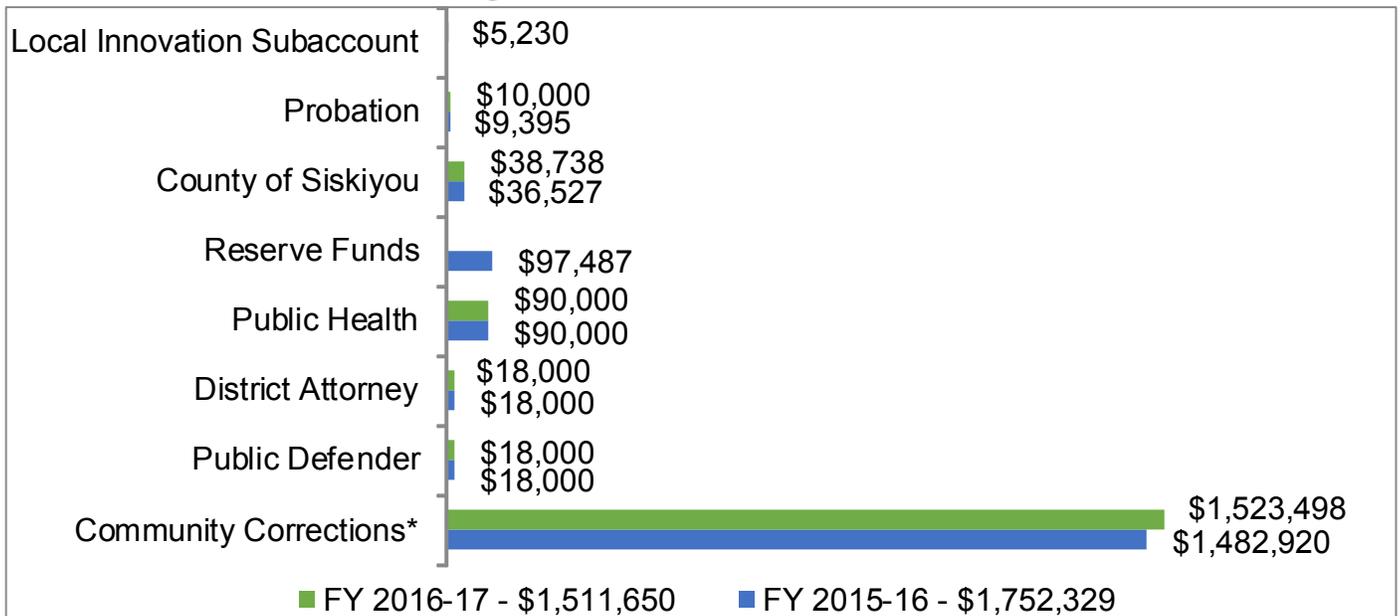
- Objective:**
- Utilize a Corrections Services Specialist to serve as specialty court and reentry service liaison.
 - Enhance access to community-based programming for the criminal justice-involved low-risk and at-risk populations.
 - Promote services and supports for identified special PRCS populations including veterans.

- Measure:**
- Provide a semi annual report to the CCP highlighting referrals, successes and challenges.
 - a) Review existing programs and adopt a written evaluation plan; b) Evaluate effectiveness of current programs, c) Modify and/or implement additional programming as needed; d) Explore opportunities to leverage CCP resources to support increased service access.
 - a) Continue to support and assist those veterans that become criminal justice-involved so that their needs are met; b) Develop a process for tracking the number of PRCS, probationers and those receiving alternative sentences, who are veterans.

Progress: Year end reporting in process.

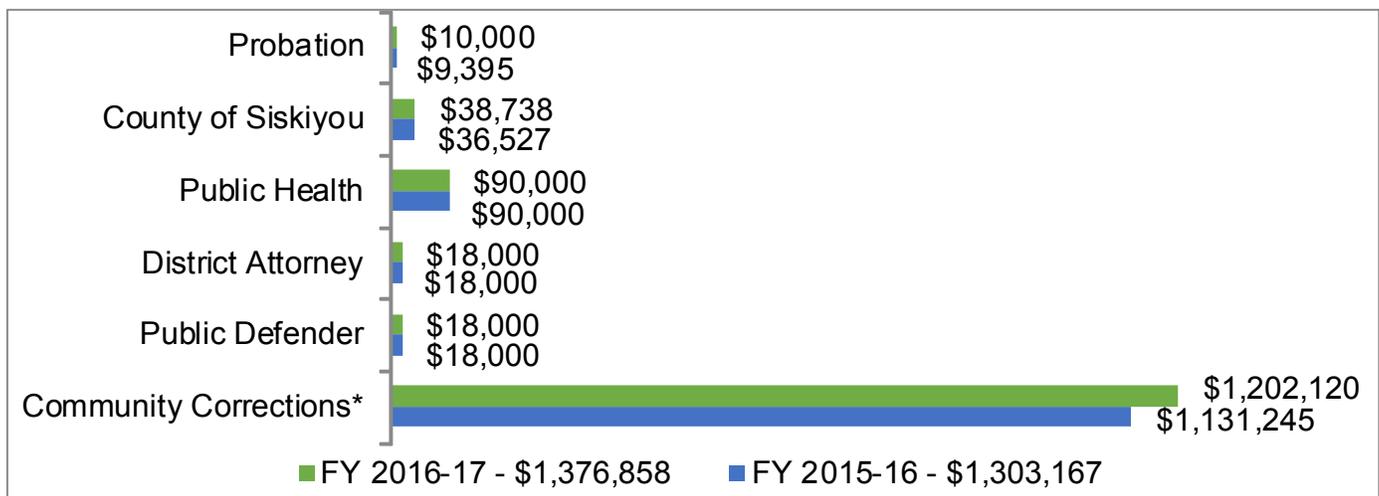
The CCP will determine goals for FY 2016-17 in January, 2017.

FY 2015-16 and 2016-17 Budget Allocations



*Community Corrections funds used for direct costs of payroll, services/supplies, and professional services.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*Community Corrections funds used for direct costs of payroll, services/supplies, and professional services.

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Most program curricula includes an evaluation component.

Does the county consider evaluation results when funding programs and/or services?

Yes. Although evaluation data is available for most programs, the CCP does not consistently deliberate beyond anecdotal information in determining funding decisions. Overall data, including recidivism statistics, is provided annually to the Board of Supervisors as part of the Annual Plan updates. The decision to approve the Plan and the associated program expenditures does consider program results.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

In partnership with many local agencies, the Day Reporting Center (DRC) has developed a holistic approach to rehabilitation and includes a myriad of behavioral health and readjustment services. Probationers and those serving alternative sentences are able to access these services including: equine experiential groups, individual therapy, anger management groups, drug and alcohol three-tiered program, *Thinking for Good* addressing criminal thinking, Change Companies Interactive Journaling, Domestic Violence Offender Program, Woman's Trauma Group, Men's Trauma Group, AOD group for those with co-occurring disorders, psychiatric services, GED Prep/HS diploma, systems navigation with a Correctional Services Specialist, assistance in obtaining placement at residential treatment centers, employment assistance; vocational training.

To further increase service access to the DRC population, referrals are routinely made to community-based behavioral health services. Access of these services is growing through increasing numbers of individual and primary care clinic-based Medi-Cal mental health services providers. Efforts are also underway to increase access to substance use disorder services through a regional Drug Medi-Cal Organized Delivery System.

What challenges does your county face in meeting these programming and service needs?

Transportation - Siskiyou County has a vast geography (6,500 square miles) with limited public transportation options; Homelessness; Lack of in-county residential drug treatment programs; Inconsistent assessment of service needs between county departments, frequently resulting in denial of services.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

No substantial changes have been made.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The DRC Domestic Violence Program - The Siskiyou County Day Reporting Center established a Domestic Violence Program for Batterers in June 2015. The program has five individuals trained as facilitators of the Moral Reconciliation Therapy (MRT) program, *Bringing Peace to Relationships*. There are two groups weekly, all groups are "open enrollment" and new individuals are added as they are sentenced. A small equine group was also implemented on a once a week basis. The program is also offered in Spanish.

Every participant receives an assessment to determine if additional services are needed and is provided assistance to connect them with services. The majority of participants are also enrolled in other programs such as individual therapy (either with a mental health therapist or an AOD counselor), AOD classes and the MRT *Criminal Thinking* class.

Notable Stats:

Since June 2015 there have been 31 participants (through April 2016).

1. There are 16 active participants in the two groups.
2. There have been 4 successful program completions with graduations; none of the graduates have reoffended.
3. There have been 3 participants *arrested* for serious/violent felonies. None of these felonies have been violent family acts that caused injury, one participant was charged with child endangerment due to drug use/abuse and paraphernalia around his young daughter. None were convicted.
4. There are a few participants arrested for Probation Violations or other misdemeanor charges, most violations were a result of not attending the group or drug use.

The Siskiyou County Sheriff's Department has initiated the application process to have the program approved as a 52-week batterers program.

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Community Corrections Partnership Membership
(October 21, 2016)

Christopher Hansen
Chief Probation Officer

Robert C. Fracchia
Presiding judge or designee

Birgitta Corsello
County supervisor or chief administrative officer or designee

Krishna Abrams
District Attorney

Lesli Caldwell
Public Defender

Tom Ferrara
Sheriff

Andrew Bidou
Chief of Police

Gerald Huber
Department of Social Services

Angela Shing
Department of Employment

Halsey Simmons
Department of Mental Health

Andy Williamson
Alcohol and Substance Abuse Programs

Jay Speck
Office of Education

Deanna Allen
Community-based organization

Vacant
Victims' interests

The CCP meets quarterly

Solano County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Implement evidence-based probation supervision that properly assesses risk factors associated with recidivism. Use case planning and community supervision to promote law-abiding behavior and reduce client recidivism by addressing criminogenic needs.

Objective:

- All AB 109 clients will be assessed for risk level using an evidenced based risk tool.
- All AB 109 clients will have a case plan to address their criminogenic and other needs.
- All AB 109 contact standards will be based on risk level.

Measure:

- Number of complete assessments, as measured by regular caseload review.
- Number of complete case plans, as measured by regular caseload review.
- Number of contacts made with each client, as measured by regular caseload review.

Progress: On-going.

Goal: The Sheriff's Office will implement evidence based programming in the jail that targets risk factors associated with recidivism and addresses criminogenic needs.

Objective:

- Providers will roll out CBI-SA, Thinking for a Change and CALM (CBT interventions).
- The Five Keys Charter School will be implemented across all three jails.
- The Sheriff's Office will integrate Gender Responsive and Trauma Informed services for women into its service structure.

Measure:

- Provider monthly reports will indicate the number of CBT interventions delivered.
- Teachers will have been assigned to all three jails and either classroom based learning or independent study will be taking place.
- The Women's Re-entry Achievement Program (WRAP) will become a part of the Sheriff's family of programs.

Progress: CBI-SA and Thinking for a Change have been implemented. The Five Keys Charter School has been implemented in two of our three jails. WRAP became a part of the Sheriff's programs in April 2016.

Goal: Ensure that probation officers are effectively working with clients to address their criminogenic needs and reduce client recidivism using evidence based or informed practices.

- Objective:**
- Train all adult supervision probation officers and Center for Positive Change case managers in Motivational Interviewing and have regular booster trainings.
 - Train all adult supervision probation officers in Effective Practices in Correctional Settings-II (EPICS-II) and have regular booster trainings.
 - All adult supervision probation officers will receive quality assurance quarterly regarding their meetings with clients.

- Measure:**
- Number of staff that have completed MI training, as measured by training log.
 - Number of staff that have completed EPICS training, as measured by training log.
 - Number of staff that have received coaching from the Quality Assurance and Implementation Analyst.

Progress: Currently all adult supervision probation officers and Center for Positive Change case managers have been trained in MI and 97% of them have been trained in EPICS. The Quality Assurance and Implementation Analyst began working with the adult supervision officers starting in October of this year.

Goal: Enhance the use of alternative detention (pre-sentence) for appropriate offenders.

- Objective:**
- Use of an evidenced-based assessment tool for pre-trial jail release decisions for all appropriate clients.
 - Increase the success of pre-trial defendants appearing for all scheduled court appearances.

- Measure:**
- Number of pre-trial reports completed and number of reports with recommendations for release.
 - Number of pre-trial clients who completed pre-trial compared to the number who failed the program.

Progress: From January through November of 2016, 431 were recommended for release following assessment with the Ohio Risk Assessment Systems-Pretrial Assessment Tool, an evidenced based risk assessment tool. Of those granted Pretrial Services, 73 successfully completed the program, 18 unsuccessfully completed and 30 failed due to a bench warrant issuance during this timeframe.

Goals, Objectives, Outcome Measures and Progress

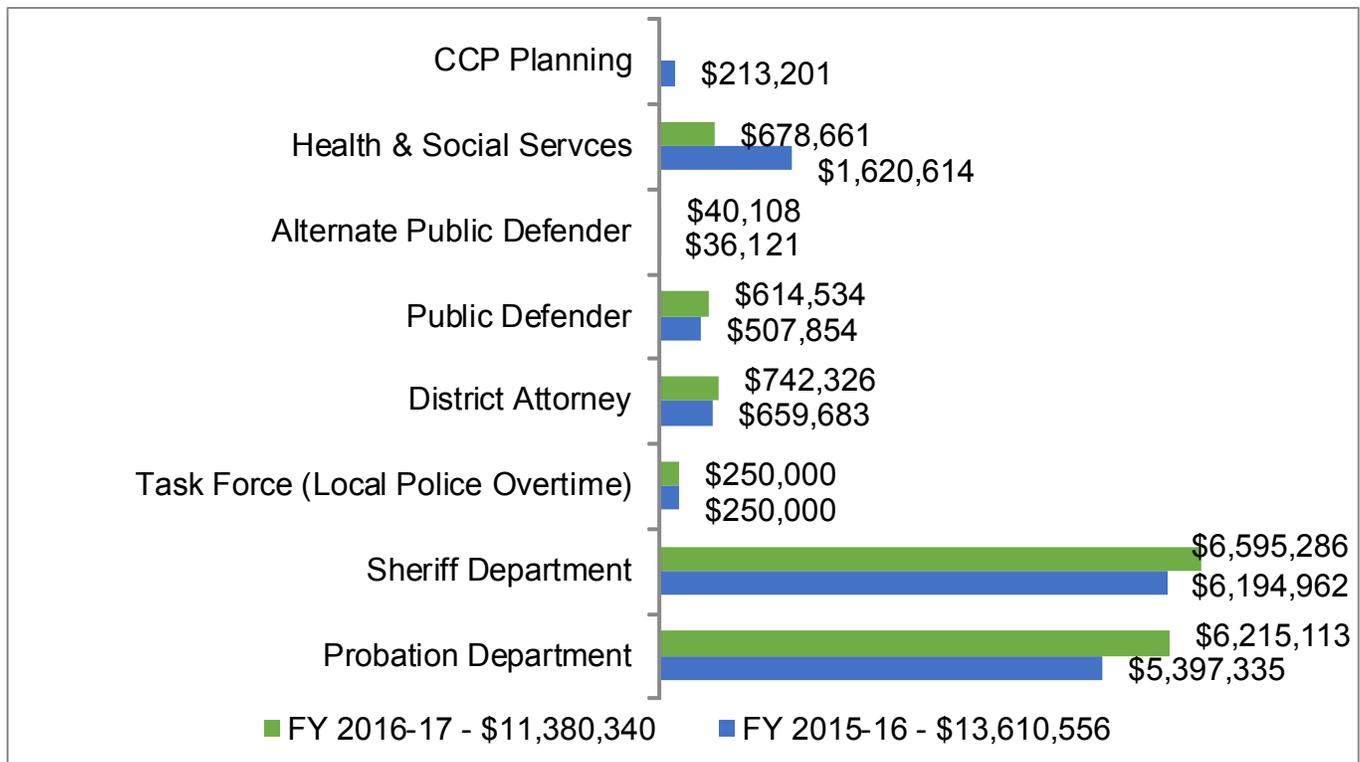
FY 2016-17

Goal: The Sheriff's Office will implement a risk and needs assessment within the jail to drive placement into jail programming based on risk factors associated with recidivism and to assist with re-entry planning.

- Objective:**
- All AB 109 sentenced inmates will be assessed for risk level using an evidenced based risk tool (voluntary participation).
 - All AB 109 sentenced inmates who receive the risk and needs assessment will have a case plan to address their criminogenic and other needs.
 - All AB109 sentenced inmates who have been assessed will have a re-entry plan.

- Measure:**
- Number of completed assessments as measured by case manager caseload review.
 - Number of completed case plans as measured by case manager caseload review.
 - Number of completed re-entry plans as measured by case manager caseload review.

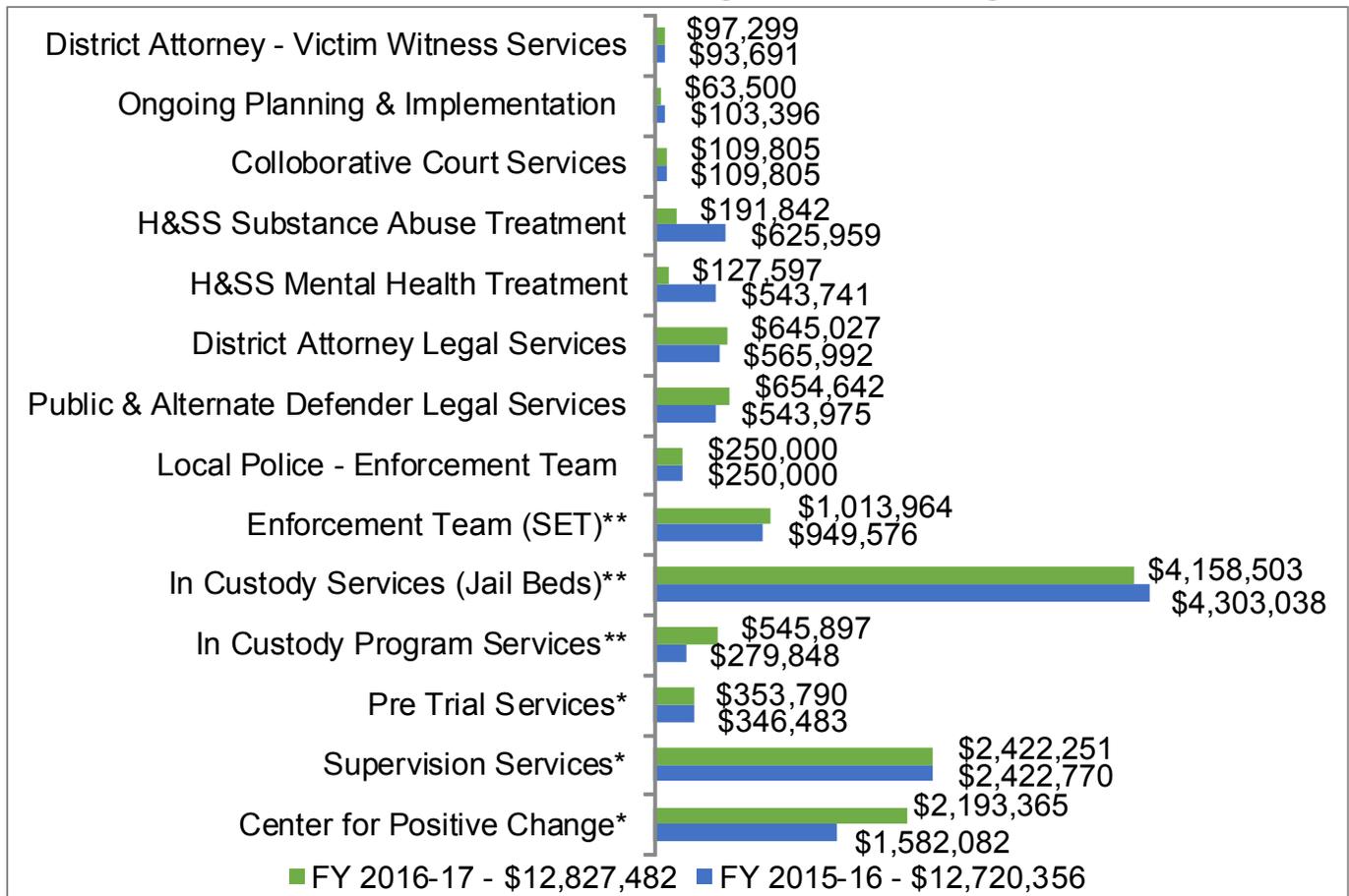
FY 2015-16 and 2016-17 Budget Allocations



Total funding shortfall of \$1,269,214 in FY 2015-16 is balanced using carryforward funds from prior years.

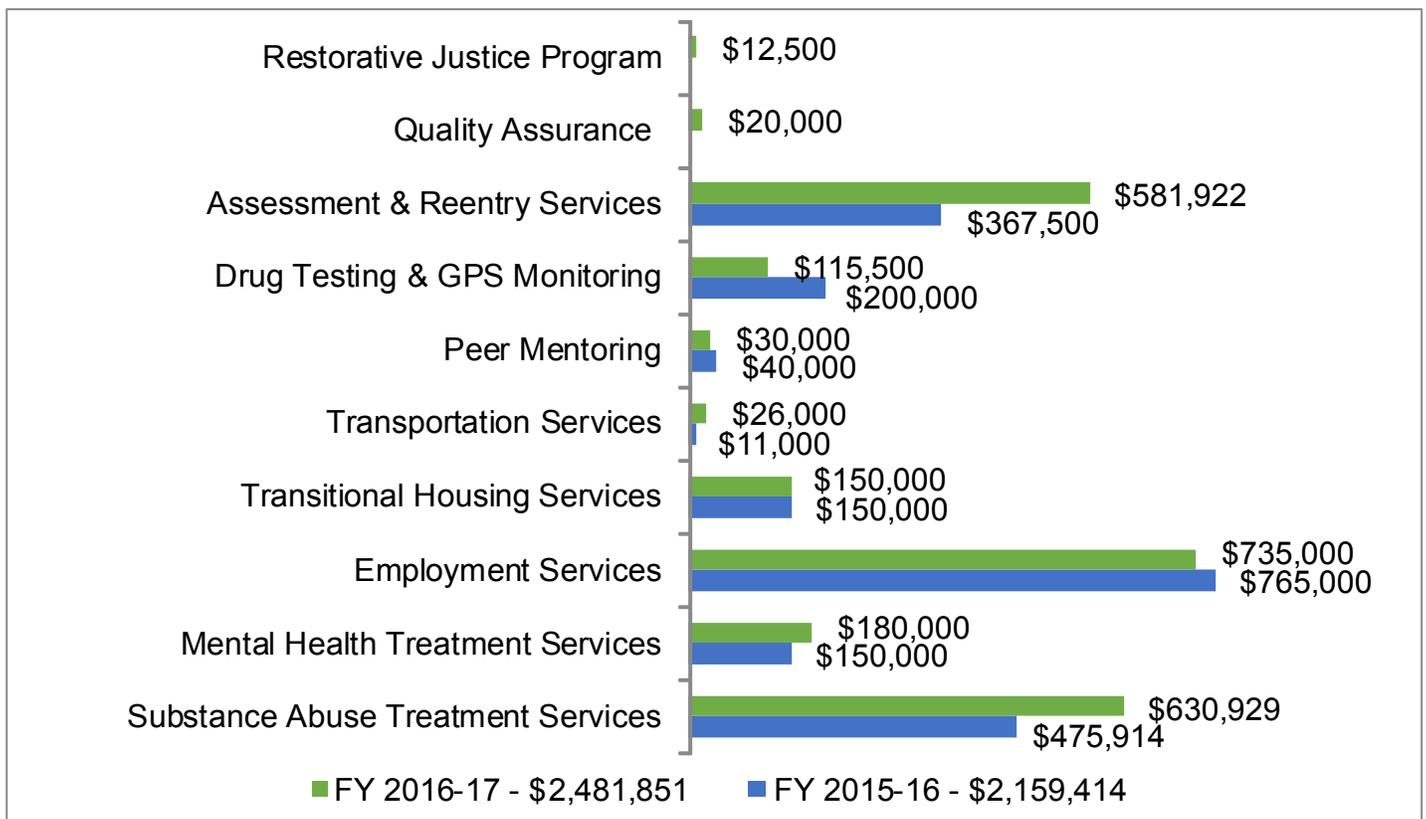
Total funding shortfall of \$3,928,993 in FY 2016-17 is balanced using carryforward funds from prior years.

