



CREDO47 Crisis, Recovery, Engagement, Diversion and Outreach, Prop 47 (CREDO47) Program

Santa Barbara County Department of Behavioral Wellness Proposition 47 Evaluation Plan



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Table of Contents

Introduction	1
Project Background.....	1
Goals and Objectives.....	3
Research Design	3
Quantitative Data.....	3
Qualitative Data	4
Process Evaluation Measures	5
Outcome Evaluation Measures.....	7
Data Analysis.....	7
Potential Limitations	Error! Bookmark not defined.
Data Management	8
Software Programs and Storage	8
Quality Assurance	8
Human Subjects Protections.....	8
Evaluation Timeline.....	9
Appendix A. Crisis Intervention, Diversion, and Support (CREDO47) Program Logic Model.....	10



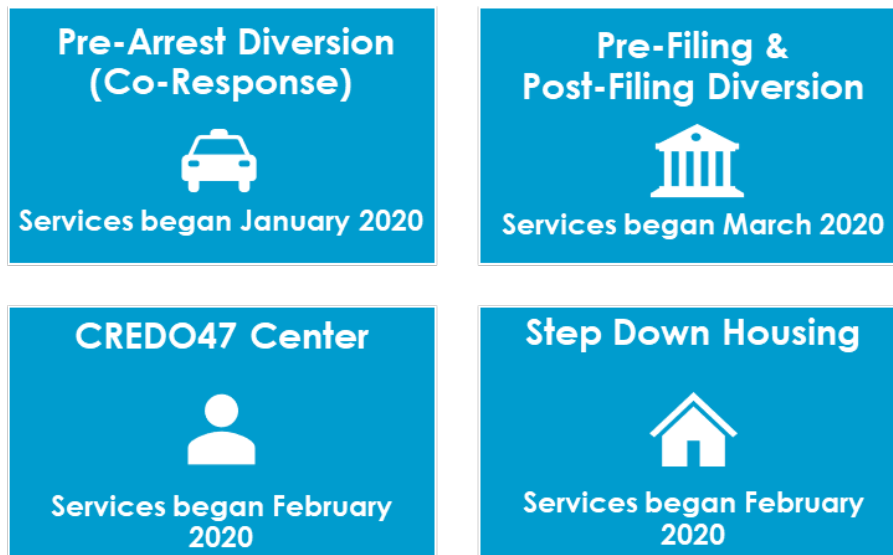
Introduction

California voters approved Proposition (Prop) 47 in November 2014 with the goal of lowering incarceration rates across the State by reclassifying certain classes of low-level, non-violent felonies as misdemeanors for individuals who do not have prior convictions for serious offenses. Due to the expected decrease in the State’s prison population, the Legislative Analyst’s Office estimated annual State correctional savings following implementation of the legislation to be between \$150-200 million. Prop 47 requires these savings to be placed in the Safe Neighborhoods and Schools Fund and mandates the Board of State and Community Corrections (BSCC) to allocate 65% of the Fund for mental health and substance use disorder (SUD) treatment that is aimed at reducing recidivism, 25% for crime prevention and to support programs in schools, and 10% for trauma recovery services for crime victims. Funds are allocated to local agencies through a competitive grant process administered by the BSCC.

Project Background

Through the BSCC’s Cohort III grant process, Santa Barbara County was awarded a \$6 million grant over 40 months to develop and implement the CREDO47 Crisis, Recovery, Engagement, Diversion and Outreach, Prop 47 (CREDO47) Program. The Santa Barbara Behavioral Wellness Department is the lead grantee, with program partners including the County Public Defender’s Office, Sheriff’s Office, District Attorney’s Office, and local community-based organizations (Good Samaritan Shelter, Family Service Agency). CREDO47 leverages the promise of Prop 47 by diverting individuals with a history of serious mental illness (SMI) and/or SUD from the criminal justice system to trauma-informed, community-based treatment services, including crisis stabilization, comprehensive mental health and SUD wraparound services, case management support, and housing assistance (see Appendix A for the program’s logic model, which depicts inputs, activities, outputs, and outcomes). Specifically, Santa Barbara County is using Prop 47 funds to implement the diversion activities and services illustrated in Figure 1.