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



* Probation; ** Sheriff

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. To determine the impact programming and services has had on recidivism, Solano County Probation is annually collecting data starting in October of 2011. Five offender cohorts have been identified and recidivism rates (any reconviction) are being calculated at 12, 24, and 36 months from the offender starting a term of probation supervision. Recidivism for each cohort is comparable by grant type, gender, age, and LS/CMI initial risk scores. Two comparison groups (10/01/2011-9/30/2012 and 10/01/2012-9/30/2013) will establish a baseline to interpret recidivism rates for cohorts three (10/01/2013-9/30/2014), four (10/01/2014-9/30/2015), and five (10/01/2015-9/30/2016). As time progresses and more data is collected, Solano County Probation will further analyze outcomes for specific offender services by comparing recidivism rates for program completers, partial completers, non-completers, and non-participants, as compared to the established baseline recidivism rate. Early cohort one and cohort two comparative data for offender recidivism for the first 30 months after starting probation supervision has indicated an overall reduction in recidivism from 37.6% to 26.3%. This reduction trend holds true when the data is categorized by grant type with PRCS cases reducing from 57.9% to 43.7%. When recidivism is examined by the offender's initial LS/CMI risk score offenders classified as high risk had a recidivism reduction from 50.5% in cohort one to 33.4% in cohort two. For the above established cohorts this analysis will continue through September of 2019 and additional cohorts will be established for ongoing analysis.

Does the county consider evaluation results when funding programs and/or services?

Yes. Until our own data is available Solano County has implemented evidence-based, research-informed, and promising practices to determine the most effective programs and services. Information is collected from resources such as the National Registry of Evidence Based Programs and Practices, Washington State Institute for Public Policy, and the PEW Charitable Trusts Results First Clearinghouse Database. The County also considers the knowledge of our staff, community, as well as other probation jurisdictions to make final determinations for programming and services. In addition to working with national consultants that have expertise in evaluation results and implementing evidence based practice, the Department also hired a full time Quality Assurance and Implementation Analyst to provide continuous review and evaluation of our programs and services. The Quality Assurance and Implementation Analyst also works with staff to identify and correct deviation from established evidence based offender supervision practice while promoting staff excellence and proficiency in the delivery of those practices.

Moving forward, using local data as described in the response for question 13, Solano County will have a data-driven decision making process to determine performance outcome when developing and funding programs and services.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21% 40%

We would like to better understand your 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?

Mental Health Services Provided include:

- Psychiatric Services (medication management), Individual and group therapy offered through Integrated Care Clinics in Vallejo, Vacaville, & Fairfield.
- Psychiatric services, Individual and group therapy offered in Children's Outpatient Clinics in Vallejo, Vacaville, & Fairfield.
- Community Based Case management: Varying levels dependent on need of consumer (case management programs specialize in post-acute stabilization, preventing homelessness, and intensive case management).
- Full Service Partnership Programs (specific to: Children, Transitional Age Youth, Adult, Forensic Adults, Older Adults, Homeless, and treating early psychosis) These programs include intensive therapy, case management, medication monitoring/management, supportive services, group therapy, & rehabilitation for serious and persistently mentally ill. Services provided in the community.
- Crisis Stabilization Unit located in Fairfield.
- Acute and subacute psychiatric placements.

Solano County substance abuse treatment services are provided through a contracted provider network. The network includes outpatient, residential and detox treatment. Residential placements last from 90 to 180 days. There are two levels of outpatient care, and the more often used intensive one has a one-year long authorization for services. Detox episodes can last up to 15 days; the system allows three per year.

In-custody, the Jail offers comprehensive short, medium and long term Substance Abuse services based on length of stay and eventually risk level (we are currently rolling out the LSCMI).

Additionally, through the MIOCR grant the Jail now offers a small in-custody Mental Health Treatment Program to inmates who are Administratively Separated due to their mental health issues. This program is designed to help them with medication compliance and improve social, life and coping skills in service of assisting them to be able to live with another person, participate in small and eventually large group work and socialize appropriately with others.

The Jail also offers Re-entry Mental Health Services through the MIOCR grant. Individuals are assessed in-custody, a re-entry plan is developed, a case manager assigned and case manager follows the individual into the community and offers case management services for up to nine months if needed.

What challenges does your county face in meeting these programming and service needs?

Our county has limited transitional housing options as well as limited permanent housing. This makes it difficult for the re-entry population as housing is a key component to being able to get one's life on track. Our county administration is attempting to deal with this issue; however, it will not be fixed in the short term.

Expansion of Individual and group therapies are limited by staffing in the Integrated Care Clinics.

Access to high quality dual-diagnosis residential treatment programs to treat substance addiction concurrently with mental health symptoms has been a challenge.

Clients covered by AB 109 face relatively few challenges for getting into substance abuse treatment. Residential and detox beds may be in short supply occasionally, but for the most part, dedicated CCP allocations of funds for treatment have allowed placements in all treatment modalities to occur rapidly when compared to the county as a whole. On the other hand, the system does not have enough transitional housing to allow a well-supported step-down from residential to outpatient after-care. A second challenge is that many of the residential providers are out of county, which can make access to medical and psychiatric services difficult for those clients.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties

In June of 2016, the Probation Department hired a full time Quality Assurance and Implementation Analyst to provide continuous review and evaluation of our staff, programs and services.

Historically, we have offered limited programming in jail and the programming offered did not assist with re-entry needs. Our current jail programs design is focused on addressing those issues directly related to recidivism. Additionally, all jail based programs now provide re-entry planning and most follow individuals into the community to assure, at minimum, the status of links and referrals provided.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Solano County has implemented research informed and evidence-based programs and services within its Center for Positive Change. The County has invested in programs and services such as *Motivational Interviewing*, *Effective Practices in Correctional Settings (EPICS)*, *Reasoning & Rehabilitation 2-R*, *Thinking for a Change*, *Matrix Therapy*, *Treating Alcohol Dependency*, *The Courage To Change*, and *Beyond Trauma*.

Case Management-

Motivational interviewing - The PEW Charitable Trusts Results First Clearinghouse Database lists *Motivational Interviewing* with the highest rating and *EPICS* is considered promising.

Cognitive Behavioral Treatment-

In a report published by Washington State Institute for Public Policy (WSIPP), cognitive behavioral treatment (for high and moderate risk offenders) has a 100% chance that benefits will exceed costs. The PEW Charitable Trusts Results First Clearinghouse Database rates Reasoning & Rehabilitation 2-R as strongly beneficial and Thinking for a Change as promising.

Substance Abuse Treatment-

In considering substance abuse treatment, Solano County invested in the *Treating Alcohol Dependence: A coping Skills Training Guide*. WSIPP Benefit-Cost Results show Cognitive behavioral coping skills therapy for Adult Substance Abuse treatment has a 99% chance of a positive return on investment. The *Matrix* Intensive Outpatient Model has a WISPP 52% benefit-cost rating while The Pew Foundation gives it a promising rating.

Trauma Treatment for Female Offenders:

Solano County utilizes Beyond Trauma by Stephanie Covington. The Pew Charitable Trusts Results First Clearinghouse Database gives this intervention its highest rating supported by evidence.

As data collection continues, Solano County will have the ability to share local results demonstrating the effectiveness of the chosen programs and services and make modifications and changes when warranted.

Community Corrections Partnership Membership
(October 21, 2016)

David Koch
Chief Probation Officer

Jose Guillen
Presiding judge or designee

Mary Booher
County supervisor or chief administrative officer or designee

Jill Ravitch
District Attorney

Kathleen Pozzi
Public Defender

Steve Freitas
Sheriff

Jeffrey Weaver
Chief of Police

Sherry Alderman
Department of Social Services and Department of Employment

Michael Kennedy
Department of Mental Health and Alcohol and Substance Abuse Programs

Steven Herrington
Office of Education

Dana Alvarez
Community-based organization

Jill Ravitch
Victims' interests

The CCP meets monthly

Sonoma County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Perform compliance and welfare checks during law enforcement operations.

Objective:

- 100% of operations will include compliance and welfare checks.

Measure:

- Number of operations including compliance and welfare checks.
- Number of participants assessed for available services
- Class attendance measures.

Progress: On October 31, 2016, the DRC had 166 active participants, including 9 “reach-in” participants at the local detention facility. Of these participants, 71 (43%) were AB 109 offenders. As of September 2016, 603 offenders have begun programming at the DRC. During this period, staff has provided 301 substance use disorder/mental health assessments, 581 outpatient substance abuse treatments, and 184 eligibility assessments. For the month of October 2016, the required Cognitive Behavioral Intervention class had an attendance rate of 80.4%.

Goal: Increase substance use disorder treatment and mental health services to offenders upon release from jail.

Objective:

- Upon jail discharge, 100% of offenders will be assessed for substance use disorder treatment and mental health issues.
- 100% of offenders receiving positive assessments will be connected with treatment services.

Measure:

- Number of offenders receiving assessments.
- Number of offenders connected with treatment services.

Progress: During calendar year 2015, the DHS performed 6,287 mental health assessments of offenders prior to release from jail. During the same period, DHS provided post-custody contracted substance use services for 6,526 individuals and provided direct service to 195 individuals for SUD treatment and mental health services.

Goal: Perform compliance and welfare checks during law enforcement operations.

Objective:

- 100% of operations will include compliance and welfare checks

Measure:

- Number of operations including compliance and welfare checks

Progress: 100% of operations in FY2015-16 included compliance and welfare checks.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Goal modified from FY 2015-16 Survey: Increase the amount of programming that AB 109 offenders receive at Sonoma County's Day Reporting Center (DRC).

- Objective:**
- 100% of eligible and willing AB 109 offenders will enroll at the DRC.
 - 100% of participants will be assessed for substance use disorders, mental health issues, and eligibility for medical and financial assistance.
 - 80% of participants will be present at required classes.

- Measure:**
- Number of offenders enrolled at the DRC.
 - Number of participants assessed for available services.
 - Class attendance measures.

Progress: On October 31, 2016, the DRC had 166 active participants, including 9 "reach-in" participants at the local detention facility. Of these participants, 71 (43%) were AB 109 offenders. As of September 2016, 603 offenders have begun programming at the DRC. During this period, staff has provided 301 substance use disorder/mental health assessments, 581 outpatient substance abuse treatments, and 184 eligibility assessments. For the month of October 2016, the required Cognitive Behavioral Intervention class had an attendance rate of 80.4%.

Goal: Added goal not included in FY 2015-16 Survey: Reduce use of jail beds in a manner consistent with public safety.

- Objective:**
- 100% of sentenced individuals will be reviewed for eligibility for pre-trial community supervision.
 - 100% of low-risk inmates who meet program requirements will serve a portion of their sentences on electronic monitoring supervision.
 - 100% of eligible inmates will receive rehabilitative programming to prepare them for trial or successful release.

- Measure:**
- Number of booked individuals receiving risk assessments.
 - Number of low-risk inmates who are placed on electronic monitoring supervision.
 - Number of inmates receiving substance use disorder/mental health services and Penal Code 1370 restoration services.

Progress: During calendar year 2015:

- For pre-trial services, all booked individuals with new charges were assessed for program eligibility. Additional individuals were assessed for pre-trial services as ordered by the Courts.
 - For the low-risk inmate program, 100% of sentenced individuals were reviewed for program eligibility. In 2015, the Sheriff's Office placed 315 individuals on electronic monitoring supervision, 307 of whom completed their sentences with no new misdemeanor or felony arrests and no failures to appear in court.
 - The Department of Health Services provided the following in-custody services: 6,287 mental health assessments; Starting Point services for 418 individuals (330 successfully completed the program); and PC 1370 restoration services for 206 individuals (162 restored to competency).
-

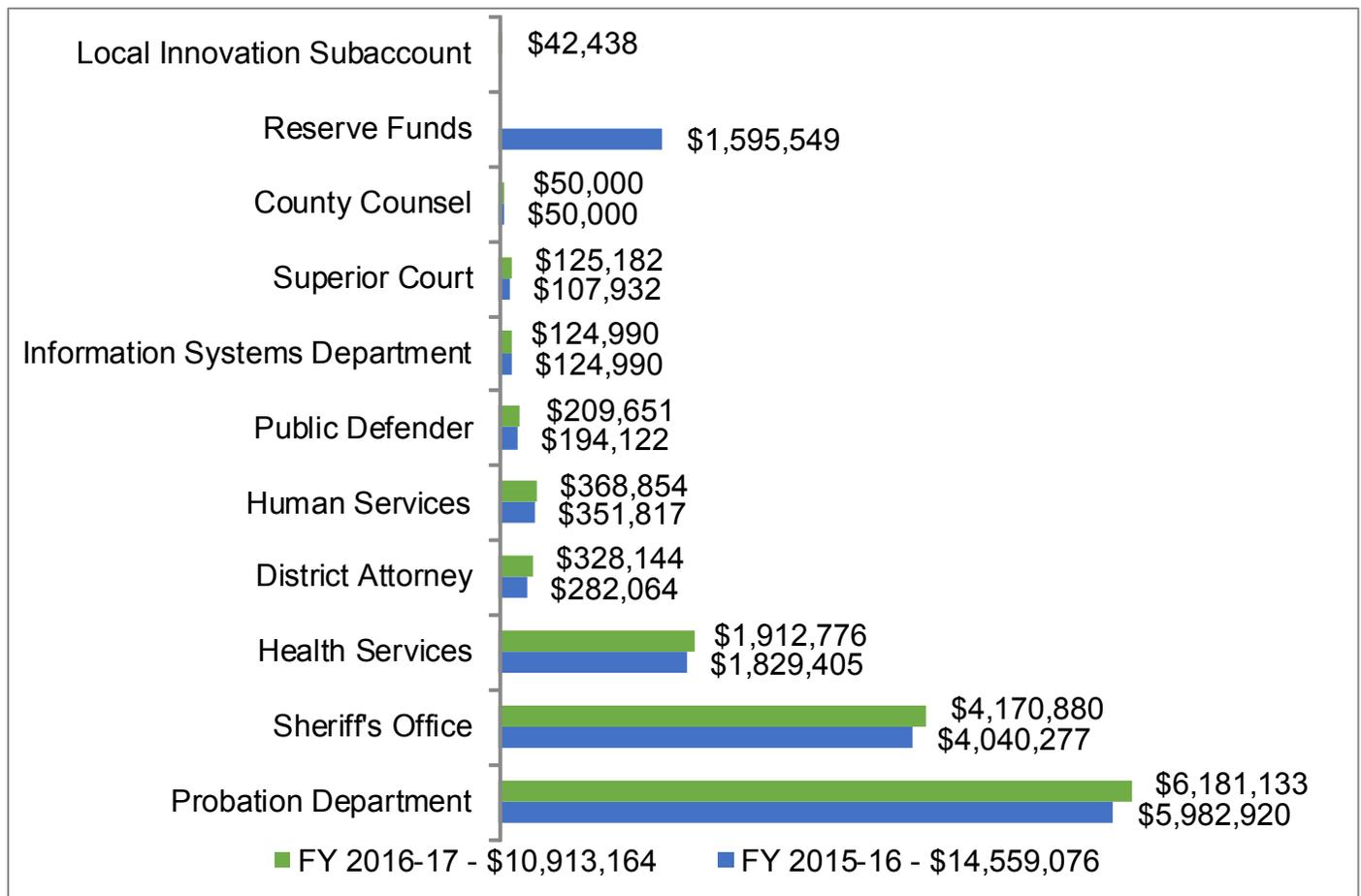
Goal: Goal carried forward from FY 2015-16 Survey: Increase substance use disorder treatment and mental health services to offenders upon release from jail.

- Objective:**
- Upon jail discharge, 100% of offenders will be assessed for substance use disorder treatment and mental health issues.
 - 100% of offenders receiving positive assessments will be connected with treatment services.

- Measure:**
- Number of offenders receiving assessments.
 - Number of offenders connected with treatment services.

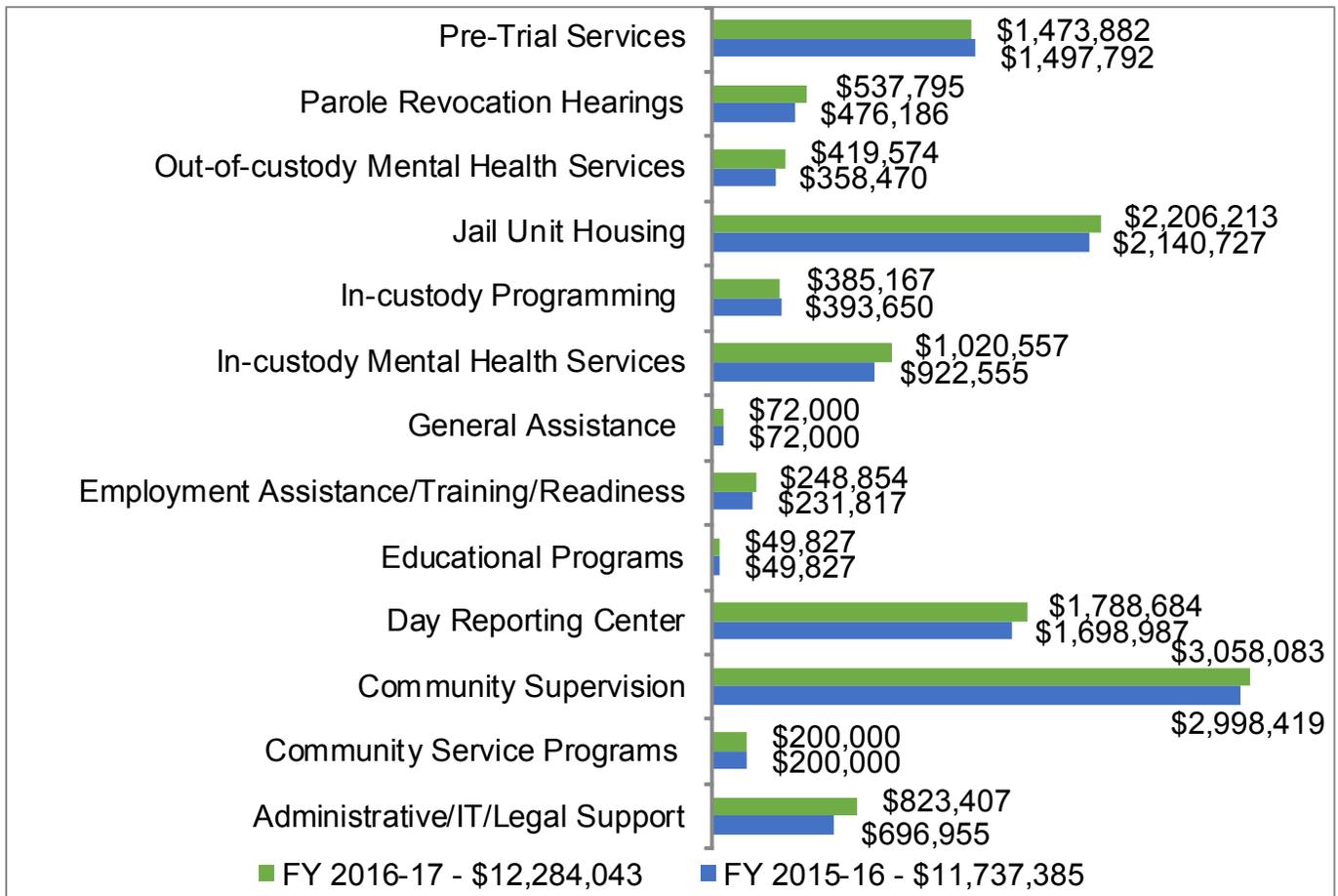
- Progress:**
- During calendar year 2015, the Department of Health Services (DHS) performed 6,287 mental health assessments of offenders prior to release from jail. During the same period, DHS provided post-custody contracted substance use services for 6,526 individuals and provided direct service to 195 individuals for substance use disorder treatment and mental health services.

FY 2015-16 and 2016-17 Budget Allocations

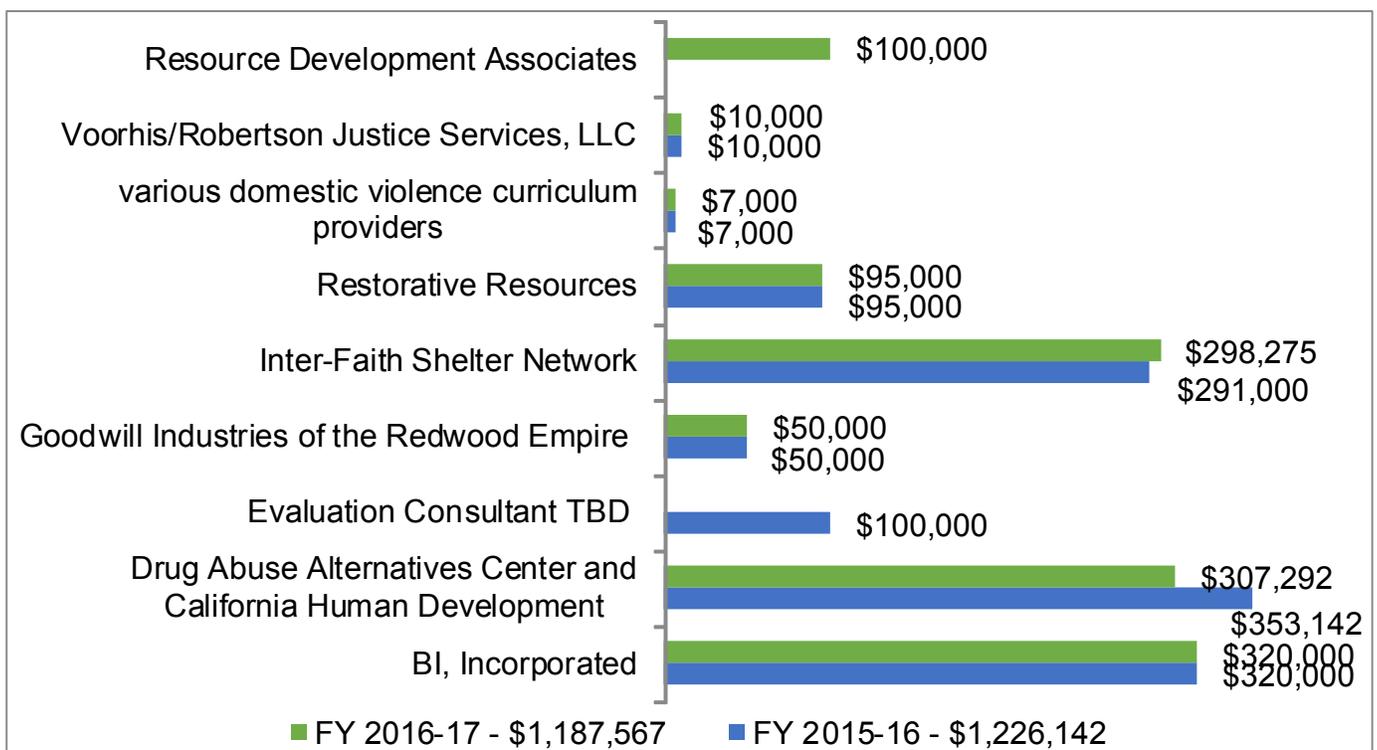


FY 2016-17 Reserve Funds \$2,600,884

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Following are examples of how Sonoma County evaluates the effectiveness of its Realignment-funded programs and services:

- As of FY 2015-16, all Realignment service contracts include outcome measures, data collection strategies, and data reporting plans. Annually, analysts meet with contractors to review compliance and gather data.
- The Day Reporting Center gathers and reports participant data such as class attendance, activities completed (e.g. substance use treatment, job search guidance, meetings with educational coordinators), and overall participant outcomes.
- The Human Services Department produces a monthly report of its Realignment-funded programs. The report includes items such as enrollment in CalFresh, Medi-Cal, County Medical Services Program, and CalWORKs. Quarterly, Human Services and Probation staff meets to review the report and discuss how to improve data collection and reporting.
- In February 2016, CCP's Data Management and Evaluation Subcommittee completed the prototype of a report that will provide various measures of recidivism, including rates of criminal referrals, complaints filed, and convictions during and following Post-Release Community Supervision and Mandatory Supervision sentences. The subcommittee is currently working with Sonoma County's Information Services Department to capture the necessary data.
- In July 2016, the CCP and Board of Supervisors selected a consultant to evaluate Realignment-funded programs. In early 2017, the consultant will deliver a scalable plan that the CCP can use to determine the type and scale of evaluation services to purchase. The consultant will evaluate programs with respect to how well they achieve their intended outcomes, how well they are implemented, and how cost-effective they are.

Does the county consider evaluation results when funding programs and/or services?

Yes. Prior to budget development, AB 109-funded departments and organizations present program results to the Detention Alternatives Subcommittee. Based on these presentations, the Subcommittee recommends following year funding at CCP's budget meetings.

In coming years, the new recidivism report and consultant evaluation mentioned in question 13 will inform funding decisions.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Conviction, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Sonoma County offers the following Realignment-funded services. Combined, these services amount to \$4,129,675 or 31% of Sonoma County's FY 2016-17 Realignment budget.

Day Reporting Center: The Day Reporting Center serves as the central point of evidence-based programming and structure for the realigned and felony probationers in the community. Services include cognitive behavioral intervention programs, life skills, vocational skills, and substance abuse treatment.

Jail Programs: The Sheriff's Office offers programs designed to help inmates in the following areas: addressing the root causes of criminal behavior; decreasing the high level of stress, tension, and violence that can occur within correctional facilities; supporting inmates in gaining the skills and knowledge they will need upon release to function as contributing members of society; and connecting released inmates to the Day Reporting Center and non-profit programs to provide continued support.

Starting Point Substance Use Disorder Services: Starting Point provides a means for offenders serving time and/or while waiting for a residential bed in the community to initiate drug and alcohol treatment. Behavioral Health counselors provide substance use disorder services in the jail to substance abusing inmates over the course of their incarceration. The program offers relapse prevention, anger management, life skills instruction, as well as a cognitive program designed to reduce criminal thinking, enabling participants to identify their destructive lifestyle, patterns of drug abuse, and criminal behavior. Evidence-based practices and other cognitive behavioral techniques are key components of the curriculum.

In-Custody Mental Health Services: The Department of Health Services provides mental health staff in the jail to assess any PC 1170(h) inmates who appear to need behavioral health services. Assessed inmates are subsequently referred to needed services. Upon release from custody, inmates who require follow-up services are referred to the embedded Probation team or to appropriate treatment providers.

PC 1370 Restoration Services: PC 1370 states that defendants found mentally incompetent shall have their trial or judgment suspended until they become mentally competent. If the defendant is found mentally competent, the criminal process shall resume and judgment may be pronounced. The PC 1370 team provides evidence-based interventions designed to restore defendants to competency so that they can participate in the legal process and have their cases adjudicated, thus reducing time spent in custody. The PC 1370 team intensively case manages and engages this high-risk population in treatment services while in custody and refers individuals to the appropriate out-of-custody mental health services when the case is resolved. Individuals who are not restored typically have their charges dropped with a resulting referral into services.

Domestic Violence 52-Week Course: The Probation Department contracts with certified local providers of mandated 52-week domestic violence programs to allow indigent offenders who pose a current safety risk to start counseling services. Offenders make a small co-payment, and funding covers the first four months of the program.

Community Mental Health Services: Behavioral Health staff embedded in the Probation Department provides mental health assessments and subsequently refers individuals to appropriate services. An Eligibility Worker assesses individuals who need mental health services to determine their eligibility for benefits (e.g., Medi-Cal, County Medical Services Program, Social Security Insurance, CalFresh, and related programs). A Psychiatrist determines medication needs and develops an initial medication plan.

Community Substance Use Disorder Services: The Department of Health Services assigns a Substance Use Disorder Specialist to work at the Probation office to assist with the assessment, referral, and case management of substance-abusing realigned offenders.

Substance Use Disorder Contract Services: The Department of Health Services contracts with local providers for residential and outpatient services for substance-abusing AB 109 offenders. Clients are referred to the appropriate service based upon clinical assessment. In FY 2015-16, Probation and Health Services expanded this program to include on-site outpatient services at the Day Reporting Center.

DUI Treatment Court: The Sonoma County Superior Court administers a multi-agency DUI Treatment Court program, which includes enhanced alcohol monitoring through continuous alcohol monitoring devices, weekly judicial reviews, intensive supervision by a Probation Officer, and targeted alcohol treatment services from contracted local providers. The DUI Treatment Court targets offenders with one or two prior convictions and first-time offenders who exhibit high-risk behaviors. The program uses a four-phase, graduated treatment program of counseling, drug testing, incentives, and sanctions.

What challenges does your county face in meeting these programming and service needs?

Sonoma County's primary challenge is lack of funding. There are current unmet needs, and CCP's FY 2016-17 budget is projected to overspend current-year AB 109 revenues by over \$2 million. We are pursuing grants and exploring program cuts to balance the budget.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In January 2015, the Probation Department took over operation of the Day Reporting Center (DRC) from a contractor. This change has improved rates of client participation, number of clients served, case coordination, data collection and reporting, and depth of programming, all without increasing the DRC budget. Clients report that the new DRC is providing them a safe, positive, and productive environment.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

1. As mentioned previously, Sonoma County's Day Reporting Center (DRC) is a promising program. Probation began operating the DRC in January 2015. As of September 30, 2016, 603 participants have begun coursework at the DRC, and 447 have terminated. Of these, 447 terminations, 54 have completed all required coursework, which takes approximately one year. An additional 100 individuals left the DRC due to transfer to another county or because their supervision period ended.

The remaining 293 individuals either absconded, were returned to custody, or were terminated due to non-compliance. Of these 293 individuals, 27% have returned to continue coursework. In addition to required coursework, the Health and Human Services departments, along with community-based organizations, provide an array of support services. Since January 2015, these services have included 150 sessions of GED preparation; 407 sessions with Job Link, Sonoma County's career center; 301 mental health/substance use disorder assessments; 581 sessions of outpatient substance abuse treatment; and 184 reviews of eligibility for financial and medical assistance programs. Sonoma County expects to report more rigorous outcome data in future CCP Surveys.

2. Sheriff and Probation facilities have embedded mental health and substance use disorder professionals from the Department of Health Services. In-custody services allow mental health staff to assess PC 1170(h) inmates who appear to need behavioral health services. Assessed inmates may subsequently be referred for medication evaluations. Inmates found to have substance use or mental health needs are referred to follow-up services. Upon release from custody, inmates who require follow-up services are referred to the embedded Probation team or to an appropriate treatment provider.

Under out-of-custody services, a Licensed Clinical Social Worker conducts mental health assessments for individuals referred by Probation staff and subsequently refers individuals to appropriate services. An Eligibility Worker assesses individuals who need mental health services to determine their eligibility for benefits (e.g., Medi-Cal, County Medical Services Program, Social Security Insurance, CalFresh, and related programs). A Psychiatrist assesses each individual's need for medications and develops an initial medication service plan. These embedded services help create system efficiencies, improve inter-departmental communication, and enhance offenders' access to needed services.

Community Corrections Partnership Membership
(October 21, 2016)

Jill Silva
Chief Probation Officer

Marie S. Silveira
Presiding judge or designee

Bill O'Brien
County supervisor or chief administrative officer or designee

Birgit Fladager
District Attorney

Tim Bazar
Public Defender

Adam Christianson
Sheriff

Galen Carroll
Chief of Police

Kathryn Harwell
Department of Social Services

Kristi Santos
Department of Employment

Richard DeGette
Department of Mental Health and Alcohol and Substance Abuse Programs

Tom Chagnon
Office of Education

Cindy Duenas
Community-based organization

Bal Sindal
Victims' interests

The CCP meets two to three times per year

Stanislaus County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Prevention - Definition: Invest in early intervention, education and prevention programs prior to criminal justice involvement and provide evidence-based programs to reduce recidivism.

Objective:

- Enhance prevention programs in schools regarding gangs and drugs.
- Create peer leadership programs in schools that model positive behaviors.
- Enhance evidence-based programs in our public safety institutions to change the criminal thought process.
- Add a family component to treatment services.
- Focus on stakeholders to determine what works, what support is needed, incentives.

Measure: • Being developed.

Progress: This sub-committee met in FY 15-16 to develop specific outcome measures and strategies. During the Fiscal Year it was decided to revise goals, outcomes and measures to follow the Results-Based Accountability Model being used in other areas of Stanislaus County including the task force addressing homelessness (listed below). Information gathered by this work group was used to inform a Request for Proposal that addressed prevention and evidence-based programs for FY 16-17.

Goal: Housing – For individuals that are homeless (county-wide).

Objective:

- Reduce the number of people experiencing homelessness.
- Reduce the average length of time someone is homeless.
- Increase the percentage of people who are homeless who access resources to improve their well-being.
- Increase the percentage of people who are homeless who are experiencing improved well-being.
- Improve the safety of parks and neighborhoods negatively impacted by people engaging in anti-social and criminal behavior who struggle with homelessness.
- Decrease the occurrences of public anti-social behavior committed by and towards people struggling with homelessness.

Measure: • Being developed.

Progress: The CCP sub-committee was folded into a county-wide task force focusing on homelessness to avoid a duplication of effort. This work group is currently meeting to further develop outcome measures, data points and strategies using the Results Based Accountability Model.

Goal: Increased Efficiency in the Public Safety System and Implement Effective Programs and Services.

Definition: Develop a more efficient public safety system with effective programs.

- Objective:**
- Asset mapping of available programs and stakeholders, determining gaps and benchmarking against other systems.
 - Evaluate data to determine most effective programs/systems in order to reduce recidivism and identify effectiveness of programs/systems.
 - Sharing data with stakeholders to develop in partnership most effective and cost efficient programs.

Measure:

- Being developed.

Progress: This work group originally formed and began to work on developing outcome measures, data points and strategies and subsequently moved to a Results Based Accountability Model in an effort to move towards a model consistent with other work being done in the county. See FY16-17 information.

Goals, Objectives, Outcome Measures and Progress FY 2016-17

Goal: Housing: 1) People who are homeless in Stanislaus County permanently escape homelessness; 2) People who are at risk of homelessness in Stanislaus County do not become homeless.

- Objective:**
- Reduce the # of people experiencing homelessness.
 - Reduce the average length of time someone is homeless.
 - Increase the % of people who are homeless who access resources to improve their wellbeing.
 - Increase the % of people who are homeless who are experiencing wellbeing.
 - Improve the safety of parks and neighborhoods negatively impacted by people engaging in anti-social and criminal behavior who struggle with homelessness.
 - Decrease the occurrences of public anti-social behavior committed by and toward people struggling with homelessness.

Measure:

- Being developed.

Progress: This workgroup is now a part of a larger countywide effort to address homelessness. Members of the work group now participate in monthly meetings to review data and implement strategies.

Goal: Prevention – Decrease offenders and their family members need for government assistance, gain financial stability and not enter or re-enter the criminal justice system, thus creating stronger and safer neighborhoods and communities.

- Objective:**
- Offenders and their family members become law abiding, experience higher education rates, employment rates, and experience an overall healthier lifestyle.

- Measure:**
- Increased graduation rates from high school/GED.
 - Improvement in school attendance/grades/reading levels.
 - Increased employment rates.
 - Increased household income.
 - Improved personal development.
 - Decreased family risk measures.
 - Residential stability.
 - Decreased arrest/re-arrest rates.

Progress: Committee has been trained on Results Based Accountability Model. Desired results, indicators and strategies have been developed. Data collection points are being developed.

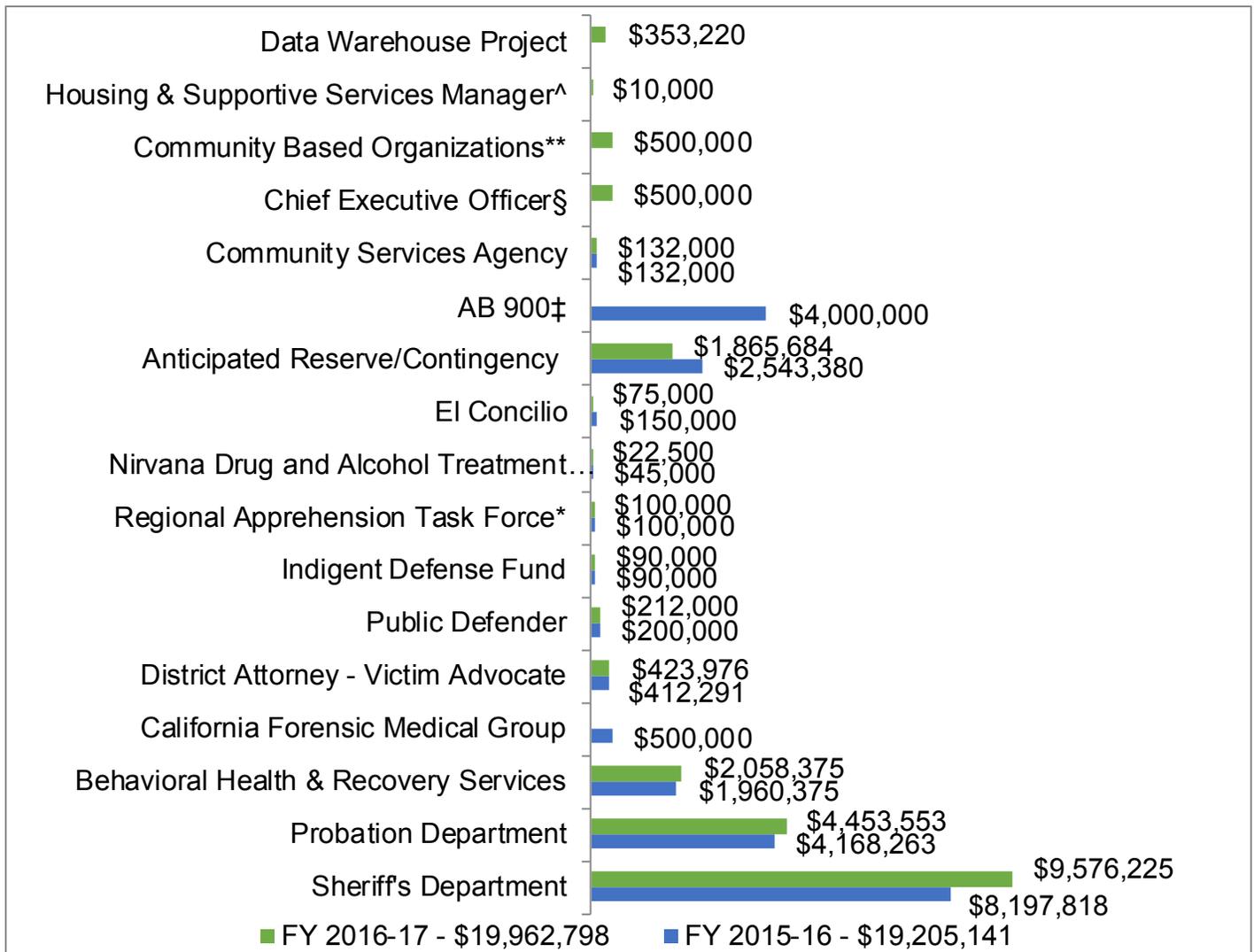
Goal: Increased Efficiency in the Public Safety System and Implement Effective Programs and Services.

Objective: • Reduce recidivism and increase pro-social attitudes in adult offenders who complete programming in-custody and/or at the Day Reporting Center.

- Measure:**
- # of offenders receiving a referral.
 - # of offenders who completed a program.
 - # of offenders satisfied with the program.
 - Was the group information and content clear and understandable.
 - # of offenders with a clear plan of action upon completing a program.
 - Did we treat them well.
 - Did we help them with their need.
 - % of offenders who completed a program that did not recidivate.
 - % of offenders reporting they have the skills and knowledge to improve their lives.

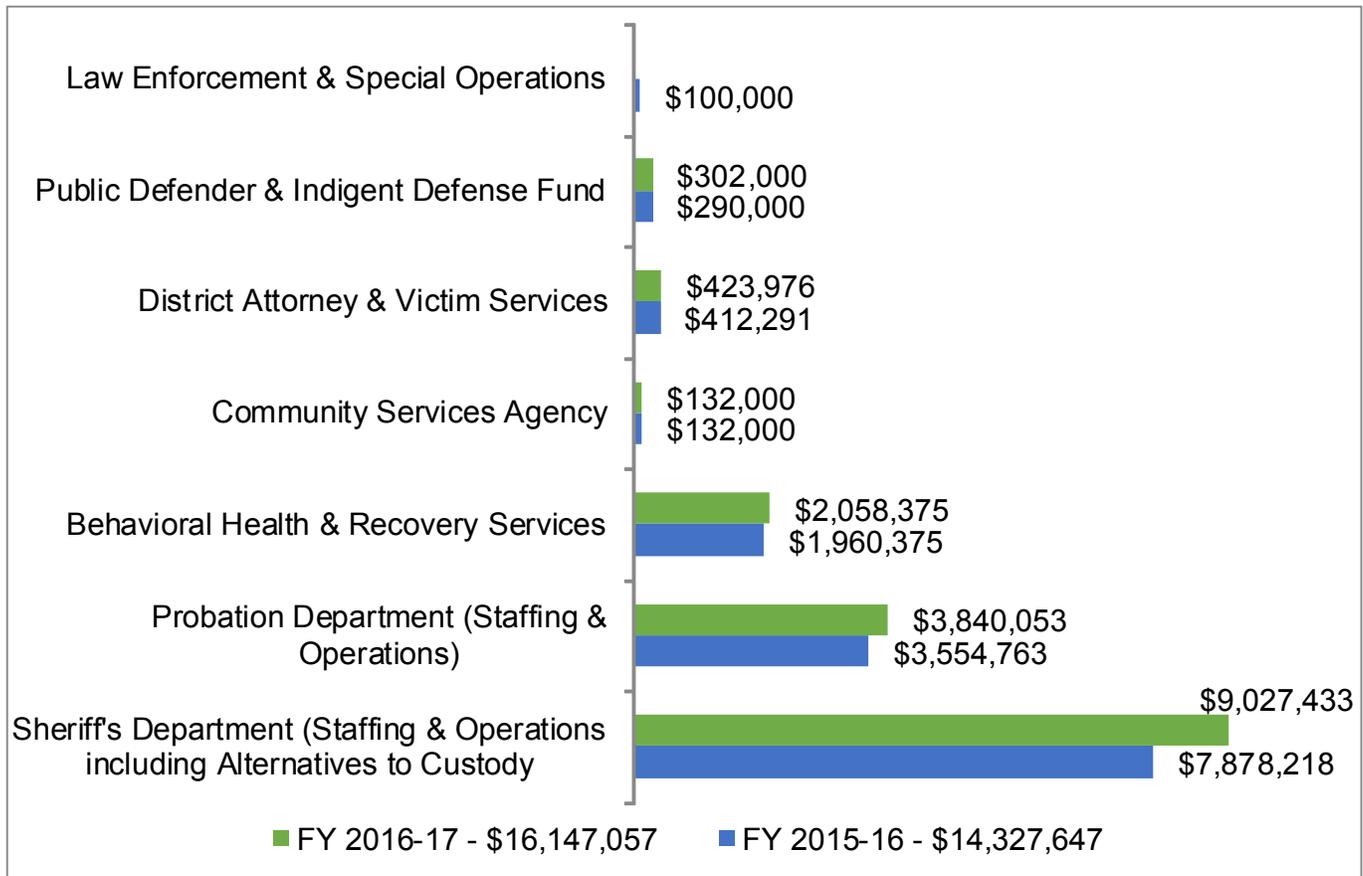
Progress: Committee has been trained on Results Based Accountability Model. Desired results, indicators and strategies have been developed. Data collection points are being developed.

FY 2015-16 and 2016-17 Budget Allocations

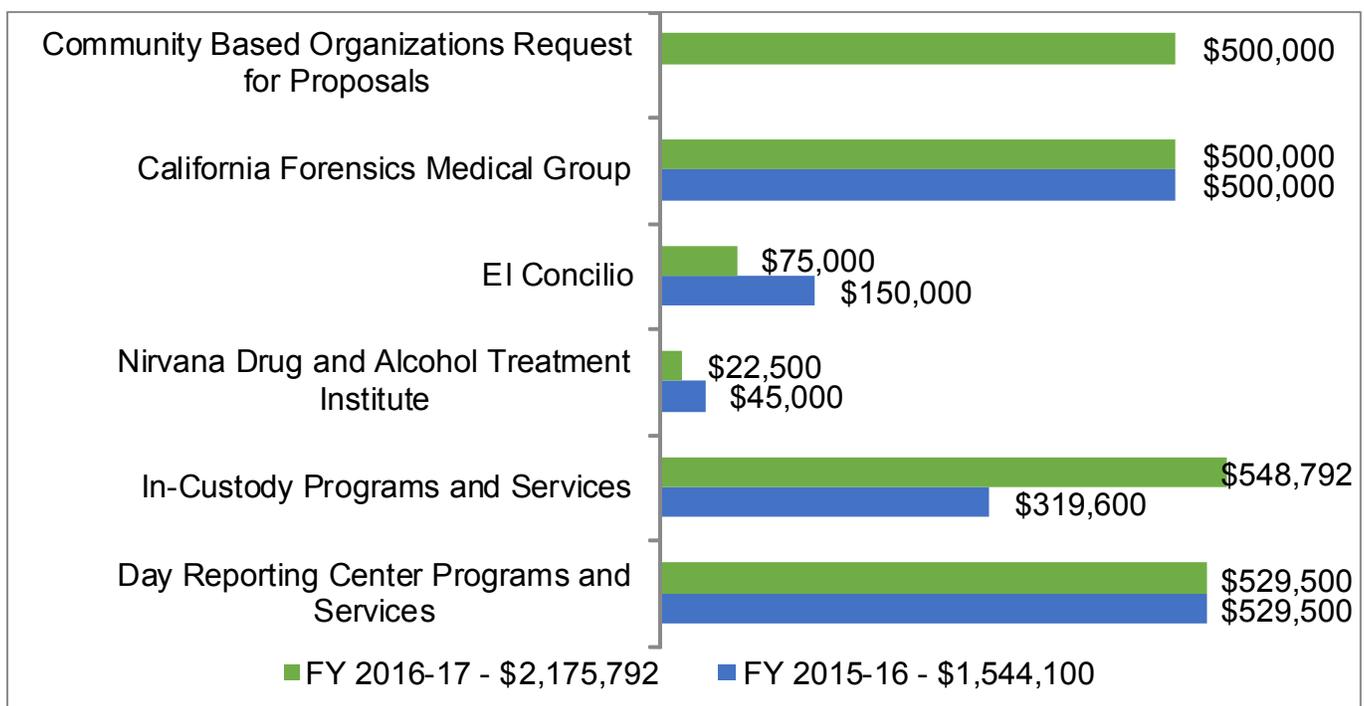


* Local Law Enforcement; ** Request for Proposals; ^ Chief Executive Officer; ‡ Set aside for new facility program and operations; § California Forensics Medical Group

FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The CCP is currently contracting with a crime analyst with our largest city police agency to evaluate crime data. The crime analyst has completed one full report evaluating the impacts of Proposition 47. She is now in the process of evaluating the effectiveness of the Day Reporting Center by focusing on recidivism data for program participants.

Does the county consider evaluation results when funding programs and/or services?

Yes. Funded programs are required to provide process and performance outcomes during the planning phase for the upcoming year. The county recently went to a formal RFP process for community based organizations. The RFP process has built in performance indicators to evaluate program effectiveness.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41% 60%

We would like to better understand your 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?

Through our county mental health department, we have expanded existing mental health and substance abuse treatment programs. Various levels of treatment are being provided. The following summarizes the expanded level of services.

Behavioral Health & Recovery Services (BHRS) received funding to provide treatment for substance use disorders (SUD) to inmates released from local detention facilities and adult parolees under the jurisdiction of County Probation. Services include assessment, referral and linkage, and treatment at the Day Reporting Center (DRC). Treatment at the DRC follows an Intensive Outpatient Treatment (IOT) model consisting of a minimum 9-hour a week of programming, offered in 3-hour sessions, 3 days a week. Individuals are also met with at least once a month for individual counseling and are frequently drug tested.

To improve outcomes for this difficult to engage population, the staff have been trained in the following evidence-based practices: (1) Moral Reconciliation Therapy (MRT) and (2) Motivational Interviewing. The core IOT programming centers around 26 topics identified to be fundamental in the treatment of substance use disorders.

Behavioral Health & Recovery Services (BHRS) also received funding to provide mental health services to inmates released from local detention facilities and adult parolees under the jurisdiction of County Probation. Services include assessment and treatment for behavioral health needs.

Once enrolled, the IFT-CC program provides three levels of care: (1) Full Service, (2) Intensive Community Support, and (3) Wellness. Depending on identified needs, all participants receive outreach and engagement services, with appropriate linkages to community resources and/or treatment services. The Full Service and Intensive Community Support levels include medication services, access to groups, peer supported programming, case management, rehabilitation services, individual therapy, and limited employment / housing support services. The least intensive level, Wellness, is primarily focused on administering, dispensing, and monitoring of medications. Comparatively, Full Service offers the highest level of care, has the smallest staff-to-client ratio, and is accessible 24/7.