Figure 1. CREDO47 Program Components





Diversion

- **Pre-arrest diversion through a Co-Response team.** The team includes a mental health clinician and a Sheriff's deputy who respond to behavioral health crisis calls received by the Sheriff's Office. In lieu of arrest for minor crimes (e.g., low-level misdemeanors), the Co-Response team may provide referrals and/or facilitate warm handoffs to subsequent services, including mental health stabilization support, sobering services, longer-term behavioral health treatment, social services, basic needs assistance, and housing support. In addition, in response to stakeholder feedback, a peer specialist hired by Good Samaritan will help support warm hand offs to services by working with individuals served by any CREDO47 program; we anticipate that the majority of their work will be to further ensure connection and follow through with MH and SUD treatment and community resources.
- **Pre- and post-filing diversion for individuals who have been cite-released or booked into custody.** Individuals who have been cite-released or booked into custody undergo a thorough, three-stage screening process to determine their eligibility for the CREDO47 program. Individuals with cases that are approved by the Holistic Defense Advocate, Public Defender, and, ultimately, the District Attorney, are approved for diversion and formally enrolled in the program. Clients have the opportunity to have their charges dropped or dismissed pending successful completion. Completion requirements are tailored to each individual and reflect their unique substance use and mental health needs. The peer specialist outlined in the Co-Response team description will also work with clients in pre-and post-filing diversion.

Services

- **CREDO47 Stabilization Center.** The CREDO47 Stabilization Center (formerly the Sobering Center) is led by a local community-based organization (CBO), Good Samaritan. The Center provides short-term sobering services and serves as a temporary transition space for individuals who are stepping down from jail to the community and/or entering a behavioral health residential program. Individuals can typically remain at the Center for approximately 24 hours, although longer stays are permitted on a case-by-case basis. The Center offers case management, alcohol and drug counseling, transition support, and medical care. The peer specialist outlined in the Co-Response team description will also work with clients in the CREDO47 Stabilization Center.
- **Step Down Housing.** The Step Down Housing program is led by Good Samaritan and offers four supportive housing facilities with the capacity to house up to twenty individuals with SMI and/or SUD. Individuals can reside in houses for 6 to 12 months and receive case management, behavioral health services, life skills assistance (e.g., financial literacy classes), and housing support (e.g., securing housing vouchers) in order to support resident's long-term housing and behavioral health stability. The peer specialist outlined in the Co-Response team description will also work with clients in Step Down Housing.



Goals and Objectives

As depicted in the program’s logic model (see Appendix A), CREDO47 plans to improve the lives of program participants by decreasing criminal justice and psychiatric hospitalization involvement; connecting participants to the appropriate level and type of care for their needs; and improving participants’ housing status.

Table 1. Goals and Objectives of Prop 47 Activities in Santa Barbara County

Goals	Objectives
Limit number of individuals in target population who are booked in jail.	Co-response Team to de-escalate mental health related crises that could otherwise lead to arrest and direct CREDO47 participants to behavioral health treatment services.
Connect individuals in the target population to the right level and type of care to meet their individualized needs and prevent hospitalization or jail.	Provide immediate support and engagement to successfully transition individuals to the right level of care and services for their individual needs.
Improve CREDO47 participants’ housing status.	Partner with CBOs to transition adults with SMI/SUD who come into contact with law enforcement to housing and a continuum of support programs.

Research Design

To assess the implementation and impact of the CREDO47 program, UCSB will conduct a mixed-method process and outcome evaluation. A mixed-method design maximizes validity and provides different perspectives on complex, multi-dimensional issues. For unserved, under-served, and isolated groups in particular, an evaluation design that uses both qualitative and quantitative approaches offers insights that might be overlooked by one approach alone.