To improve outcomes for this difficult to engage population, the program utilizes the following evidence-based practices: (1) Moral Reconciliation Therapy (MRT), (2) Seeking Safety, (3) Assertive Community Treatment, (4) Motivational Interviewing, and (5) Strength Based Case Management.

Behavioral Health & Recovery Services (BHRS) received funding to provide mental health services to inmates serving time at the County jails. Services include assessments for behavioral health needs. Once enrolled, the Detention - Mental Health program offers individual therapy and group therapy based on appropriateness and need. The primary objective of the program is to ensure that needs of inmates diagnosed with serious mental illness (SMI) are identified, engaged, and treated while incarcerated, while creating a safer in custody environment for everyone. Additionally, beginning engagement and treatment of individuals while still in custody helps facilitate the connection to outpatient programs with the hope of reducing recidivism and contributing to a healthier and safer community.

To improve outcomes for this difficult to engage population, the program utilizes the following evidence-based practices: (1) Moral Reconciliation Therapy (MRT), (2) Seeking Safety, and (3) Motivational Interviewing.

What challenges does your county face in meeting these programming and service needs?

We are experiencing challenges in providing residential substance abuse treatment. We have waiting lists for this type of programming. We recently identified increased heroin addiction within the county. Through a new RFP process we hope to increase this type of treatment.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We have a full service Day Reporting Center that serves as the hub of our out of custody programs. The Sheriff's Office is in the process of constructing a Re-entry facility that is located at the same public safety complex and will mirror programs offered at the DRC. Offenders will begin programs at the Re-entry facility and transition to the DRC upon release. Offenders attending the DRC that require short stays in custody can continue their programs at the Re-entry facility.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

Community Corrections Partnership Membership
(October 21, 2016)

Donna Garcia
Chief Probation Officer

Stephanie Hansel
Presiding judge or designee

Jim Whiteaker
County supervisor or chief administrative officer or designee

Amanda Hopper
District Attorney

Mark Van Den Huevel
Public Defender

J. Paul Parker
Sheriff

Rob Landon
Chief of Police

Nancy O'Hara
Department of Social Services and Department of Mental Health

Rinky Basi
Department of Employment

Tony Hobson
Alcohol and Substance Abuse Programs

Baljinder Dhillon
Office of Education

Ed Anderson
Community-based organization

Tony Kildare
Victims' interests

The CCP meets three times per year

Sutter County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide employment services to out-of-custody supervised offenders at the Probation Department.

Objective: • 40% of referred offenders will obtain employment.

Measure: • Number of offenders who obtained employment through the Probation Department's employment services.

Progress: In FY 2015-16, ninety-one supervised offenders were referred by probation officers for Employment Services in the Probation Resource Center. Of those 91, thirty offenders, or 33%, were successful in securing employment. While this percentage is higher than progress reported for FY 2014-15, the total number of referrals decreased from 99 to 91, with the same number of offenders obtaining employment, which was 30 for each year.

Goal: Provide adult education services in the jail to in-custody offenders.

Objective: • 80% of jail inmates will be offered adult education services while in-custody during the fiscal year.
• An average of 15% of jail inmates will participate in education services while in-custody during the fiscal year.

Measure: • How many jail inmates were offered the option of attending adult education services while in custody.
• The number of jail inmates who participated in adult education services.

Progress: The average monthly jail inmate population for FY 2015-16 was 280.25. Education services are not offered to inmates housed in single cell units due to classification issues or crime sophistication. There are 52 beds in those units. Additionally, inmates in holding cells are also not available to participate in education services, bringing the total to about 58 inmates who are not offered education services, which translates to 20.7% of the total average population. The average number of eligible jail inmates who participated monthly in jail education services for FY 2015-16 was 68.5. Therefore, approximately 30.8% of the average monthly population of eligible inmates participated in jail education services.

Goal: Maximize probation treatment services for out of-custody offenders who are referred for treatment.

Objective: • Increase the number of referred offenders who complete assessment and engage in services by 10%.

Measure: Number of offenders who were assessed and became engaged in CHOICES or Recovery Basics treatment services in the Probation Department's Resource Center.

Progress: In FY 2014/15, a total of 160 supervised offenders were referred to the Probation Department's CHOICES and Recovery Basics outpatient substance abuse programs. Of those 160 offenders, 42% (67 offenders) completed assessment and engaged in services. In FY 2015/16, a total of 185 supervised offenders were referred for these services. Of those 185 offenders, 52% (96 offenders) completed assessment and engaged in services. Therefore, the goal to increase the number of out-of-custody offenders to complete substance abuse program assessment and engage in services by 10% was met with an overall increase of 23.8% in 2015/16 over 2014/15.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Provide employment services to out-of-custody supervised offenders at the Probation Department.

Objective: • 40% of referred offenders will obtain employment in FY 2016-17.

Measure: • Number of referred offenders who obtain employment through the Probation Department's employment services program.

Progress: In progress.

Goal: Increase the completion/graduation rate of the probation department's CHOICES outpatient substance abuse program in FY 2016-17.

Objective: • Increase the number of client graduations in the probation department's CHOICES program by 5 over the previous year's total number of graduates.

Measure: • The number of CHOICES program graduates over FY 2015-16's graduation total of 14.

Progress: In progress.

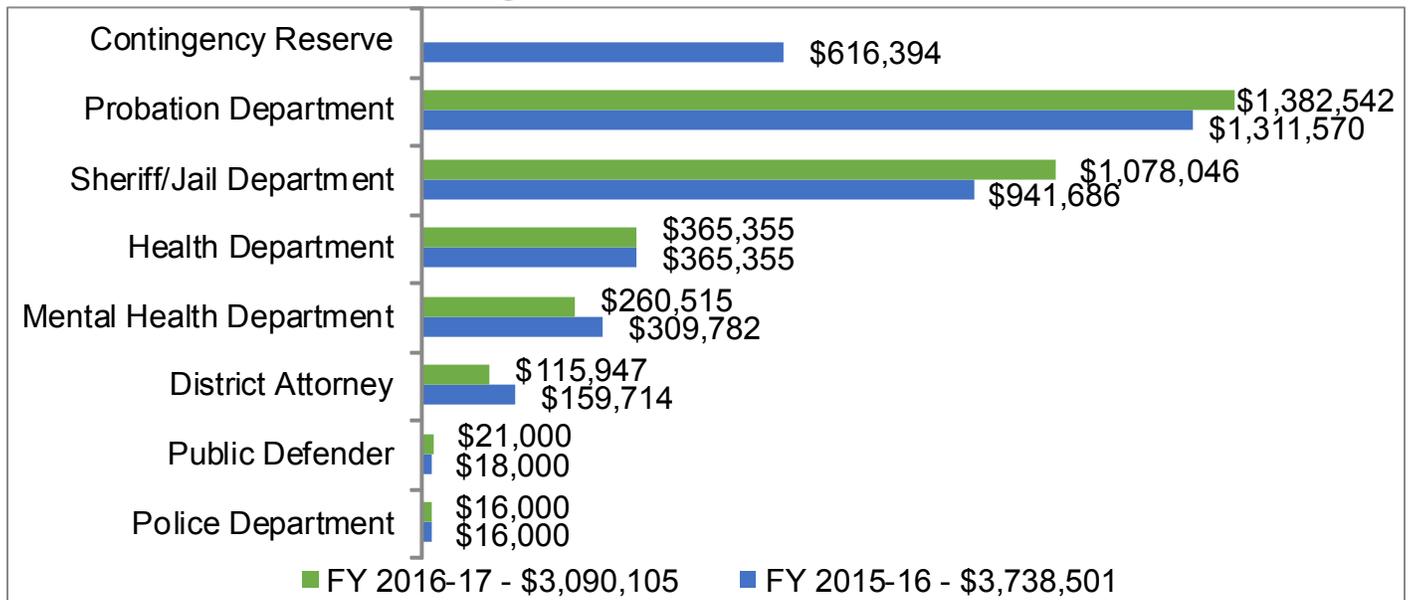
Goal: Expand Pretrial Services release options.

Objective: • Implement Electronic Monitoring in the Probation Department's Pretrial Services Program as an additional release option.

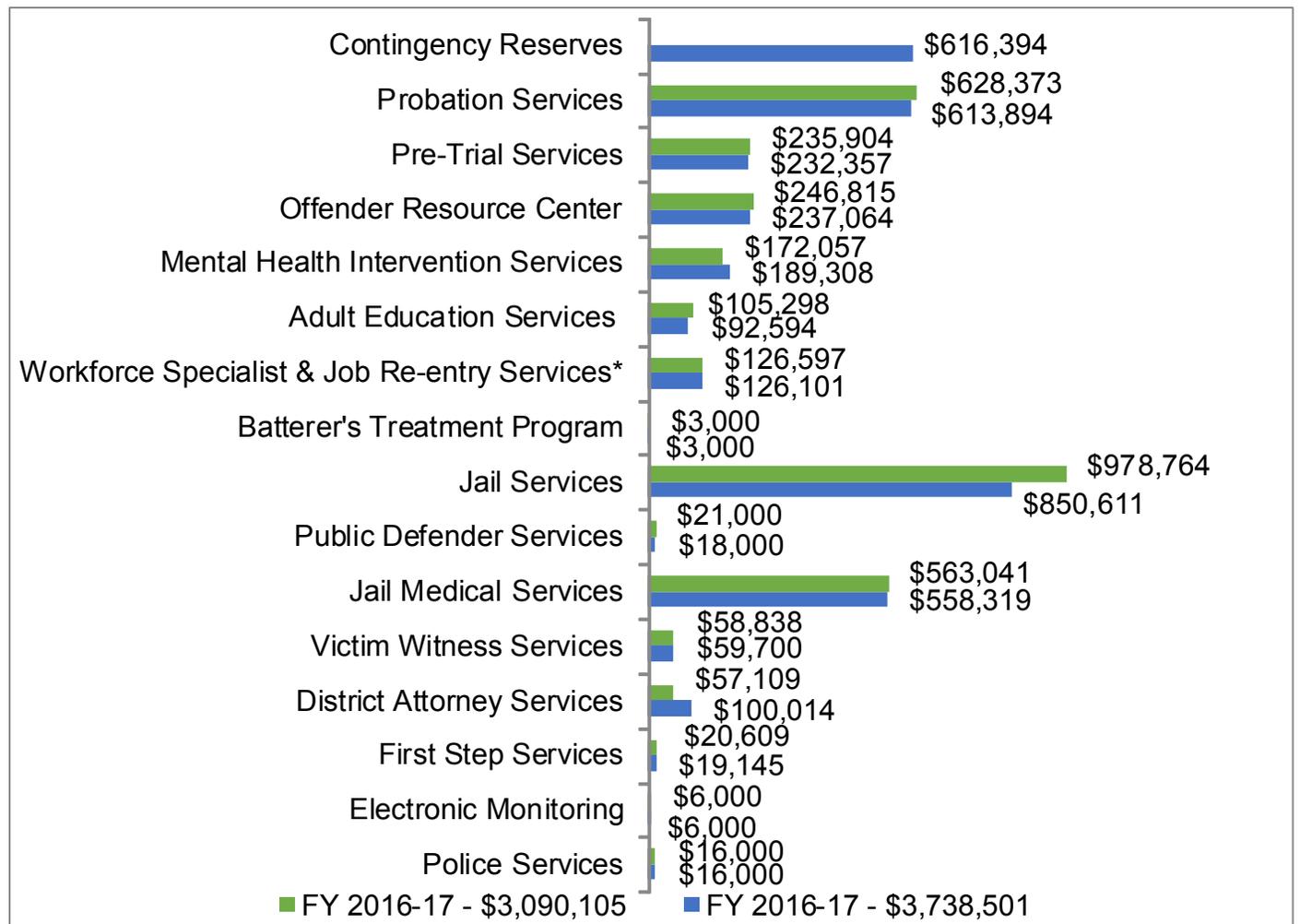
Measure: • The Probation Department's Pretrial Services Officers work with the Sheriff's Department to expand and implement electronic monitoring for pretrial offenders as an additional supervision option for offenders released by the Court in the Pretrial Services Program.

Progress: In progress.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



*WEX, OJT

FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county did not provide information on Non-Public Agencies receiving allocations.

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Sutter County continues to define program effectiveness by evaluating program completion and/or other positive outcomes including attainment of educational goals, employment, engagement in therapeutic or mental health services and successful completion of supervision without recidivating. In FY 2015-16, the CCP renewed its contract with a full time data analyst who collects data for the involved departments and agencies and reports out to the CCP members at the regularly scheduled meetings. The Probation Department also employs a Supervising Probation Officer who supervises the programs unit in the department and who collects data related to the programs and services offered and delivered by programs and treatment staff to in-custody and out-of-custody adult offenders.

Does the county consider evaluation results when funding programs and/or services?

Yes. In FY 2014-15, changes were made to the number of hours an adult education instructor was contracted to teach based on the number of referrals from probation officers to those services for out-of-custody adult offenders. The probation department has continued to monitor the need for this service and currently contracts with the Sutter County One Stop for an adult education teacher to provide 18 hours of instruction per week, which continues to meet the current needs of the department. The department will continue to monitor the number of referrals made so that if changes are needed, adequate resources are included in the CCP budget for next FY to provide services that meet the needs of the supervised offenders. In addition, the probation department continually monitors the need to increase or decrease the number and types of substance abuse and behavior modification programs offered at the department and in the jail to meet current need based on assessment data and referrals to these programs.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

21% 40%

We would like to better understand your 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?

Currently, Sutter County offers the following programs and services:
Outpatient treatment programs, at the Probation Department and through the Behavioral Health Department, are offered for moderate and high risk offenders. These programs utilize the Matrix substance abuse curriculum, and Moral Reconciliation Therapy (MRT) for behavior modification.

There is a mental health therapist housed at the Probation Department as part of the Innovations grant to provide behavioral health services to clients who are incarcerated, and to also continue those services upon their release to supervision. Realignment funds were included in the CCP budget for FY 2015-16 for a mental health therapist to be housed in the jail to assess offenders suspected or known to have mental health needs when they are initially booked into custody, however, that position was vacant for part of the FY after the therapist left the position. The Probation Department continues to offer Batterers Treatment programming to moderate and high-risk offenders, and in FY 2015-16, four additional probation officers were trained in Domestic Violence (DV)-MRT to provide these services to out-of-custody offenders. Realignment funds also pay for two part-time adult education teachers, one at the jail and the other housed at the Probation Department, and a full-time Workforce Specialist also housed at the Probation Department as part of the Resource Center. A variety of ancillary programs continue to be offered, including Functional Family Therapy (FFT), Seeking Safety, Courage to Change journaling program, and Coping with Anger. For the low risk/high drug and alcohol need offenders, the Probation Department offers the Recovery Basics program. For in-custody offenders, Intervention Counselors provide MRT, Coping with Anger and Peer Relationships to male and female populations.

What challenges does your county face in meeting these programming and service needs?

An ongoing challenge for our county to provide programs and services to in-custody offenders is limited meeting space within the jail to hold the variety of programs that could ideally be offered. We currently provide the opportunity for sentenced inmates to attend adult education classes, but these classes are not offered in every area of the jail due to classification issues. We also provide MRT (Moral Reconciliation Therapy) groups in custody, however, we are limited in the number of groups we can offer due to scheduling conflicts in the meeting spaces that currently exist. Our county is in the process of expanding the jail facility which may mitigate this issue somewhat.

We also are challenged to provide transitional housing to our offenders as there are limited affordable housing options available in our area. The issue of homelessness is one that our county leaders have taken up recently and, hopefully, viable and sustainable solutions will be found soon.

Access to local evidence-based programs training continues to be an obstacle for CCP agencies and departments as well. The lack of local program training results in higher costs and the delay of services when needed training is unavailable. This past year the Probation Department hosted Correctional Counseling, Inc. (CCI) training for staff to be trained in DV-MRT. The training was well-attended by staff from surrounding county agencies and filled a great need in our area. Absent hosting the training ourselves, probation officers would have had to go out of state for the training, resulting in a much greater cost with fewer officers trained in the curriculum.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In FY 2015-16 the Probation Department made a course correction in response to the need for increased dosage for in-custody offenders who were participants in the MRT and other programming offered in the jail. Because of the relatively short length of jail sentences for some offenders, holding groups only one session per week became a barrier for offenders to complete while in-custody as they were not in custody long enough to attend the entire program.

For those offenders who were released to probation for continued supervision, this situation was not as much of a barrier, however, for those inmates who were released without subsequent supervision, access to programming was affected as many inmates would not have enough time in custody to complete programs. Inmates have the opportunity to participate in these jail programs only post-sentence. In order to increase the availability of programs in this environment, the Probation Department responded by increasing group sessions to twice per week instead of once per week, especially in the more transient classification units of the jail. So far, it seems this adjustment has been a good resolution for this issue.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

Community Corrections Partnership Membership
(October 21, 2016)

Richard A. Muench
Chief Probation Officer

Lore Chrasta
Presiding judge or designee

Dennis Garton
County supervisor or chief administrative officer or designee

Gregg Cohen
District Attorney

Christopher Logan
Public Defender

Dave Hencratt
Sheriff

Kyle Sanders
Chief of Police

Amanda Sharp
Department of Social Services

Vacant
Department of Employment

Valerie Lucero
Department of Mental Health & Alcohol and Substance Abuse Programs

Rich DuVarney
Office of Education

Vacant
Community-based organization

Linda Lucas
Victims' interests

The CCP meets quarterly

Tehama County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Provide Moral Reconciliation Therapy (MRT) for all PRCS and mandatory supervision offenders.

Objective:

- 100% of participants will be assigned to MRT.

Measure:

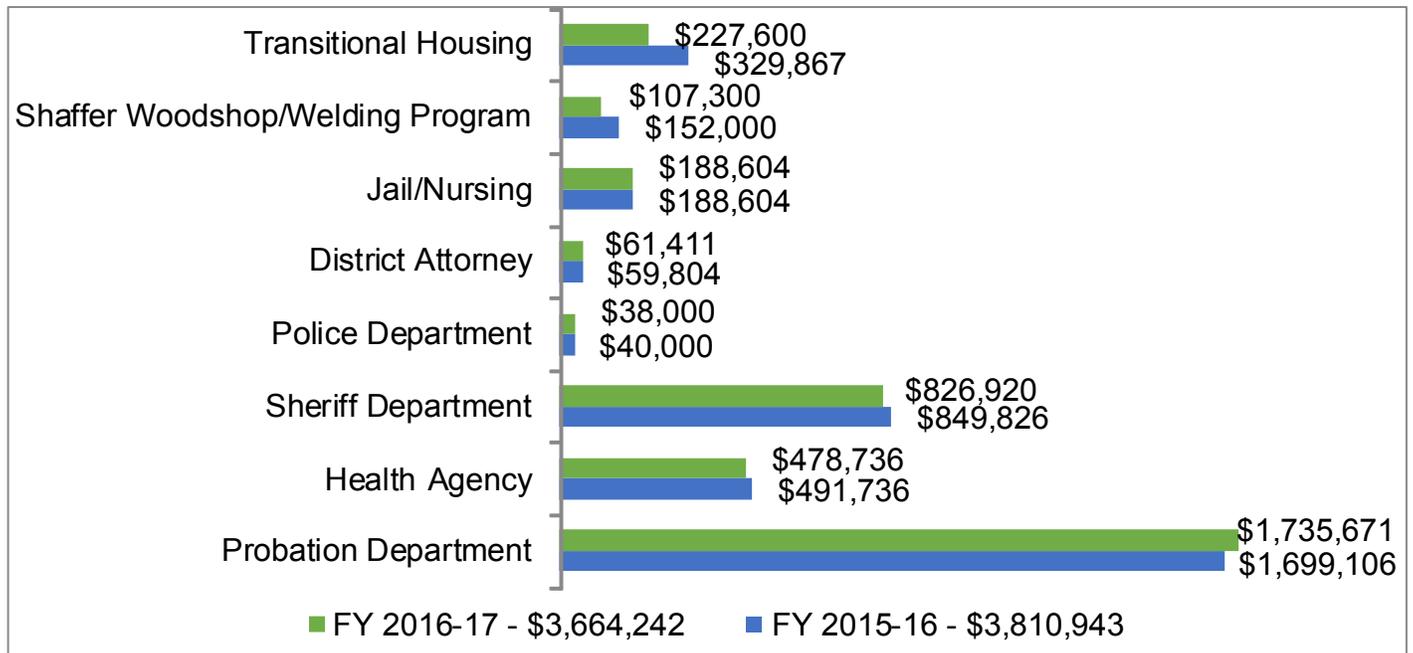
- Number of participants completing MRT.
- Number of MRT graduates and successfully completing with three years without reoffending.

Goals, Objectives, Outcome Measures and Progress

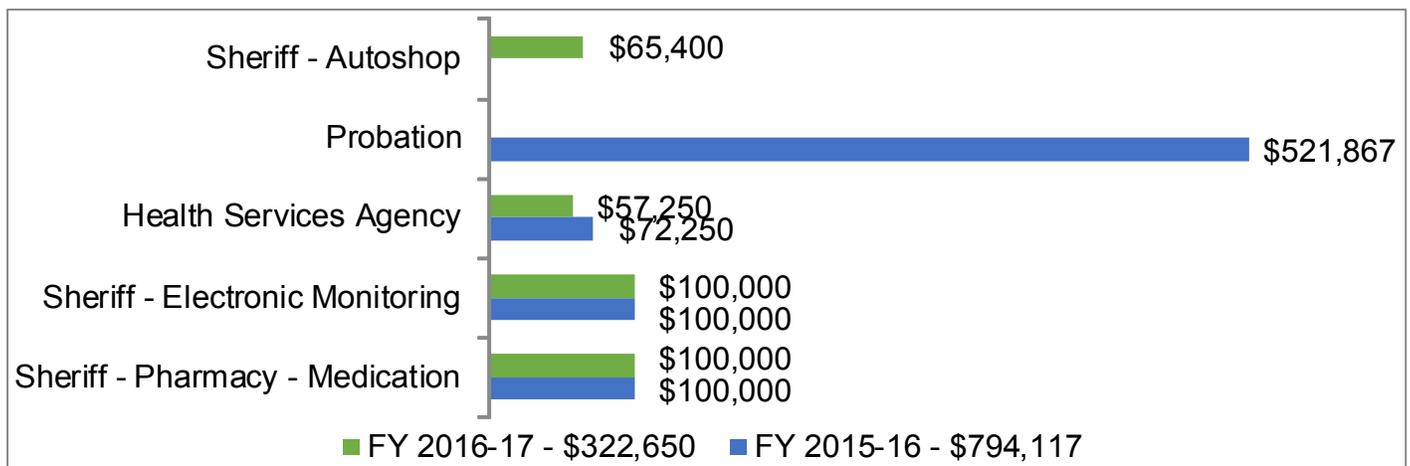
FY 2016-17

Goal: In February of 2017, Tehama County has contracted for Technical Assistance to look at system wide process and establish goals and outcome measures.

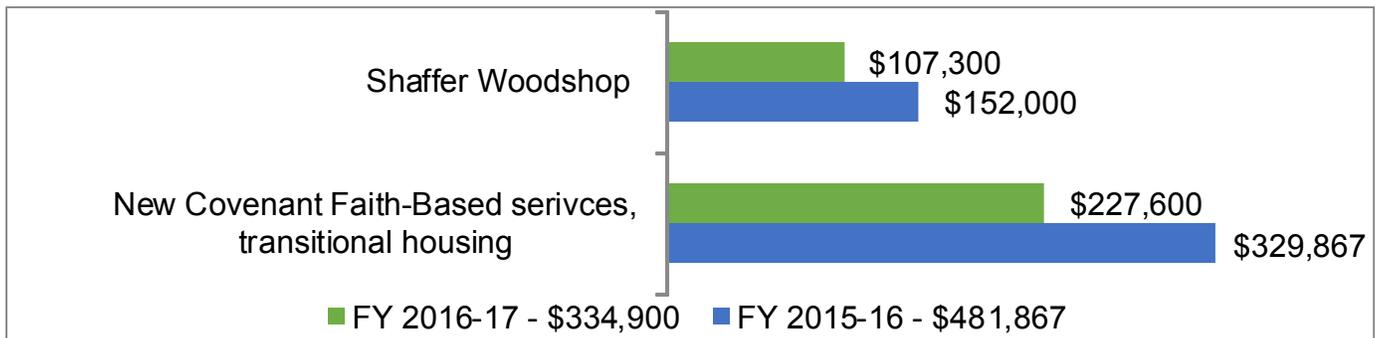
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41% 60%

We would like to better understand your 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?

Drug Courts and Behavioral Health Court currently exist.

What challenges does your county face in meeting these programming and service needs?

Ongoing funding for both courts have been reduced.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Work programs, cognitive behavior change systems, transitional housing, and ongoing treatment and compliance.

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**Community Corrections
Partnership Membership**
(October 21, 2016)

Hal Ridlehuber
Chief Probation Officer

Mike Harper
Presiding judge or
designee

Karl Fisher
County supervisor or
chief administrative
officer or designee

Eric Heryford
District Attorney

Larry Olsen
Public Defender

Bruce Haney
Sheriff

Vacant
Chief of Police

Letty Garza
Department of Social
Services

Vacant
Department of
Employment

Noel O'Neill
Department of Mental
Health

Anne Lagorio
Alcohol and Substance
Abuse Programs

Bettina Blackwell
Office of Education

Caedy Minoletti
Community-based
organization

Vacant
Victims' interests

The CCP meets quarterly

Trinity County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Improve success rates of AB 109 offenders.

- Objective:**
- Maintain low recidivism rates.
 - Reduce victimization.
 - Increase community safety.

- Measure:**
- Implement a streamlined and efficient system in the County of Trinity to manage additional responsibilities under Realignment.
 - Implement a system that protects public safety and uses best practices in recidivism reduction.
 - Implement a system that effectively uses alternatives to pre-trial and post-conviction incarceration, where appropriate.

Progress: Recidivism rates remain low with this population due to collaborative endeavors and an increased use of evidence-based case management efforts between all stakeholder agencies. The design and implementation of our new Reentry Program has created both a more streamlined, efficient system in our county, as well as better addresses the criminogenic needs of the clients served. The personal-level contact and service delivery from this team lasts from the first meeting while still incarcerated to the final steps leading towards case completion, and is something that fits well in a frontier-sized county such as ours. Additionally, other tools used that work concurrently in meeting this goal include the continued use of our pre-trial assessment instrument, along with GPS monitoring.

Goal: Design and implement a new Reentry Program Improvement Project.

- Objective:**
- Early engagement with our clients when possible.
 - Comprehensive case planning (shared goals and strategies between the partnering agencies).
 - Dosage relative to the stage of re-entry. Creative incentives and rewards interrelated with the re-entry stage and performance towards meeting case plan goals.

- Measure:**
- Complete the new Reentry Program Improvement Project design.
 - CCP to fund additional positions with Sheriff, Behavioral.
 - Meet early engagement goal by sending our AB 109 team to the prison to transport client back to county upon release from custody and begin the case planning.

Progress: Completed and implemented our new Reentry Program and funded three (3) additional positions (a Sheriff's Deputy, Substance Abuse Counselor, and a Program Coordinator with our local CBO) to enhance services that seek to meet the objectives above through improved engagement with clients, comprehensive and coordinated case planning between agencies, better defined dosage relative to a person's stage in the reentry process, and improved access to treatment, housing, and employment services.

Goal: Expand Transitional Housing Program.

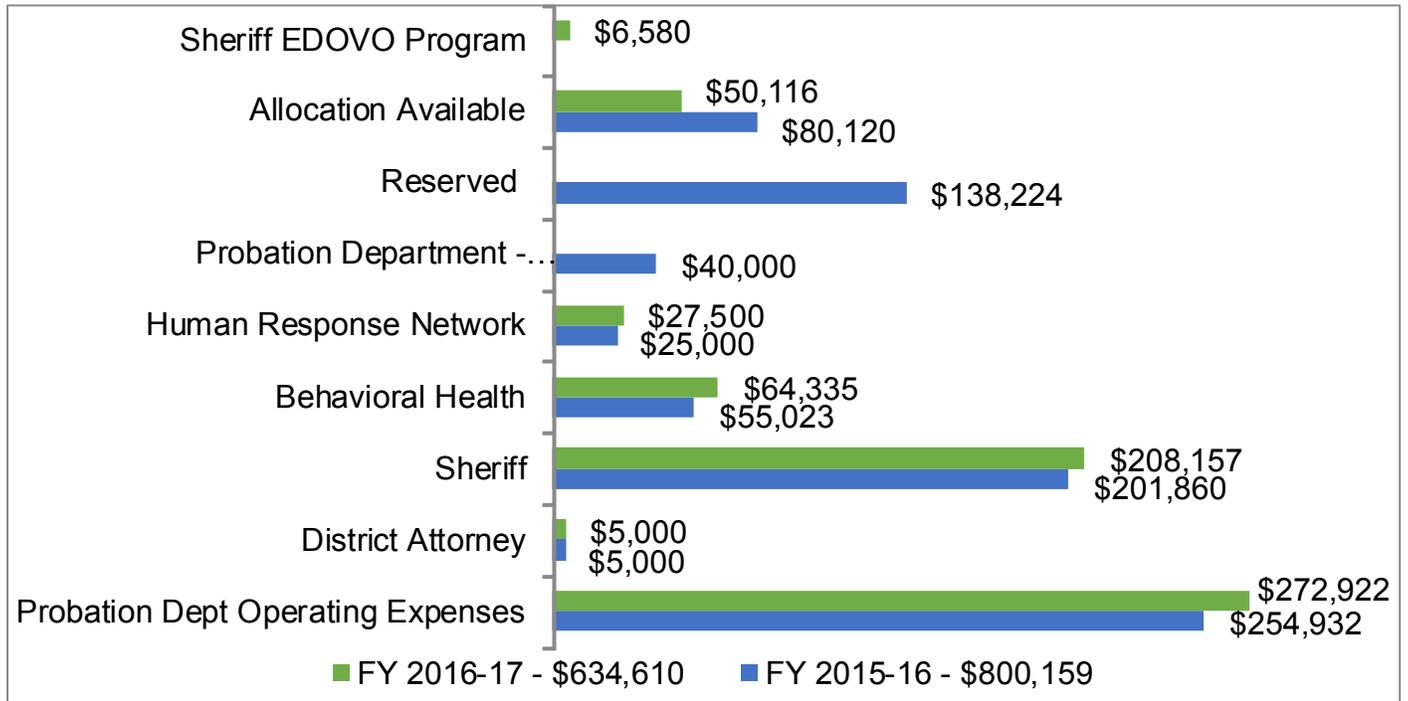
- Objective:**
- Increase availability of transitional housing with case management services.
 - Provide stability to clients upon re-entry to community.
 - Case manager connects clients to appropriate services upon re-entry to community.

- Measure:**
- Increase funding to Human Response Network to meet goal.
 - Place otherwise homeless clients into transitional housing with case management services coordinated by Human Response Network staff.

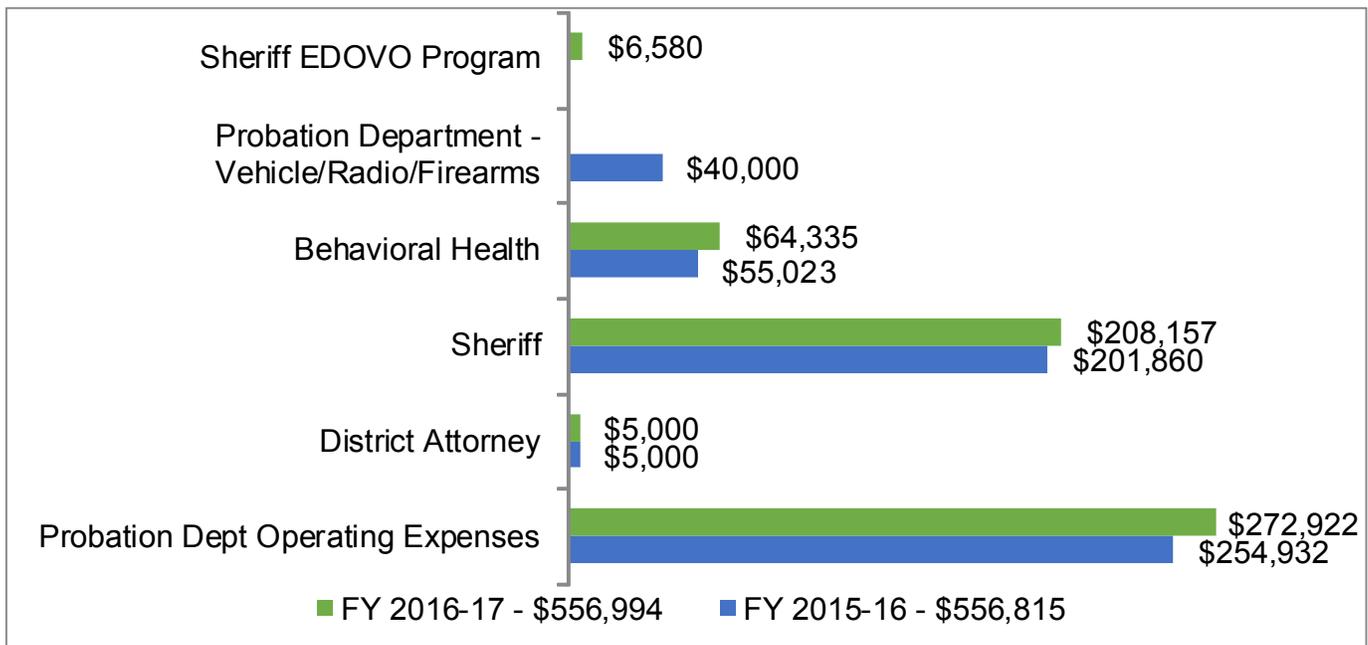
Progress: Good progress has been made. CCP increased funding to Human Response Network which provided additional transitional housing and funding for a half-time case manager.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- FY 2015-16, \$25,000 was allocated to the Human Response Network
- FY 2016-17, \$27,500 was allocated to the Human Response Network

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. With the full implementation of the Re-entry Program Improvement Project at the beginning of this fiscal year, Trinity County will compare recidivism rates to evaluate the effectiveness of our new enhanced programming and services with this population. Additional evaluations will continue as before including Behavioral Health program completion rates, successful completions of Post-Release Community Supervision (PRCS) supervision rates, flash incarceration and full revocation rates, and clients receiving transitional housing and case management services.

Does the county consider evaluation results when funding programs and/or services?

Yes. Yes, the CCP utilizes both program-level data as well as data from outside sources relative to reentry programming to identify the programs and services that produce the best outcomes, and will adjust funding accordingly.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61% 80%

We would like to better understand your 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?

- Trinity County Behavioral Health Services (TCBHS) offers Mental Health and Alcohol and Other Drug Services (AODS).
- Mental Health offers outpatient assessment, treatment by licensed clinicians and APA Board certified psychiatrists, both in person and via telemedicine.
- AODS provides assessment, outpatient treatment and Moral Reconciliation Therapy™ (MRT™) at BHS and in the jail by state certified counselors.
- AODS and MH administer evidence-based programs and practices, such as Cognitive Behavioral Therapy (CBT), MRT™, Seeking Safety and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).

What challenges does your county face in meeting these programming and service needs?

In addition to a lack of funding and staffing resources, Trinity County only has one CBO operating in the county which places much greater responsibility on the core AB109 Team to provide required services and programming to this population. Absent current AB109-related funding, coordinated and comprehensive reentry services might be impossible.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

AODS has added a dedicated AB 109 Substance Abuse Specialist I, now funded 100% by CCP Growth dollars, to join Probation Officer to do outreach, pick up PRCS clients at release, immediately engage in services and provide case management linkage and transportation to other services, including AODS, mental health (MH) and primary health care and general social services such as housing, benefits, food support, vocational and education support, etc.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

While it's too early to compare results, our county is small enough to bring the entire AB109 Team together to meet personally with clients both returning from prison as well as being released from jail after receiving a flash incarceration. This function was put into place with the adoption of our new Reentry Program and seeks to overcome the lack of other community-based services in a county our size. Additionally, this team can also serve as an interim step to re-incarceration when there is evidence that corrective case planning can achieve re-engagement by a client who is in non-compliance with terms and conditions of supervision. Lastly, programmatic incentives were put in place to assist clients in meeting program goals including things such as GPS monitoring during the first stage of reentry that's tied to completion of a case plan intervention strategy such as engaging with AODS services, rather than just for a specific period of time. This motivates clients to quickly meet these initial goals at the most critical stage in the reentry process.

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**Community Corrections
Partnership Membership**
(October 21, 2016)

Christie Myer
Chief Probation Officer

LaRayne Cleek
Presiding judge or
designee

Michael Spata
County supervisor or
chief administrative
officer or designee

Timothy Ward
District Attorney

Lisa Bertolino-Meuting
Public Defender

Mike Boudreaux
Sheriff

Jason Salazar
Chief of Police

Dr. Cheryl Duerksen
Department of Social
Services

Adam Peck
Department of
Employment

Dr. Timothy Durick
Department of Mental
Health

Jason Britt
Alcohol and Substance
Abuse Programs

Jim Vidak
Office of Education

**Mary Escarsega-
Fechner**
Community-based
organization

Daniel Underwood
Victims' interests

The CCP meets quarterly

Tulare County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Develop a seamless continuum of care from incarceration to probation supervision and/or completion of straight commitment.

- Objective:**
- Allow offenders to begin/complete court-ordered or other needs-driven.
 - Provide offenders with release incentives based on participation and positive behavior.
 - Provide a custodial experience that promotes

- Measure:**
- Develop a complete treatment/program outline, including costs, by February 2, 2016.
 - Re-tool the existing Jail Transition Team into a multi-disciplinary team (MDT) with additional participants by April 1, 2016.
 - Develop contracts/service agreements with providers by May 1, 2016.

Progress: The number of sentenced inmates in need of Court-ordered treatment, and type of treatment ordered, was completed on October 15, 2015 and is updated monthly; existing programming was incrementally expanded to 10 housing units by January 2016; the initial multi-disciplinary team (MDT) was identified on April 20, 2016; the treatment/program outline, including estimated costs, was finalized on May 23, 2016; and the Mission Statement was completed on June 6, 2016. During this reporting period, 89 inmates completed the Community Transitions component of newly named, three-phased Avenues to Success program.

Work will continue on this goal during the next reporting period as outlined on the following pages.

Goal: Establish a supervised pre-trial release program for offenders released on own recognizance (OR) or enhanced bail terms.

- Objective:**
- Allow for the safe release of adult offenders pending trial/sentencing.
 - Manage the average daily jail population to avoid early releases based on population spikes.
 - Expand services designed to avoid the pre-trial detention of individuals unable to post bail.

- Measure:**
- Designate Probation Department personnel on or before December 1, 2015.
 - Have program in place, serving clients, on or before January 1, 2016.
 - Provide pre-trial supervision services to 60 individuals by July 1, 2016.

Progress: Staff were formally identified on November 16, 2015; the program was in-place and receiving referrals on December 1, 2015; pre-trial supervision services were provided to 45 individuals during the period of December 1, 2015 through June 30, 2016 – 87.5% of those completing the program completed successfully.

It should be noted that potential jail overcrowding issues were further mitigated during this period by agreed-upon changes in misdemeanor booking practices by local law enforcement agencies and through the provision of transition services from incarceration to community-based supervision by the Probation Department.

Goal: Begin formal evaluation of treatment provider outcomes.

- Objective:**
- Determine which programs are impacting recidivism.
 - Improve outcomes by sharing information with existing providers to validate or provide direction and/or training for improvement.
 - Quality control of treatment services available to adult offenders.

- Measure:**
- Form an evaluation team of CCP representatives by January 1, 2016.
 - Identify three providers for evaluation by February 1, 2016.

Progress: The Public Defender's Office, the Health and Human Services Agency and the Probation Department committed staff for program evaluation on November 17, 2015; outcome data was compiled by the Probation Department on five (5) substance abuse treatment programs for the period of July 2014 through June 2016.

Work will continue on this goal during the next reporting period as outlined on the following pages.

Goals, Objectives, Outcome Measures and Progress

FY 2016-17

Goal: Complete implementation of a seamless continuum of care from incarceration to probation supervision and/or completion of straight commitment.

- Objective:**
- Allow offenders to begin/complete court-ordered or other needs-driven treatment while in-custody.
 - Provide offenders with release incentives based on participation and positive behavior.
 - Provide a custodial experience that promotes rehabilitation and assists in community transition.

- Measure:**
- The MDT will meet weekly to identify inmate programming, medical/ mental health treatment and vocational/educational needs based on validated assessments.
 - Finalize contracts with four (4) additional treatment providers for incentivized custodial programming by January 15, 2017.
 - Receive approval from County Counsel to issue Vocational Education certificates to inmates participating in 10 different custodial job training experiences by February 1, 2017.
-

Goal: Complete formal evaluation of treatment provider outcomes.

- Objective:**
- Determine which programs are impacting recidivism.
 - Improve outcomes by sharing information with existing providers to validate or provide direction and/or training for improvement.
 - Quality control of treatment services available to adult offenders.

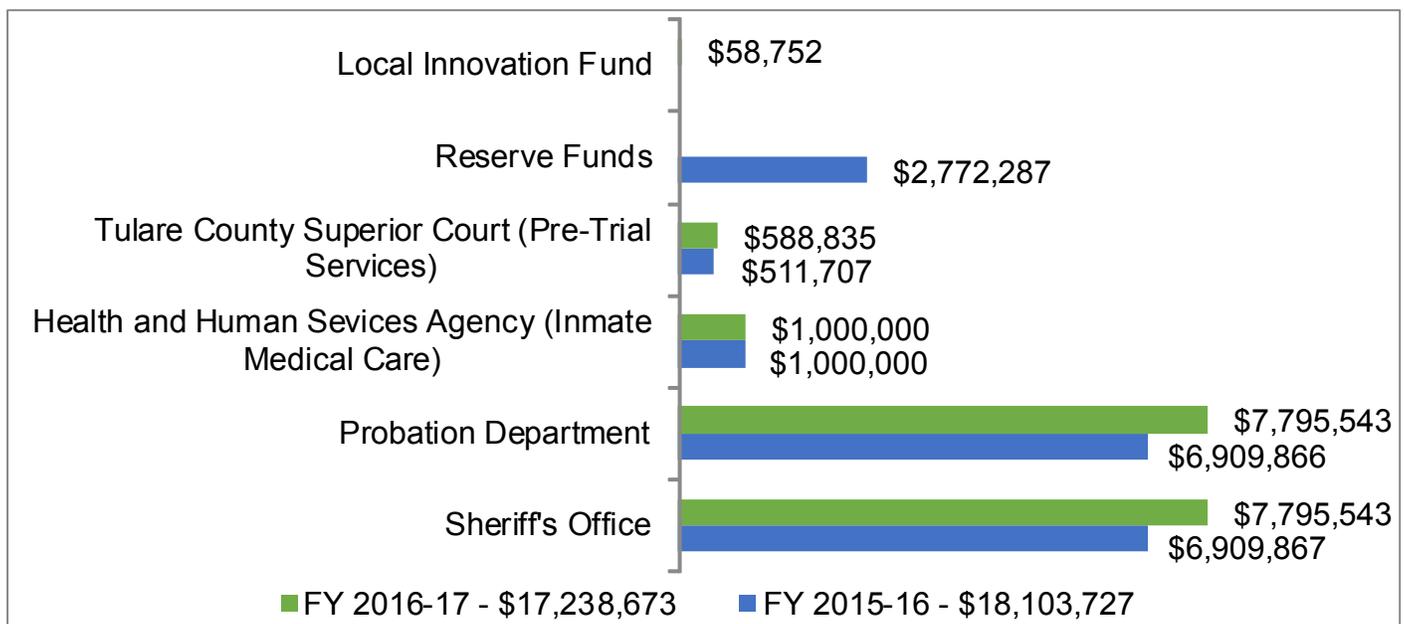
- Measure:**
- Determine recidivism rate on offenders involved in each individual treatment program during the period of January 2012 through December 2016 by January 15, 2017.
 - Meet with the five (5) contracted providers to identify training needs to improve outcomes by January 30, 2017.
 - Provide outcome information and training recommendations for CCP approval to the CCP on February 21, 2017.
 - Provide identified training to contracted treatment providers by June 1, 2017.
-

Goal: Implement utilization of an Evidence-Based Inmate Classification System for the Tulare County Jail Facilities.

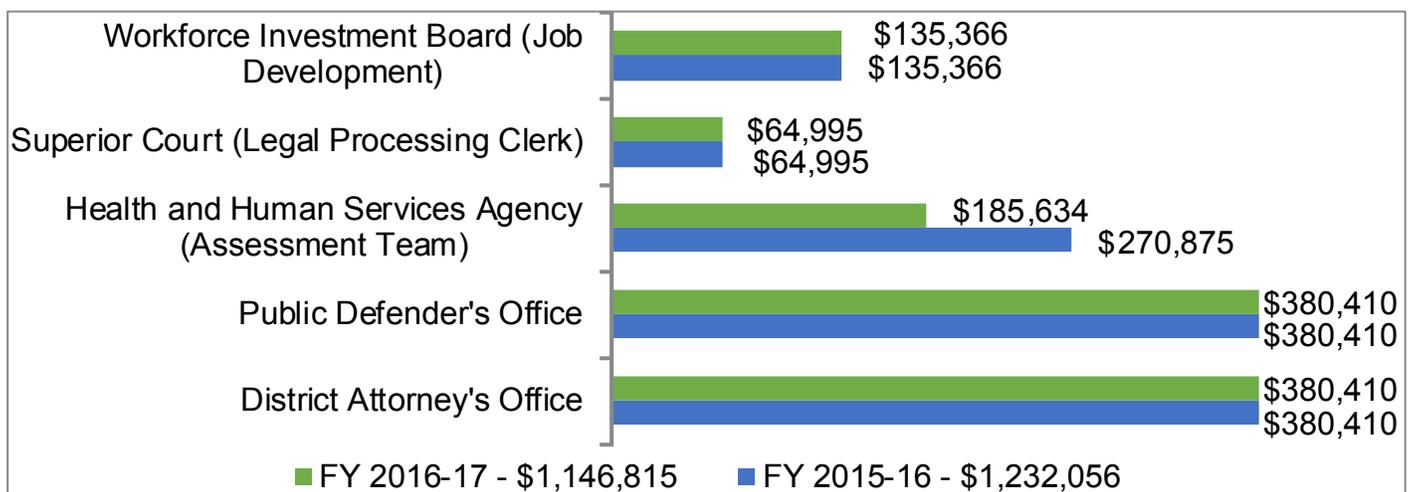
- Objective:**
- Classify and safely house adult inmates based on a validated assessment.
 - Enhance inmate access to Court-ordered and other custodial programming.
 - Allow for the electronic access and sharing of assessment information between the Sheriff's Office and the Probation Department.

- Measure:**
- Enter into contract with Northpointe, Inc. by January 15, 2017.
 - Complete full implementation/systems integration by June 30, 2017.

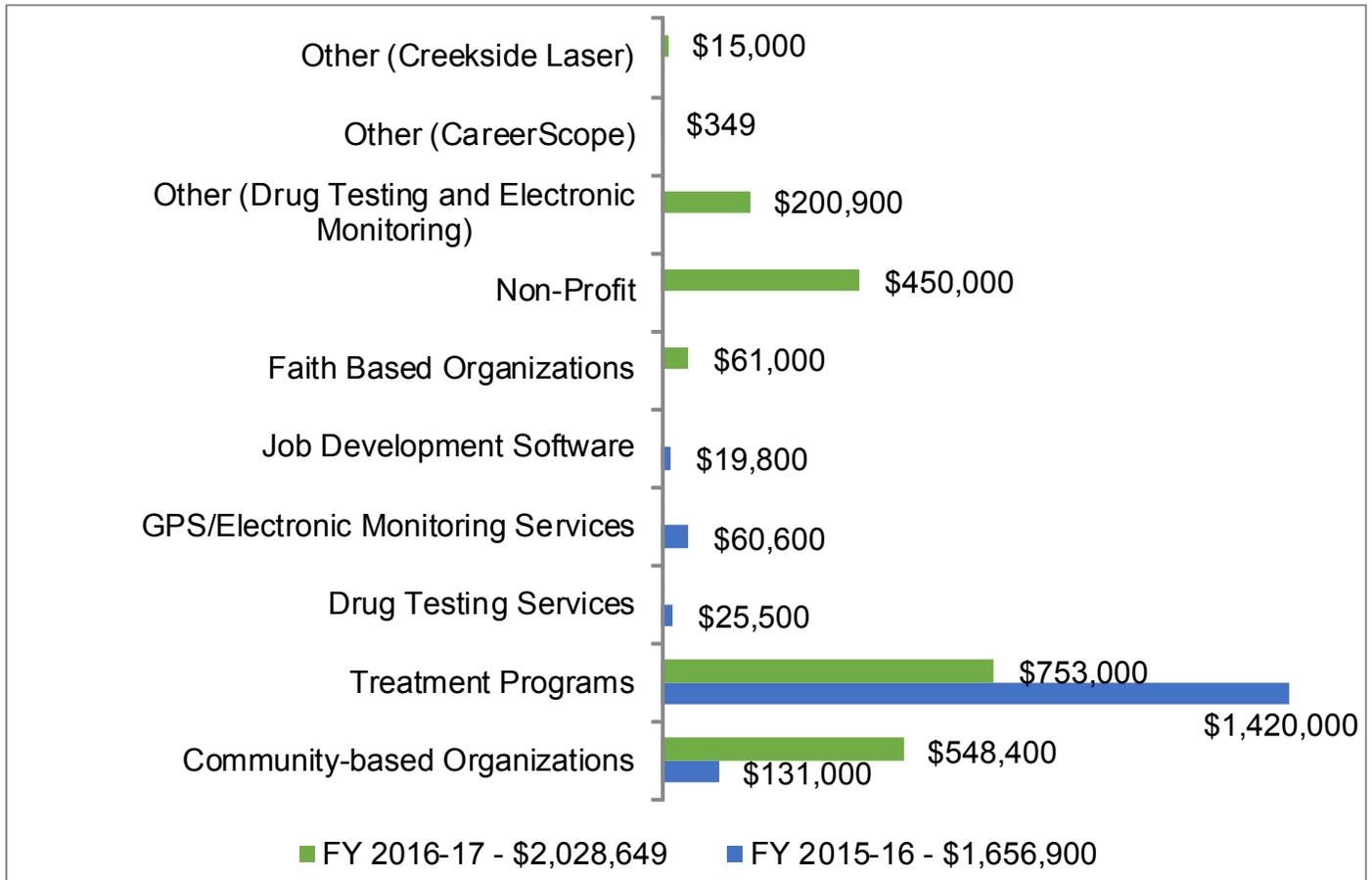
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. Program outcomes are tracked within our case management system.

Does the county consider evaluation results when funding programs and/or services?

Yes. All provider contracts are reviewed on a yearly basis and as issues occur. We have discontinued the use of four (4) providers based on poor performance and/or business practices.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

Collaborative Court Programs

- Mental Health Court; Veterans Court;
- Drug Court; Domestic Violence Court;
- Proposition 36 Court; Driving Under the Influence Court.

Probation Driven Treatment Programs

- Tulare County Health and Human Services Agency/Division of Mental Health.
 - In-patient and out-patient mental health treatment services.
- Sex Offender Treatment (CPC America).
- Dual-diagnosis in-patient, out-patient and transition services.
- Substance Abuse inpatient, outpatient and transition services.
- Medication Management groups.
- Theft Intervention individual and group.
- Veterans Administration.
 - Medical, mental health, substance abuse, anger management, sober living and housing services.

Jail Driven Treatment Programs (in-Custody)

- Substance Abuse Treatment.
- Gang Awareness Parenting Program (GAP).
- Parenting classes.
- Medical/Mental Health Treatment and Release Planning.

What challenges does your county face in meeting these programming and service needs?

None at this time. We have made great strides in the implementation/utilization of evidence-based practices across all systems.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Court-ordered treatment has been the foundation in the expansion of services within our jail facilities, allowing offenders to complete all or a large portion of treatment prior to release.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.

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Community Corrections Partnership Membership
(October 21, 2016)

Don L. Meyer
Chief Probation Officer

Donald Segerstrom
Presiding judge or designee

Maureen Frank
County supervisor or chief administrative officer or designee

Laura Krieg
District Attorney

Robert Price
Public Defender

James Mele
Sheriff

Mark Stinson
Chief of Police

Ann Connolly
Department of Social Services

Vacant
Department of Employment

Rita Austin
Department of Mental Health and Alcohol and Substance Abuse Programs

Marguerite Bulkin
Office of Education

Beetle Barbour
Community-based organization

Ginger Martin
Victims' interests

The CCP meets semi-annually and as needed

Tuolumne County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce the number of Pre-Trial offenders held in a secure detention.

- Objective:**
- Adopt an evidence based risk assessment tool.
 - Adopt new release conditions.

Goal: Increase the number of Day Reporting Center (DRC) Participants who graduate the program.

- Objective:**
- Support participants to keep them progressing through all program steps of the DRC Program.
 - 75% of all participants referred to the DRC will graduate.

- Measure:**
- Number of participants who are terminated from the DRC.
 - Number of participants who graduate from the DRC.

Progress: During fiscal year 15-16, the program had a 48% success rate which is commendable given the difficulty of the program. This success rate is well above neighboring counties. It is also important to note that this is a 2% increase since the last fiscal year.

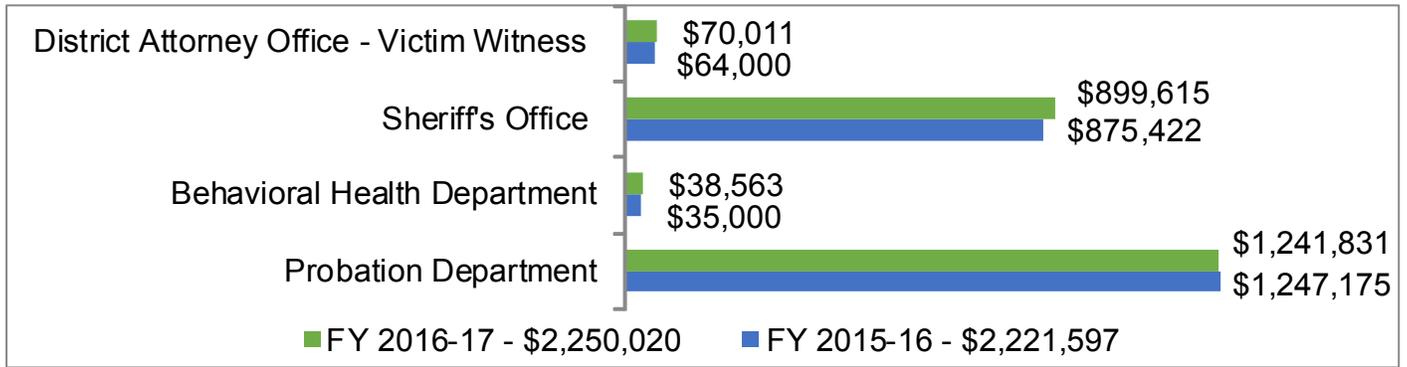
Goal: Assist Day Reporting Center (DRC) participants in securing housing.

- Objective:**
- Work with DRC participants to complete the application process for the homeless.
 - Increase by 10% the number of homeless participants who secure housing.

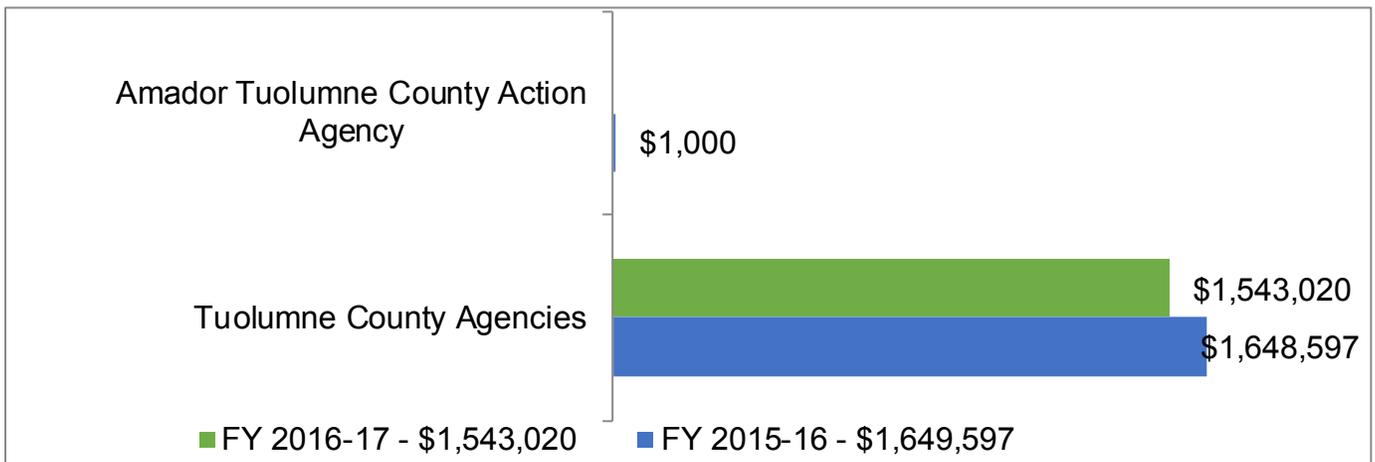
Progress: In the 15-16 fiscal year, there was a 4% homeless rate at time of discharge from the DRC. This percentage does not include "others" that were living in a shelter, sober living facility, etc.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

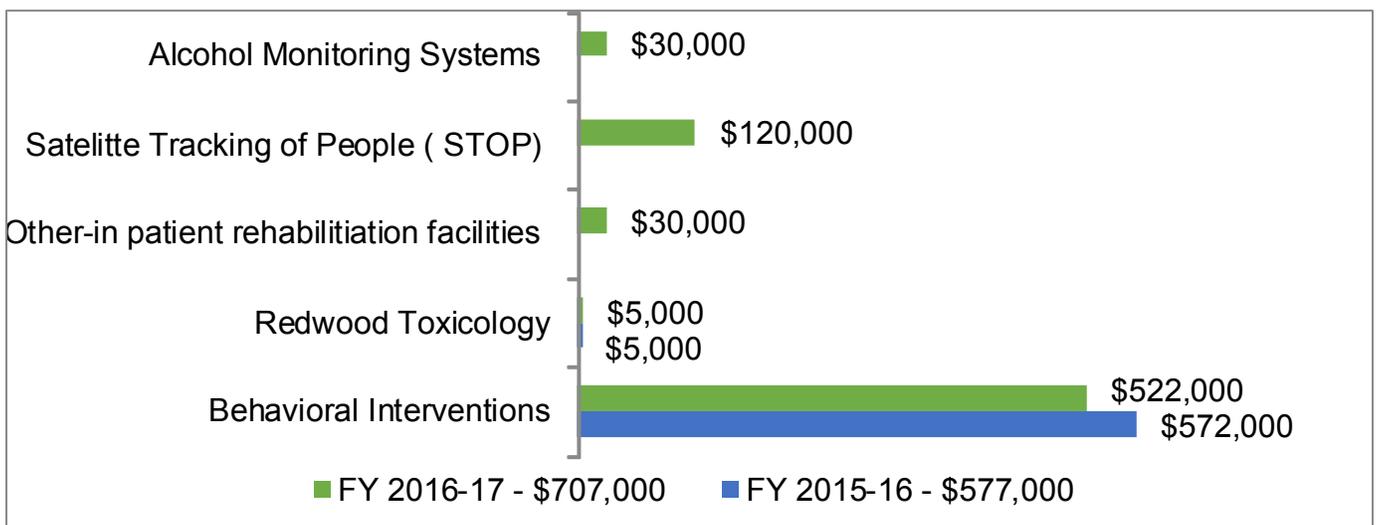
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. We do an annual report to the Board of Supervisors which includes statistics and year to year tracking. This includes overall success rates of the programs funded by AB109. The Probation Department Business Manager and Staff Services Analyst keep track of all things AB109 related monthly, quarterly, and annually to evaluate overall effectiveness of programs and services.

Does the county consider evaluation results when funding programs and/or services?

Yes. We give preference to programs that utilize evidence based programming and practices as well as promising practices to ensure programs will be a benefit to clients and the County.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61% 80%

We would like to better understand your 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?

Tuolumne County Behavioral Health treats severe and chronic mentally ill clients, as well as, provides alcohol and drug treatment. Tuolumne County Behavioral Health primarily services Medi-Cal clients. The closest psychiatrist that treats non Medi-Cal patients is 50-60 miles away.

Due to the limited services available to our rural demographic the CCP has utilized Realignment funding since the beginning to contract with Behavioral Interventions (BI) Inc. to provide clients evidence based cognitive behavioral programming, substance abuse programming, employment assistance, and other resources. This program is open to clients referred by the Courts and Probation Department as part of an overall treatment program. BI also refers clients to the Tuolumne County Behavioral Health Department for more intensive and specialized treatment.

What challenges does your county face in meeting these programming and service needs?

Tuolumne County is currently budgeting more on AB109 programs and services than the annual allocation in order to meet the needs of the County AB109 population, and to keep the programs solvent and successful. Therefore, more work needs to be done to create long term sustainability in this sector. Progress has been made in increasing revenue streams in order to reduce overall expenditure output and balance the programming. Staffing capacity is also an ongoing concern for the County. It is very difficult to recruit, train, and keep (long term) qualified staff to satisfy the specific job requirements. Overall AB109 funding streams (annual state allocations) have not been sufficient to address the needs of the AB109 population.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The CCP evaluates the effectiveness of all the funded programs annually to ensure funding is spend on programs that are showing favorable results both short term and long term. For example, the CCP evaluated the effectiveness of a program called the Day Treatment Program. It was found that the program was an ineffective way to spend CCP allocations. Staffing costs were high, attendance was low, and overall completion rates were extremely low. The CCP members voted unanimously to discontinue and place the offenders that would have participated in the program on an AB109 funded electronic monitoring program instead. We have found that participants are much more likely to complete the EMP program compared to the Day Treatment Program thus creating better outcomes and better cost effectiveness overall.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Tuolumne County continues to contract with Behavioral Interventions (BI) Inc. They provide evidence based programming to high risk offenders. This is known as the Day Reporting Center (DRC) Program. This program includes individual counseling, group sessions, and Moral Reconation Therapy. This program is very extensive and demanding for clients. In order to successfully complete the program individuals must complete Phase 1-3, Aftercare, and obtain successful employment and housing. This can be a minimum of a 210 day program. In order to advance to the next phase, the participant must complete each step listed in their Moral Recognition Workbook, and remain drug free. From the start of the program Tuolumne County has averaged a 46% success rate. Given the difficulty of the program and the type of Offenders (typically PRCS and other High Risk classifications) a 46% rate is extremely positive. Tuolumne County's success rate is well above neighboring county averages. This can be attributed to intense collaboration between BI staff, Probation, and the Sheriff's Office Staff. BI also provides a similar type of program in the County Jail. This is called the Jail Re-Entry Program (JRP) which provides evidence based programming to offenders while incarcerated. This is a structured, comprehensive 12 week program. The curriculum includes MRT (Moral Recognition Therapy), Parent Effectiveness Training, Anger Management, Release Preparation, Educational and Individual Counseling. Successful completion for this program is very similar to the DRC Program as inmates must complete Phase 1-3 of the program. Offenders can then transition into the DRC program after release for further in depth programming and long term treatment. The success rate of the JRP program averages 66%.

**Community Corrections
Partnership Membership**
(October 21, 2016)

Mark Varela
Chief Probation Officer

Donald Coleman
Presiding judge or
designee

Mike Powers
County supervisor or
chief administrative
officer or designee

Greg Totten
District Attorney

Steve Lipson
Public Defender

Geoff Dean
Sheriff

Scott Whitney
Chief of Police

Barry Zimmerman
Department of Social
Services and
Department of
Employment

Elaine Crandall
Department of Mental
Health

Patrick Zarate
Alcohol and Substance
Abuse Programs

Stanley Mantooth
Office of Education

Caroline Prijatel-Sutton
Community-based
organization

Michael Schwartz
Victims' interests

The CCP meets quarterly

Ventura County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce the recidivism rate of AB109 Offenders.

- Objective:**
- Define recidivism in Ventura County.
 - Establish a baseline recidivism rate.

- Measure:**
- Adopting a recidivism rate definition.
 - Determine baseline recidivism rate.

Progress: The CCP adopted the BSCC definition of recidivism and will track other recidivism indicators for use as well. Research completed providing a baseline recidivism rate since realignment.

Goal: Increase alternatives to incarceration and services to offenders by fiscal year 2015.

- Objective:**
- Develop a matrix of graduated behavior responses to violation behavior.
 - Develop incentives for offenders to be successful.
 - Develop alternatives to incarceration, including electronic monitoring (EM), GPS and pre-trial.

- Measure:**
- Matrix document of graduated responses.
 - Incentives program for offenders.
 - Implement alternative to incarceration options.

Progress: Matrix on sanctions and incentives have been developed, probation incentives program has been implemented and EM, GPS, and pre-trial programs are implemented.

Goal: Use risk/needs information at sentencing (front end of system) by July 1, 2015.

- Objective:**
- Develop and implement pre-trial program incorporating a validated assessment.
 - Include risk/needs assessment for judicial consideration at sentencing.

- Measure:**
- Implement and administer pre-trial assessment.
 - Implement and administer the Ohio Risk Assessment System – Community Supervision Tool (ORAS-CST) risk/needs assessment at sentencing.

Progress: The goal was fully completed in 2015.

Goal: Develop multi-agency dashboard.

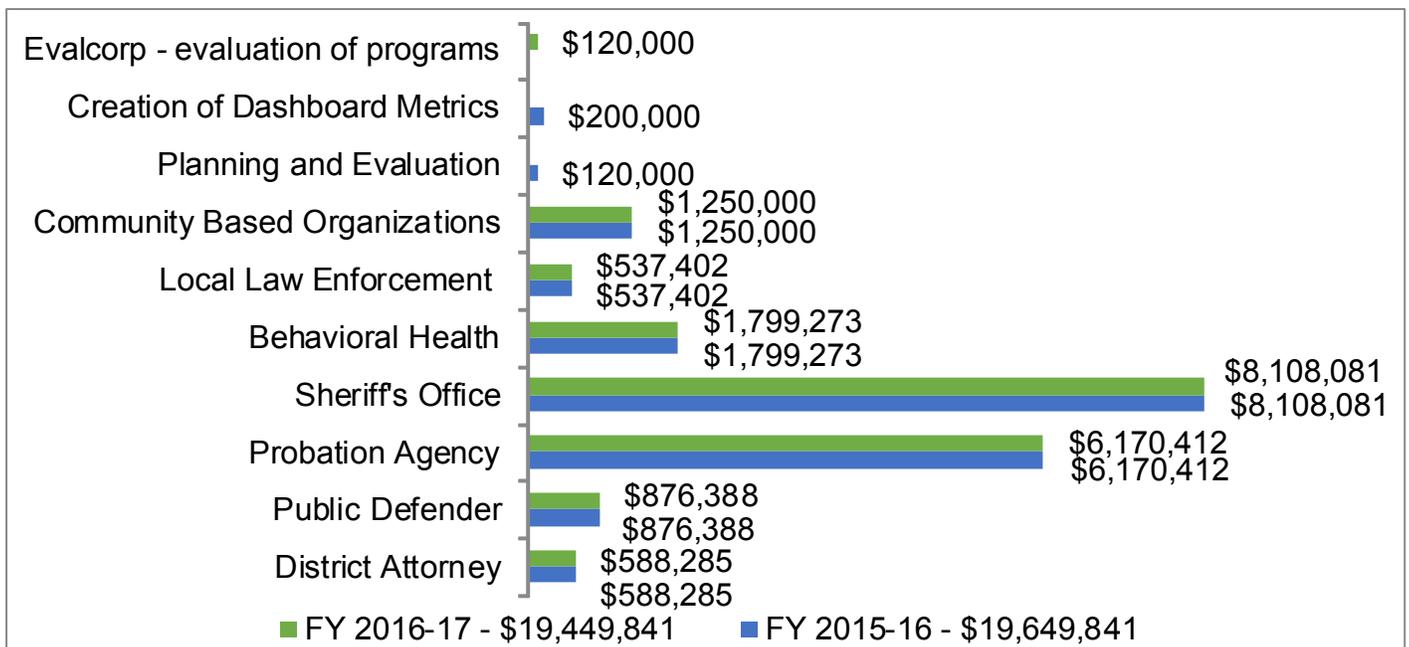
- Objective:**
- Define measures to be collected.
 - Identify sources to pull information.
 - Develop dashboard design and access.

- Measure:**
- Identification of measures.
 - Identification of data sources.
 - Development, access and implementation.

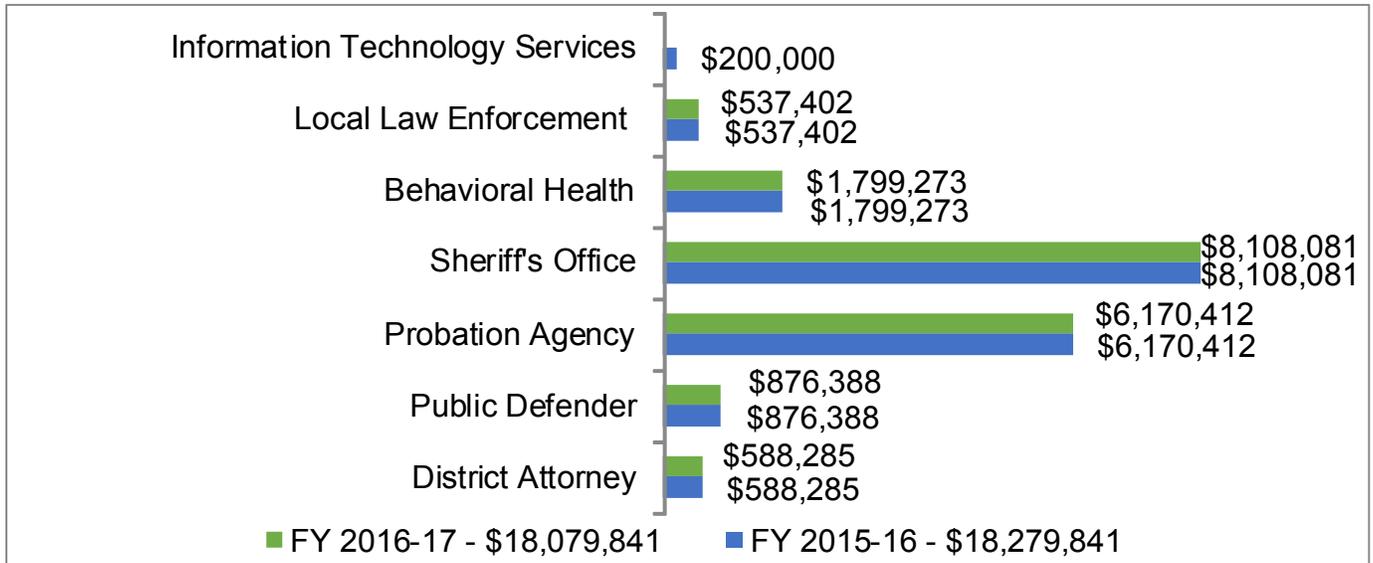
Progress: Initial build out has been completed. Currently developing analytical tools.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

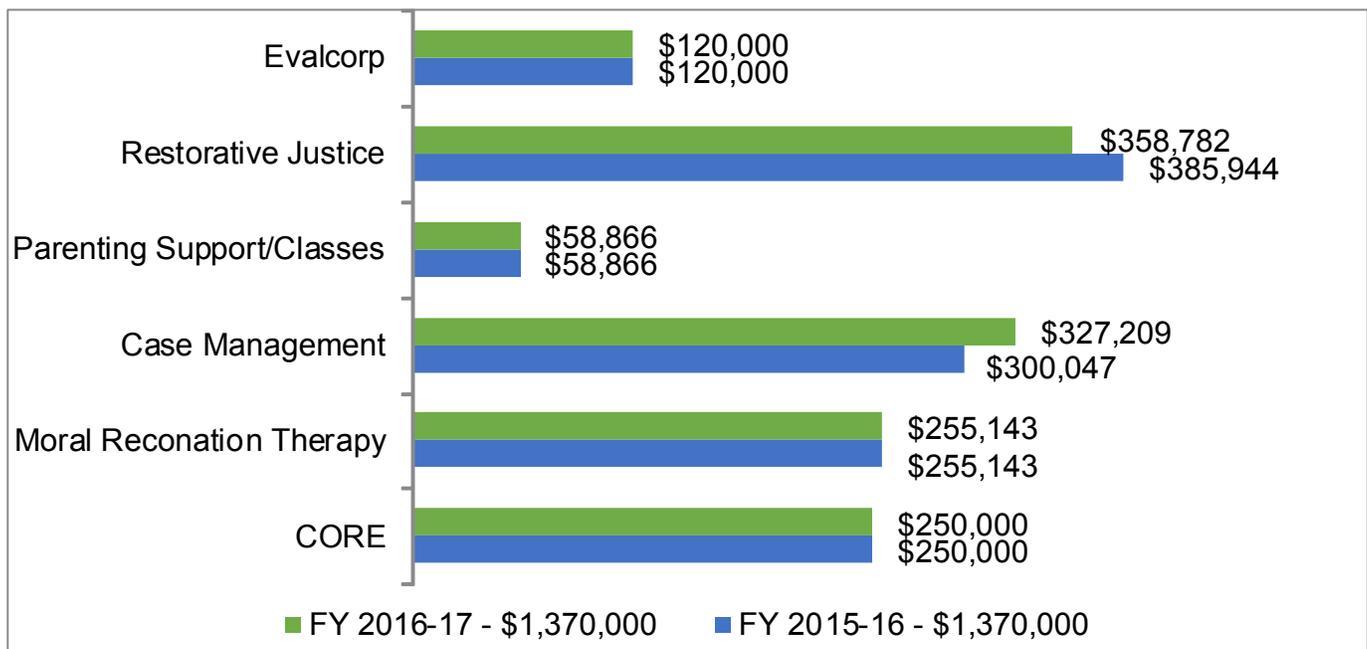
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. We use statistical information to measure outcomes and have partnered with EvalCorp to conduct efficacy studies on our programs and efforts. We also require that our CBO partners collect data and present outcomes to ensure fidelity in their programming.

Does the county consider evaluation results when funding programs and/or services?

Yes. The County is in the beginning phases of using recently obtained outcomes through EvalCorp to better leverage programming successes and target future funding allocations towards programs proven to reduce recidivism. In addition, the County has recently partnered with the Results First Initiative which will also serve to assist in data-driven policy decisions.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

41% 60%

We would like to better understand your 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?

Ventura County Behavioral Health (VCBH) in collaboration with the Sheriff's Office, Probation, and the Superior Court offer an array of programming for those under post-release offender supervision (PROS/AB109). VCBH's Alcohol and Drug Programs Division employs three Master's level clinicians who evaluate AB109 clients all referred by Probation. The clinicians are embedded in three probation offices (i.e., Ventura, Oxnard and Simi). The purpose of the screenings is to determine whether clients would benefit from substance use treatment and/or behavioral health treatment, as well as, make recommendations for level of care for treatment interventions. VCBH contracts with community-based, substance use treatment providers to deliver the appropriate level of treatment. Residential treatment is provided by Khepera House (for men) and Prototypes (for women). The average length of stay in residential treatment is 90 days. Alternative Action Program (AAP) provides outpatient, substance use treatment.

In order to address behavioral health needs, VCBH contracts with Telecare Corporation whose clinical staff assess and provide specialty mental health services (i.e., psychiatric medication, rehabilitation, and case management) for those who exhibit symptoms of a serious mental illness and significant functional impairment. Two levels of behavioral health treatment have been delineated and differ in terms of the nature/frequency of treatment/contact. Telecare has the capacity for 15 clients with the higher level need and 40 with the lower level need. In FY1516 a total of 57 unduplicated clients received services at the higher level of care and 75 at the lower level.

VCBH working with Probation and the contracted providers coordinates services and treatment when AB109 clients are receiving services from more than one provider at a time (e.g., substance use treatment from AAP and mental health treatment from Telecare). Typically, the nature and level of care evolves with the clients' recoveries. Additionally, there is collaboration with Interface Children and Family Services who provides case management for AB109 clients who require assistance with activities of daily living. Lastly, some AB109 clients are participants in Re-entry Court which results in collaboration with the Court to guide and monitor progress.

What challenges does your county face in meeting these programming and service needs?

The single biggest challenge VCBH confronts in operating these programs are limited availability of residential treatment, detox services, and appropriate housing. At the higher end of substance use treatment, there is limited capacity for licensed residential treatment and detox services. Similarly, with behavioral health treatment there are too few Board and Cares, privately owned businesses operating under licenses, providing 24/7 onsite staff, and dispensing medication. Additionally, Ventura County is challenged to provide enough well-run, sober living houses and other more independent living options.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Based on data and program utilization, the CCP has allowed the CBO partners to reallocate funds to increase services to programs which have a greater population and need.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The County has developed an automated dashboard which, at this time, tracks recidivism (BSCC Definition) in real time. The dashboard will also track arrest, conviction, and program success on an offender level; so that all partners can evaluate their effectiveness and ensure that all of the criminal justice partners are relying on the same data.

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Community Corrections Partnership Membership
(October 21, 2016)

Brent Cardall
Chief Probation Officer

Shawn Landry
Presiding judge or designee

Jim Provenza
County supervisor or chief administrative officer or designee

Jeff Reisig
District Attorney

Tracie Olson
Public Defender

Ed Prieto
Sheriff

Dan Bellini
Chief of Police

Karen Larsen
Department of Social Services,
Department of Employment, Department of Mental Health, Alcohol and Substance Abuse Programs

Jesse Ortiz
Office of Education

Marc Nigel
Community-based organization

Laura Valdez
Victims' interests

The CCP meets monthly

Yolo County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Ensure a safe environment for all residents and visitors by reducing and preventing local crime.

- Objective:**
- Establish data workgroup to agree on baseline, minimal data needed to meet needs of CCP and strategic plan.
 - Recommend to CCP that Police Chiefs commit to collecting recommended data.
 - Implement comprehensive continuum of substance abuse services focused on prevention by 2016.

- Measure:**
- CCP Data and Recidivism Committee meets as needed and is conducting Recidivism Study using the CCP approved definitions.
 - All arrest and booking data is tracked and submitted to Data Subcommittee for analysis.
 - Continuum of Care hierarchy of needs continues to

Progress: The objectives under this goal are largely active or completed. As data needs change, the objective of providing useful data changes with it. The recidivism study work has been ongoing, with the goal of reporting on 2011-2012 Offender Recidivism by January 2017.

Goal: Hold Offenders Accountable.

- Objective:**
- Expand Adult Review Boards by 1-1-16 into West Sacramento.
 - Maintain Jail at maximum of 90% of occupancy or less.
 - Provide evidence-based in-custody programming to at least 80% of eligible inmates.

- Measure:**
- Adult Community Review Board expanded into West Sacramento.
 - Jail currently maintains 90% occupancy or less.
 - Jail EBP treatment services are actively offered to all eligible inmates provided they do not have classification

Progress: All measures have been met.

Goal: Restore Victims and the Community.

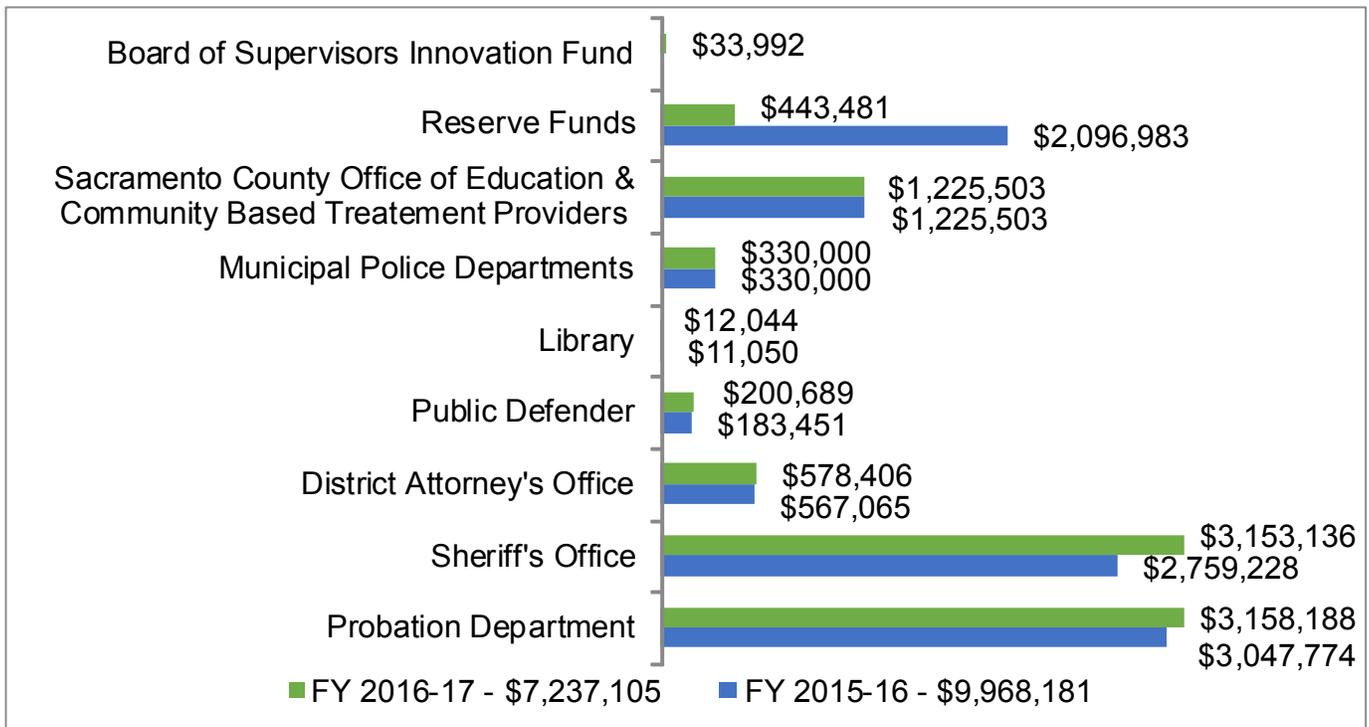
- Objective:**
- Implement at least one evidence based restorative justice program in FY2015-16.
 - Implement coordinated victim notification system.
 - Develop a baseline of victim satisfaction in Yolo County by 2016.

- Measure:**
- Restorative Justice Program Implemented by end of FY2015-16.
 - Victim Notification System Implemented by FY2015-16.

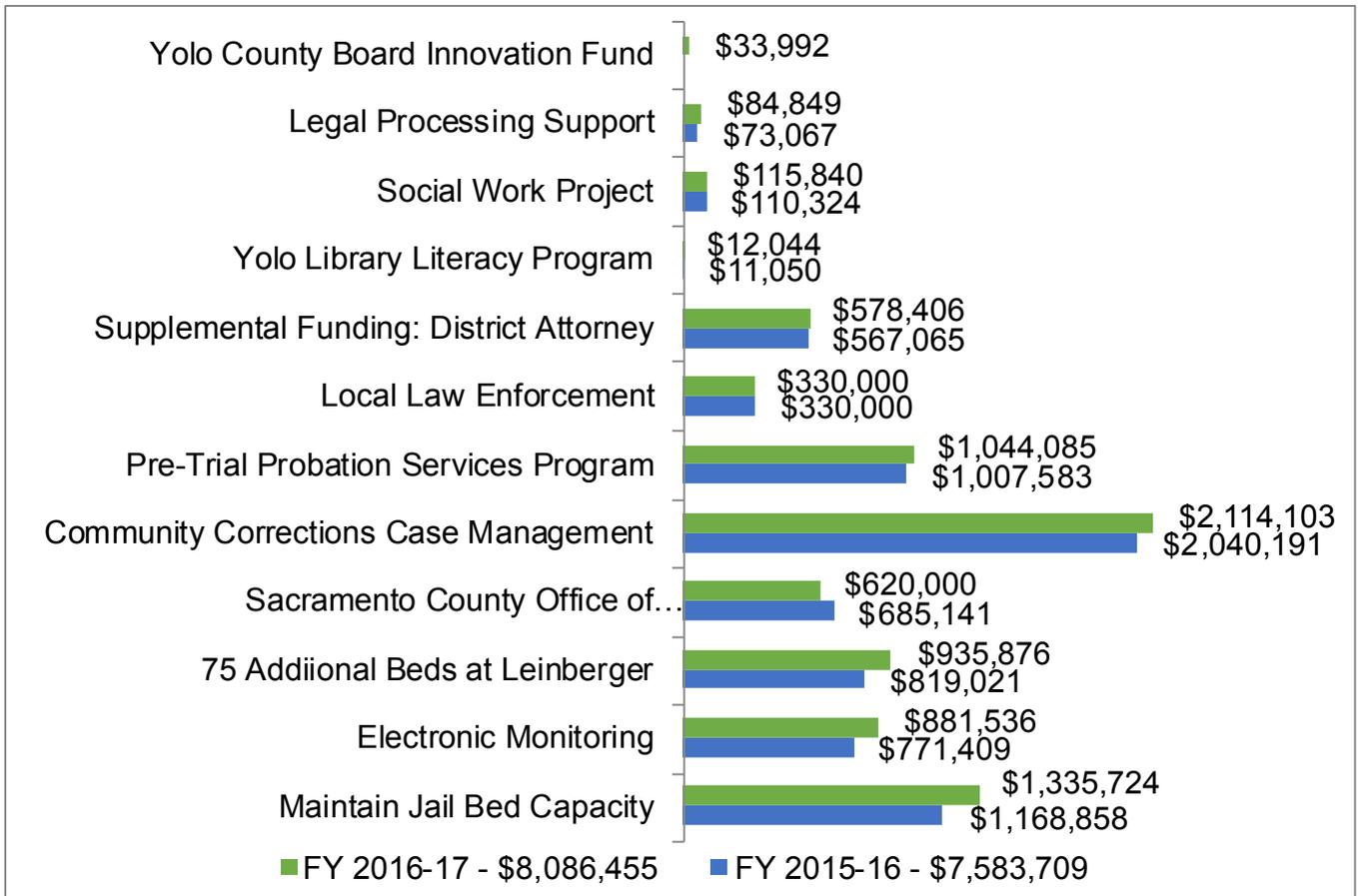
Progress: All outcome measures have been met and are being maintained.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

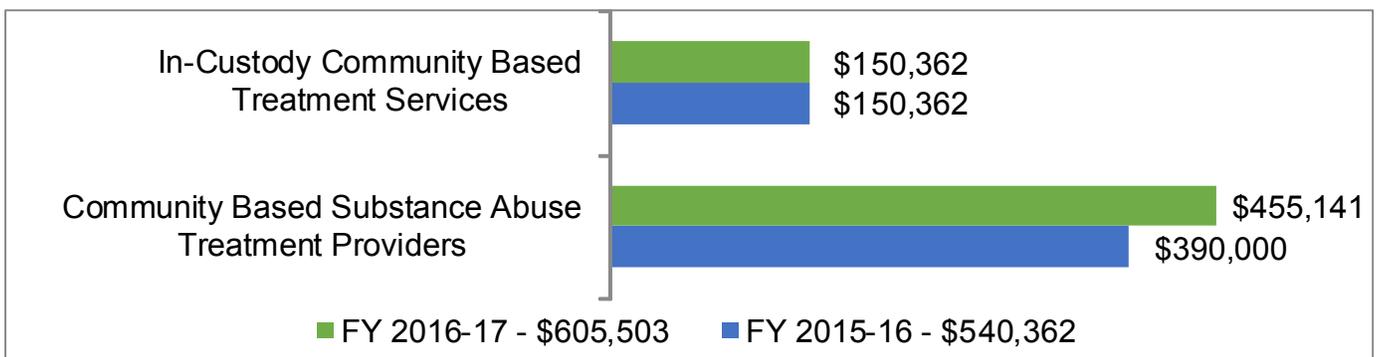
FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services



Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

In FY2015-16, Sacramento State University conducted a risk assessment fidelity evaluation. The results provided analysis of the use of the Ohio Risk Assessment.

In FY 2013-14, the Crime and Justice Institute was selected to perform program fidelity reviews and technical assistance analysis for program improvement of a sample of programs (FY 2012-13), then all of the funded CCP programs in FY 2013-14 so the Board of Supervisors and the CCP could evaluate the fidelity of each program and improve administration and service delivery. The results and suggestions made by the analysis have carried over in an ongoing adaptation to emerging needs and multi-year adjustments.

Yolo County continued to implement the risk, need, responsivity (RNR) Simulation tools developed by the Center for Correctional Excellence at George Mason University during FY 2014-15. This web-based decision-support system was created to help jurisdictions and providers implement the RNR framework. These tools integrate the science around effective screening, assessment, programs and treatment matching to improve individual and system outcomes. The tools also provide a means of identifying programs or services that Yolo County does not currently have or should increase in order to address the needs of the offenders in the system. The intention was that by implementing this system Yolo County would see an increase in the success rates of drug abusers on supervision and a reduction in re-arrest and re-incarceration. The RNR Simulation tools provide an estimated recidivism reduction based on matching the offender's needs with the appropriate available service or intervention. This projected recidivism rate will also inform Yolo County on the realistic estimate of the impact of this strategy and assist in estimating the cost savings realized by the strategy.

Does the county consider evaluation results when funding programs and/or services?

Yes. Programs evaluated through the Crime and Justice Institute as well as George Mason University were required to adapt and improve their services and outcomes per the recommendations of each report. Funding was increased or decreased based upon each program's evaluation and report out on outcomes. Additionally, the pre-trial services unit has consistently provided statistic-based outcomes that justify continued funding.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Length of stay, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

81% or higher

We would like to better understand your 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?

FY 16/17 Mental Health, Behavioral Health, and Substance Abuse Services:

Residential Treatment Services/Transitional Housing

- Yolo CCP supports up to 100 individuals placed in 90 day stays.

Outpatient Substance Abuse and Behavioral Health Treatment

- Unlimited referral capacity (service covered by the Affordable Care Act).

Day Reporting Center

- 505 people served in FY 15/16.
- includes cognitive behavioral therapy, GED, substance abuse education, work readiness classes, substance abuse testing, transitional housing referrals, DUI classes, anger management classes, personal improvement planning, parenting classes.
- has added services in FY16/17 to provide care for behavioral health and addiction/recovery in cooperation with an outpatient treatment provider (CommuniCare).
- works with the outpatient substance abuse provider to conduct clinical assessments of substance use to determine need.
- CommuniCare now has an embedded counselor at the Daily Reporting Center in an effort to provide additional treatment in accordance with evidence-based practices.

Health and Human Services Agency

- Severely Mentally Ill case management services in conjunction with Probation.

Mental Health Court

- Treatment services funded by CCP.
- Severely Mentally Ill clients are referred to Mental Health Court by attorneys and/or judges. They are evaluated, and if found suitable and eligible, are given intensive supervision in conjunction with psychiatric care and support. Each case is reviewed and staffed by the Court, Health and Human Services, Probation, the District Attorney, and the Public Defender or defense counsel. Mental Health Court insures no gaps in service, and provides each client with the greatest likelihood of success.

Substance Abuse Participation statistics from FY 2012-2015:

FY 2012-13-

- Admissions = 801
- Day Treatment = 54
- Outpatient = 348
- Residential = 372

FY 13/14-

- Admissions = 621
- Day Treatment = 50
- Outpatient = 283
- Residential = 261

FY 14/15-

- Admissions = 757
- Day Treatment = 58
- Outpatient = 261
- Residential = 438

Statistics regarding FY 15/16 are still being compiled in a new database, and additional details regarding capacity will be available by February 2017. More details on service capacity can be provided to BSCC upon request.

What challenges does your county face in meeting these programming and service needs?

Yolo County, like many other county jurisdictions, are limited in the services they can provide to offenders re-entering the community because the services identified as a top three criminogenic need using our risk assessment tool, Ohio's ORAS, cannot fund everything. Specifically, transitional housing and workforce training have been consistent needs that the county can't afford to adequately support. Transitional housing lengths of stay are limited to 3-4 months, when many offenders can use 6 months to 1 year after leaving a drug treatment program. To address this challenge, the CCP established a pilot project which will result in the purchase of one residence for transitional housing. The goal of the pilot program is to pursue sustainable community-supported housing utilizing non-CCP funds.

Yolo County also some difficult choices for rebalancing the CCP Budget after the State changed the Realignment funding formula. Less funding is being allocated to Yolo, which will force the County as a whole to look at priority services in criminal justice and potentially reduce them.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Yolo County CCP continues to make most of its programmatic changes and adjustments to projects and services based upon nationally recognized assessments and evidence-based program fidelity reviews. In FY 2015-16, the CCP addressed emerging needs and made reallocations to meet them.

Specifically, the Yolo County CCP started a workgroup to address the emerging needs of clients who were on probation for offenses affected by Proposition 47. As drug possession became a misdemeanor, clients were cited out of the jail due to potential overcrowding. While out of custody, a large majority were incurring new drug-use related offenses and failing to appear for court or engage in treatment of their own accord while pending each matter. This placed an additional burden not only on the clients, but on each partner in the CCP.

The workgroup created a pilot diversion program to establish early care and treatment as close to arraignment as possible. Clients would be given the chance to voluntarily participate in diversion at arraignment. They would then be assessed for risk by the Probation Department and assessed for chemical dependence by a psychological professional. After each, they would be referred to an appropriate level of care, and upon successful completion, the case would be dismissed. The program was created with the intention to gauge outcomes on a smaller scale before incorporating pre-arraignment client engagement on a large scale.

The Proposition 47 workgroup then led to the creation of a grants workgroup to establish funding that would allow expansion of the pilot diversion program.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In FY2015-16, the Yolo County Mental Health Court has established itself as a promising program and has yielded positive results. It is based off of a nationally-recognized model and is supported by each member of the CCP. CCP funding has been used to pay for services utilized by Mental Health Court for the past several years.

Severely Mentally Ill clients are referred to Mental Health Court by attorneys and/or judges. They are evaluated, and if found suitable and eligible, are given intensive supervision in conjunction with psychiatric care and support. Each case is reviewed and staffed by the Court, Health and Human Services, Probation, the District Attorney, and the Public Defender or defense counsel. Mental Health Court insures no gaps in service, and provides each client with the greatest likelihood of success.

It met each of the following goals:

1. *Reduce the number of arrests:* Analysis is based on the number of separate offenses/behaviors documented by law enforcement at first contact. In FY 2015-16, clients incurred 6 separate offenses, compared to 54 prior to engagement in Mental Health Court.

88.8% Reduction in Behaviors Resulting in LE Contact [6/54]

2. *Reduce the number of jail days:* Measurement derived from the amount of time each participant has been engaged in the MHC program juxtaposed with the exact same time frame just prior to their participation in MHC. The number of days spent in jail from each time period was compared. Each jail day costs an average of \$121. The reduction in jail days saved an estimated \$66,792.

47.5% Reduction in Jail Days [610/1162]

Removing (Positive Skew 312/84) Variable: 72.3% Reduction [289/1078]

3. *Reduce the number of state hospital days:* Measurement taken from the amount of time each participant has been engaged in the MHC program juxtaposed with the exact same time frame just prior to their participation in MHC. The number of days spent in a state hospital from each time period was compared. The average cost of a day in a state hospital is \$626. The reduction in state hospital commitment saved an estimated \$47,576.

**Local Hospital: 40% Increase [47/28]*

State Hospital: 47.8% Reduction [83/159]

Combined Total: 30.4% Reduction [130/187]

**The increase in local hospitalizations can be attributed to the increased treatment engagement, thus more mental health professionals have contact with the client, which increases referrals for psychiatric hospitalizations whereas without intensive services, this population might otherwise be booked into the jail.*

4. *Increase treatment engagement:* Measurement taken from the amount of time each participant has been engaged in the MHC program juxtaposed with the exact same time frame just prior to their participation in MHC. Statistics calculated in several ways. (a) The number of mental health appointments scheduled and attended from each time period was compared; thus showing the “no-show” rate. (b) The total number of appointments attended from each time period was compared; showing the level of increased/decreased treatment engagement. The below listed statistics are specific to the latter (b).

700.12% Increase in Mental Health Appointment Attendance [1754/245]

Community Corrections Partnership Membership
(October 21, 2016)

James L. Arnold
Chief Probation Officer

Hon. Debra. Givens
Presiding judge or designee

John Nicoletti
County supervisor or chief administrative officer or designee

Patrick McGrath
District Attorney

Brian Davis
Public Defender

Steve Durfor
Sheriff

Aaron Easton
Chief of Police

Jennifer Vasquez
Department of Social Services

Tracy Bryan
Department of Employment

Tony Hobson
Department of Mental Health,
Alcohol, Substance Abuse Programs

Francisco Reveles
Office of Education

Vacant
Community-based organization

Jason Roper
Victims' interests

The CCP meets quarterly

Yuba County

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Reduce Jail Population.

Objective:

- Release low level offenders on work release programs (PC 4024.2).
- Release offenders on electronic monitoring.
- Release offenders on County Parole (PC 3074).

Measure:

- 30 offenders released via 4024.2 PC.
- Zero offenders released via electronic monitoring.
- 3 offenders released via 3074 PC.

Progress: In Fiscal year 15/16, 33 offenders released via alternative sentencing programs to help reduce the jail population.

Goal: Maintain Day Reporting Center.

Objective:

- Work release program.
- Evidence Based programming.

Measure:

- 30 offenders participated in the work release program.
- 228 referrals made for evidenced based programming at DRC.

Progress: 228 referrals made to Day Reporting Center for evidenced based programming. This represents 40% of entire medium and high risk supervision population. This does not include numbers for Substance Abuse referrals (non-evidenced based).

Goal: Maintain Pre-trial Program.

Objective:

- Release low level offenders pending Court.
- Reduce the number of failures to appear.
- Not applicable.

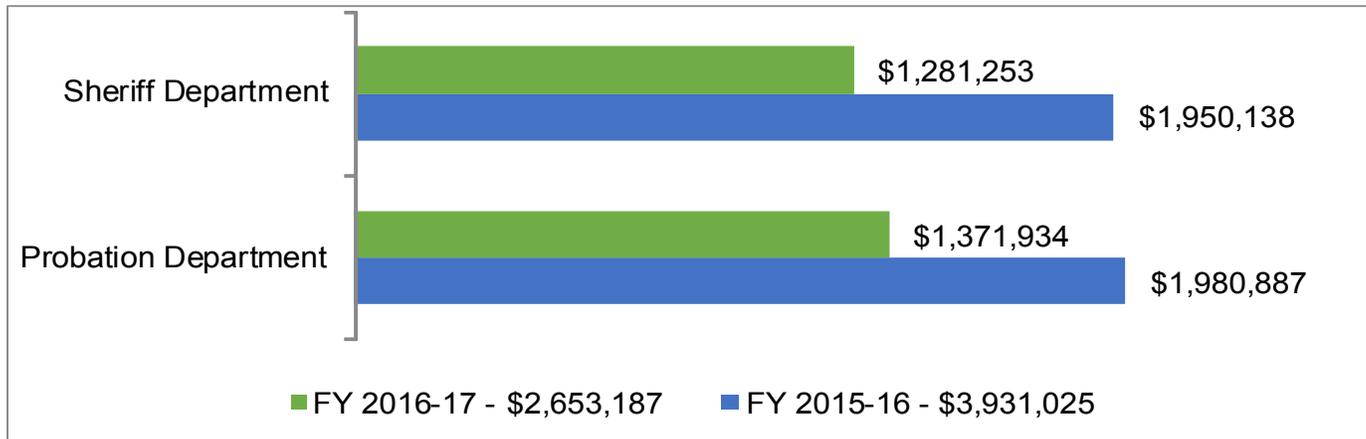
Measure:

- Of 497 pre-trial reports completed, 159 offenders received an own recognizance release.
- Of 159 offenders receiving an own recognizance release, 23 failed to appear for Court.

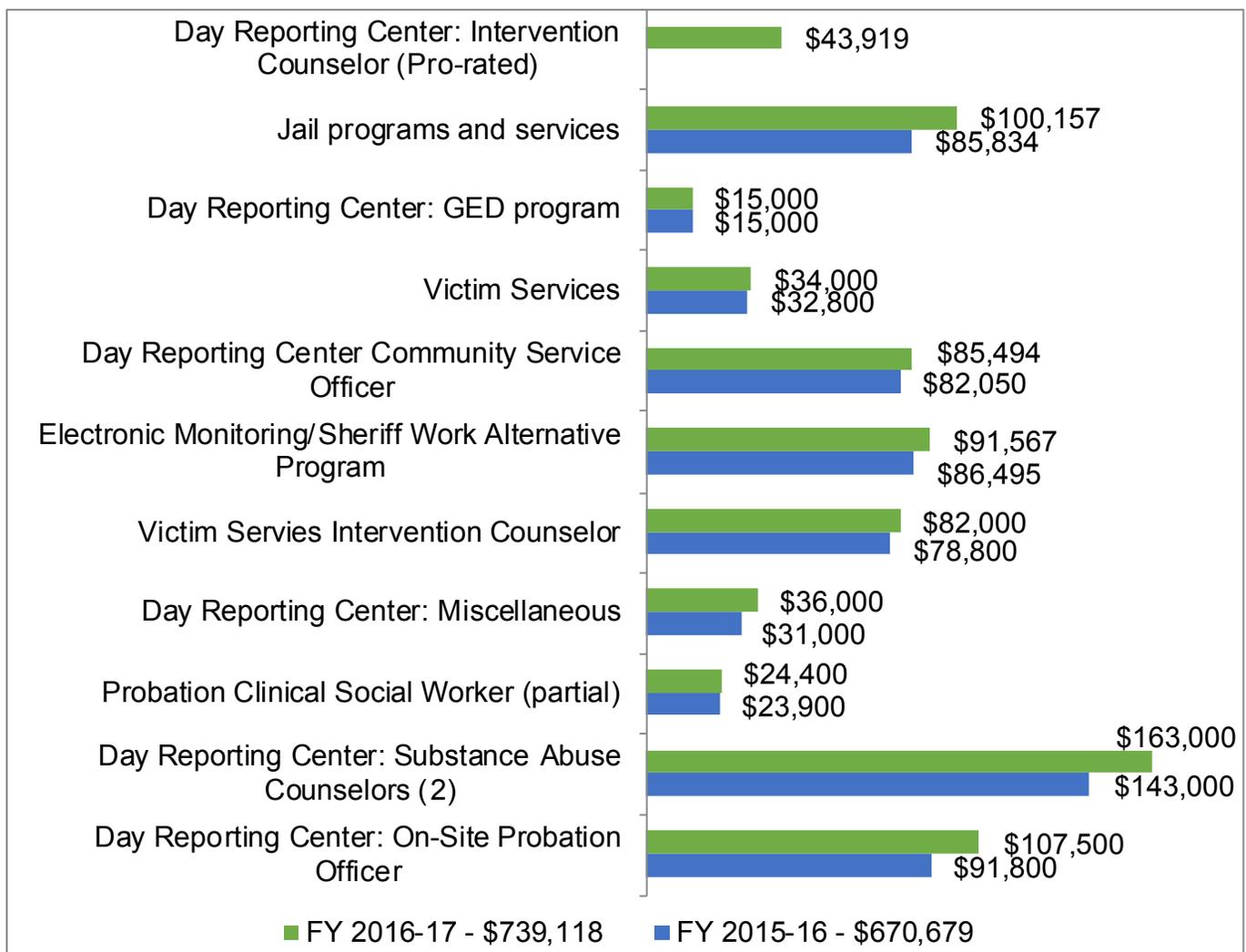
Progress: This is the first full year of our pre-trial program. The above numbers represent our benchmarks from which to measure against in future years.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2016-17.

FY 2015-16 and 2016-17 Budget Allocations



FY 15-16 and 16-17 Allocations to Public Agencies for Programs & Services



FY 15-16 and 16-17 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services

Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

Yes. Average daily population, Conviction, Recidivism, Treatment program completion rates.

What percentage of the Public Safety Realignment allocation is used for evidence-based programming?

61% 80%

We would like to better understand your 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?

Full-time Mental Health Therapist is assigned to the probation department. Two full-time Substance Abuse Counselors are assigned to the probation department. Probation also provides MRT (Moral Reconciliation Therapy), Domestic Violence MRT, Courage for Change curriculum and GED training.

What challenges does your county face in meeting these programming and service needs?

Reward offenders for attending programming through incentives.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The programming services we provide are at minimal or no cost.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

MRT – High participation and completion rates.

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APPENDICES

- Glossary of Terms
- BSCC Definitions of Key Terms
- FY 2016-17 Community Corrections Partnership Survey

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Glossary of Terms

AB	Assembly Bill	CPC	Correctional Programs Checklist
ACA	Affordable Care Act	CPCA	California Police Chiefs Association
ACS	Alternative Custody Supervision	CPOC	Chief Probation Officers of California
ADP	Average Daily Population	CSAC	California State Association of Counties
AOD	Alcohol and Drugs	CSSA	California State Sheriffs Association
ART	Aggression Replacement Training®	CTC	Community Treatment Center
ATC	Alternative Treatment Center	DAPO	California Department of Corrections and Rehabilitation, Division of Adult Parole Operations
BH	Behavioral Health	DMH	Department of Mental Health
BHC	Behavioral Health Court	DPO	Deputy Probation Officer
BJA	Bureau of Justice Assistance	DRC	Day Reporting Center
BOS	Board of Supervisors	DV	Domestic Violence
BSCC	Board of State and Community Corrections	EBP	Evidence-Based Practices and/or Evidence-Based Programs
CAB	Community Advisory Board	EM	Electronic Monitoring
CAIS	Correctional Assessment and Intervention System™	EPICS	Effective Practices in Community Supervision
CBO	Community-Based Organization	ESC	Executive Steering Committee
CBT	Cognitive Behavioral Therapy	FSP	Full Service Partnership
CCJCC	Los Angeles Countywide Criminal Justice Coordination Committee	FTE	Full-Time Equivalent
CCP	Community Corrections Partnership	FY	Fiscal Year
CDCR	California Department of Corrections and Rehabilitation	GED	General Education Development
CJI	Crime and Justice Institute		

HHSA Health and Human Services Agency

IMD Institutes for Mental Disorders

JAG Edward Byrne Memorial Justice Assistance Grant

JH Juvenile Hall

LS/CMI Level of Service/Case Management Inventory™

LSI-R Level of Service Inventory- Revised™

MOU Memorandum of Understanding

MRT Moral Reconciliation Therapy™

MS Mandatory Supervision

NCCD National Council on Crime and Delinquency

ORAS Ohio Risk Assessment System

OR Own Recognizance

PPIC Public Policy Institute of California

PRCS Post-Release Community Supervision

PSP Post-Release Supervised Person

RAI Risk Assessment Instrument

RFP Request for Proposals

SB Senate Bill

SMI Seriously Mentally Ill

STRONG Static Risk and Offenders Needs Guide

TJC Transition from Jail to Community

TX Treatment

Vivitrol® Prescription injectable medicine used to treat alcohol dependence and prevent relapse to opioid dependence after opioid detox

BSCC Definition of Key Terms

Assembly Bill 1050 amended Section 6027 of the Penal Code to require the Board to “Develop definitions of key terms, including, but not limited to, ‘recidivism,’ ‘average daily population,’ ‘treatment program completion rates,’ and any other terms deemed relevant in order to facilitate consistency in local data collection, evaluation, and implementation of evidence-based practices, promising evidence-based practices, and evidence-based programs.” The following definitions have been approved by the Board.

Average Daily Population Daily population is the number of inmates housed in a facility in a day. Average daily population is the daily population divided by the number of days in the period of measurement.

Measurement

For a monthly average daily population take the daily inmate count (usually at or near midnight), add these daily counts together and divide by the number of days in that month.

Conviction-

Conviction is defined as:

- Entry of judgment of guilty on a plea of guilty or no contest; or
- Entry of judgment of guilty on a verdict of guilty

Length of Stay-

intake to date of release.

Length of Stay for each inmate is the number of days from date of

- The Length of Stay for each inmate is the number of days from date of intake to date of release regardless of changes in classification, housing, or sentencing status during that period.
- Any part of one calendar day counts as one day (e.g. if booked/received at 9:00pm on Monday and released at 2:00 am on Tuesday, counts as two days)
- If an inmate is released from detention multiple times during the quarter, he/she will have multiple separate lengths of stay.
- Periods spent under an alternative form of custody will not be counted towards Jail Length of Stay*.
- Electronic monitoring
- Work Release
- Residential Treatment
- Non-Residential Treatment
- County Parole
- Work Alternative Programs
- Day Reporting
- Home confinement

*This list may not be all inclusive.

Adult Definition of Recidivism

Recidivism is defined as conviction of a new felony or misdemeanor committed within three years of release from custody or committed within three years of placement on supervision for a previous criminal conviction.¹

Supplemental Measures

This definition does not preclude other measures of offender outcomes. Such measures may include new arrest, return to custody, criminal filing, violation of supervision, and level of offense (felony or misdemeanor).

Recidivism Rates

While the definition adopts a three-year standard measurement period, rates may also be measured over other time intervals such as one, two, or five years.

Treatment Program Completion Rates Treatment program completion rate is the percentage of people entering a program who go on to complete it.

Note: While this measure provides useful information for the purposes of program evaluation, by itself it does not provide a direct measure of program effectiveness.

Measurement

Treatment programs are multifaceted in their design, services and population served. To avoid unintentionally excluding programs with a narrow definition, respondents are asked to define enrollment and completion prior to calculating the treatment program completion rate.

A. Enrollment

- An enrollment definition includes criteria on admittance, intake, and/or referral. A clear start date should be captured locally.
- E.g. Enrollment in the ABC treatment program begins after the participant completes an in-take interview with a program counselor
- E.g. Enrollment in the ABC treatment program begins when the participant receives an acceptance letter

B. Completion

- A completion definition includes criteria on the steps a participant must take to finish the program. The client's status at departure (e.g. met criteria, transferred out of program, dismissed from program, etc.) and date of completion should be

¹ "Committed" refers to the date of offense, not the date of conviction.

captured locally.

- E.g. Completion in the ABC treatment program is defined as graduation from phases 1-3
- E.g. Completion of the ABC treatment program is achieved when the participant receives a Certificate of Completion

Formula

$$\text{Number Completed} = \frac{\text{Completion Rate}}{\text{Number Enrolled}}$$

1. Tally the number of participants who have enrolled in the program
2. Tally the number of participants who have completed the program
3. Divide completions by enrollment to arrive at the completion rate

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FY 2016-17 Community Corrections Partnership Survey

This survey is designed to help Californians understand your efforts, goals, and successes in implementing Public Safety Realignment. The information you share will be used as the basis of the Board of State and Community Corrections' (BSCC) annual report to the Governor and Legislature on the implementation of Community Corrections Partnership (CCP) Plans as required by section (11) of subdivision (b) of Section 6027 of the Penal Code. Your responses help to illustrate how counties are allocating and using funds to reduce recidivism while keeping communities safe. We hope you will also consider answering a few optional questions to show how your county is responding to the unique needs of local offenders and what, if any, challenges have arisen and changes have resulted from those responses.

Survey

This survey was designed by the BSCC in consultation with the Department of Finance to assist counties with reporting requirements. Counties completing the required portions of the survey will have met the report requirement. Counties that complete the survey are compensated.

The Budget Act of 2016 (SB 826, Chapter 23) appropriates \$7,900,000 to counties as follows:

Counties are eligible to receive funding if they submit a report to the Board of State and Community Corrections by December 15, 2016, that provides information about the actual implementation of the 2015-16 Community Corrections Partnership plan accepted by the County Board of Supervisors pursuant to Section 1230.1 of the Penal Code. The report shall include, but not be limited to, progress in achieving outcome measures as identified in the plan or otherwise available. Additionally, the report shall include plans for the 2016-17 allocation of funds, including future outcome measures, programs and services, and funding priorities as identified in the plan accepted by the County Board of Supervisors.

Funding

Funds will be distributed by January 31, 2017 to counties that comply with all survey requirements as follows:

(1) \$100,000 to each county with a population of 0 to 200,000, inclusive, (2) \$150,000 to each county with a population of 200,001 to 749,999, inclusive, and (3) \$200,000 to each county with a population of 750,000 and above. Allocations will be determined based on the most recent county population data published by the Department of Finance.

Survey Distribution

This survey has been distributed electronically to each Chief Probation Officer as CCP Chair. Each CCP Chair is encouraged to share the survey with CCP members prior to

completion and submission. Responses should represent the collective views of the CCP and not a single agency or individual.

Submission Instructions

In an effort to make the survey more user friendly, the BSCC is using both Microsoft Word and Excel for a complete submittal package. **The survey now consists of two (2) parts and five (5) sections:**

- Part A- to be completed in Microsoft Word
Section 1: CCP Membership;
Section 2: Your Goals, Objectives and Outcome Measures; and
Section 3: Optional Questions.
- Part B- to be completed in Microsoft Excel
Section 4: FY 2015-16 Public Safety Realignment Funding; and
Section 5: FY 2016-17 Public Safety Realignment Funding.

Respondents may now use spell and grammar checks for their narrative responses (Part A, Sections 1, 2, and 3) and Excel's auto-sum features when completing the budgetary questions (Part B, Sections 4 and 5). If you choose not to answer an optional question, please respond "Decline to Respond".

In an effort to produce a more comprehensive report on the implementation of realignment, we are asking for photos and quotes from program participants, if available. You do not need to provide identifying information. Please attach photos of programs in action along with a few quotes. These may be published in the *2011 Public Safety Realignment Act: Fifth Annual Report on the Implementation of Community Corrections Partnership Plans*. Please ensure any individual(s) in the photos have given their consent for use/publication.

To submit the CCP Survey package, as well as providing any optional photos and/or quotes, email all attachments in a single email to:

Helene Zentner, BSCC Field Representative at: Helene.Zentner@bscc.ca.gov
For questions, also contact at: 916-323-8631

Due Date

A single completed survey package (Parts A and B) must be submitted electronically to the BSCC by **Thursday, December 15, 2016**. The CCP is encouraged to collaborate on responses and the CCP Chair should submit the survey. Only one submission by a county will be accepted.

If you experience difficulty completing this survey or need technical assistance, please contact:

Patricia Ferguson, BSCC Associate Governmental Program Analyst
916-322-7539 or Patricia.Ferguson@bscc.ca.gov

Thank you.

FY 2016-17 Community Corrections Partnership Survey

PART A

SECTION 1: CCP Membership

Section 1 asks questions related to the CCP composition and meeting frequency. There are five (5) questions in this section.

1. County Name:
2. Penal Code Section 1230 identifies the membership of the CCP. Provide the name of each individual fulfilling a membership role as of October 1, 2016 in the spaces to the right of each membership role. If a membership role is not filled, respond by indicating "vacant."

Chief Probation Officer	
Presiding Judge of the Superior Court or designee	
County Supervisor or Chief Administrative Officer or a designee of the Board of Supervisors	
District Attorney	
Public Defender	
Sheriff	
Chief of Police	
Head of the County Department of Social Services	
Head of the County Department of Mental Health	
Head of the County Department of Employment	
Head of the County Alcohol and Substance Abuse Programs	
Head of the County Office of Education	
A representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense	
An individual who represents the interests of victims	

3. How often does the CCP meet? Use an "X" to check the box to the left of the list.

<input type="checkbox"/>	Bi-weekly (every other week)
<input type="checkbox"/>	Monthly
<input type="checkbox"/>	Bi-monthly (every other month)
<input type="checkbox"/>	Quarterly
<input type="checkbox"/>	Semi-Annually
<input type="checkbox"/>	Annually
<input type="checkbox"/>	Other (please specify)

4. How often does the Executive Committee of the CCP meet? Use an "X" to check the box to the left of the list.

	Bi-weekly(every other week)
	Monthly
	Bi-monthly(every other month)
	Quarterly
	Semi-Annually
	Annually
	Other (please specify)

5. Does the CCP have subcommittees or working groups? Use an "X" to check the box to the left of the list.

	Yes
	No

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

SECTION 2: Your Goals, Objectives and Outcome Measures

Section 2 asks questions related to your goals, objectives, and outcome measures. To view your responses provided in the 2015 survey, [click here](#).

For the purpose of this survey:

- **Goals are defined as broad statements the CCP intends to accomplish.**
- **Objectives support identified goals and are defined by statements of specific, measureable aims of the goal.**
- **Outcome measures consist of the actual measurement of stated goals and objectives.**

Example:

Goal	Increase substance use disorder treatment to offenders in ABC County
Objective	40% of participants will complete substance use disorder treatment
Objective	100% of participants will receive screening for substance use disorder treatment
Outcome Measure	Number of participants enrolled in substance use disorder treatment
Outcome Measure	Number of participants completing substance use disorder treatment
Progress toward stated goal	Between January 2016 and October 2016, 70% of participants in substance use disorder treatment reported a decrease in the urge to use drugs. This is a 10% increase from the same period last year.

6. Describe a goal, one or more objectives, and outcome measures from FY 2015-16. If the CCP kept the same goal, objective and outcome measure from a prior fiscal year for FY 2015-16, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	
Objective	
Objective	
Objective	
Outcome Measure	
Outcome Measure	
Outcome Measure	
Progress toward stated goal	

7. Describe a goal, one or more objectives, and outcome measures from FY 2015-16. If the CCP kept the same goal, objective, and outcome measure from a prior fiscal year for FY 2015-16, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	
Objective	
Objective	
Objective	
Outcome Measure	
Outcome Measure	
Outcome Measure	
Progress toward stated goal	

8. Describe a goal, one or more objectives, and outcome measures from FY 2015-16. If the CCP kept the same goal, objective, and outcome measure from a prior fiscal year for FY 2015-16, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	
Objective	
Objective	
Objective	
Outcome Measure	
Outcome Measure	
Outcome Measure	

Progress toward stated goal	
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9. Will the CCP use the same goals, objectives, and outcome measures identified above in FY 2016-17? Use an "X" to check the box to the left of the list.

	Yes
	No. The CCP will add and/or modify goals, objectives, and outcome measures (continue with section 3)

10. Describe a goal, one or more objectives, and outcome measures for FY 2016-17.

Goal	
Objective	
Objective	
Objective	
Outcome Measure	
Outcome Measure	
Outcome Measure	
Progress toward stated goal	

11. Describe a goal, one or more objectives, and outcome measures for FY 2016-17.

Goal	
Objective	
Objective	
Objective	
Outcome Measure	
Outcome Measure	
Outcome Measure	
Progress toward stated goal	

12. Describe a goal, one or more objectives and outcome measures for FY 2016-17.

Goal	
Objective	
Objective	
Objective	

Outcome Measure	
Outcome Measure	
Outcome Measure	
Progress toward stated goal	

SECTION 3: Optional Questions

Section 3 asks optional questions about evaluation, data collection, programs and services, training and technical assistance needs, and local best practices. There are 10 questions in this section. Responses will be used by the BSCC and its justice-system partners to better understand the needs of counties. If you choose not to answer an optional question, please respond “Decline to Respond.”

13. Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation? Use an “X” to check the box to the left of the list.

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If yes, how?

14. Does the county consider evaluation results when funding programs and/or services? Use an “X” to check the box to the left of the list.

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If yes, how?

15. Does the county use BSCC definitions (average daily population, conviction, length of stay, recidivism, and/or treatment program completion rates) when collecting data? Use an “X” to check the box to the left of the list.

<input type="checkbox"/>	No, BSCC definitions are not used
<input type="checkbox"/>	Average daily population
<input type="checkbox"/>	Conviction
<input type="checkbox"/>	Length of stay
<input type="checkbox"/>	Recidivism
<input type="checkbox"/>	Treatment program completion rates

16. What percentage of the Public Safety Realignment allocation is used for evidence-based programming? Use an “X” to check the box to the left of the list.

<input type="checkbox"/>	Less than 20%
<input type="checkbox"/>	21% 40%
<input type="checkbox"/>	41% 60%
<input type="checkbox"/>	61% 80%
<input type="checkbox"/>	81% or higher

17. We would like to better understand your 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?

18. What challenges does your county face in meeting these program and service needs?

19. What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

20. Describe a local best practice or promising program that has produced positive results. If data exists to support the results, please share.

21. Describe how the BSCC can assist your county in meeting its Public Safety Realignment goals through training and/or technical assistance?

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 in print and on the BSCC website.

22. Provide the contact information for the individual completing this survey in the spaces provided to the right of the list.

Name	
Organization	
Address	
Address 2	
City/Town	
ZIP Code	
Email Address	
Phone Number	

23. Identify the individual who may be contacted for follow up questions. Use an “X” to check the box to the left of the list.

	Same as above
	Other (If "Other" provide contact information below)

Name	
Organization	
Address	
Address 2	
City/Town	
ZIP Code	
Email Address	
Phone Number	

ATTENTION: This is only Part A of the Survey. Please complete Part B in Microsoft Excel which consists of two (2) budgetary sections

SUBMITTAL INSTRUCTIONS:

In a single email, please attach both the completed Part A (Word) and completed Part B (Excel) documents, including any optional photos and/or quotes, and email to:

**Helene Zentner, Field Representative
Board of State and Community Corrections
916-322-8631 or Helene.Zentner@bscc.ca.gov**