To report on the process and outcome measures, UCSB will gather qualitative and quantitative data from a range of CREDO47 program partners and stakeholders. These data will provide a comprehensive understanding of how the program is implemented and support the final evaluation reports. Quantitative data findings, triangulated with qualitative data, will be analyzed and presented in the Final Evaluation Report to assess the program’s impact over the 36-month grant period.

Quantitative Data

BWell has a strong history of working with the County and nonprofit partners involved in CREDO47 implementation. Thus, BWell has access process and outcome measures through existing data collection mechanisms. In addition to agency-specific databases, the County is using the cloud-based, collaborative



work management software Vertical Change to provide a centralized data source. The quantitative data sources are presented in Table 2.

Table 2. Quantitative Data Sources

Agency	Quantitative Data Source
Behavioral Wellness	<ul style="list-style-type: none"> • Electronic Health Records • Vertical Change
CBO (Good Samaritan)	<ul style="list-style-type: none"> • Internal Tracking System • Vertical Change
Public Defender’s Office	<ul style="list-style-type: none"> • Case Management System
District Attorney’s Office	<ul style="list-style-type: none"> • Case Management System
Sheriff’s Office	<ul style="list-style-type: none"> • Jail Management System
Court	<ul style="list-style-type: none"> • Recidivism/Conviction Information (shared via Criminal Justice Data Committee)
UCSB	<ul style="list-style-type: none"> • Qualtrics

Qualitative Data

Qualitative data will be collected through interviews and focus groups, as shown in Table 3.

Table 3. Qualitative Data Sources

Qualitative Data Sources	Participants
Program Administrator Interviews and/or Focus Groups	<ul style="list-style-type: none"> • Behavioral Wellness Leadership • Public Defender Leadership • Sheriff’s Office Leadership • District Attorney Leadership • Good Samaritan Leadership
Staff Interviews and/or Focus Groups	<ul style="list-style-type: none"> • Co-Response Team • Pre- and post-filing screening staff • CREDO47 Stabilization Center staff • Step Down Housing staff
Participant Interviews and/or Focus Groups	<ul style="list-style-type: none"> • CREDO47 Stabilization Center • Pre- and Post-Filing Diversion participants • Step-Down Housing participants

Interviews with program administrators will provide context about program implementation, particularly regarding the elements that respondents believe have contributed to or hindered program outcomes. Staff interviews and/or focus groups will help UCSB better understand the program delivery model on the ground, including its strengths and challenges. Interviews and/or focus groups with CREDO47 program



participants will provide information about their experiences with accessing and receiving CREDO47 services and supports, as well as what they feel works well and areas for improvement. UCSB will adapt data collection efforts to meet the needs of participants, which may involve Spanish translation and offering focus groups in multiple locations across the County.

UCSB will use these interviews and focus groups to identify successes and challenges in program implementation and to understand key aspects of the program that will inform our interpretation of the outcome results.

Process Evaluation Measures

Process measures provide an understanding about how CREDO47 is being implemented, if implementation is in fidelity to the original program model, successes and challenges experienced in implementation, and potential points for improvement. UCSB will report on quantitative process measures that document program activities and qualitative process measures that provide context about program implementation. Table 4 presents the process measures to be tracked through this evaluation, pending data availability.

Table 4. Process Measures

Activities	Location	Quantitative Data	Qualitative Data
Stage 1: Engagement and Screening	Pre-Arrest Diversion (Co-Response)	<ul style="list-style-type: none"> • Source of calls • # crisis responses • # proactive engagement activities • Results of screenings • # individuals eligible for diversion to treatment services • # individuals choosing to participate • Demographics of screened individuals¹ 	<ul style="list-style-type: none"> • Barriers and facilitators to providing outreach, screening, and referrals • Coordination between and within CIT teams • Coordination re: pre- and post-filing between PD and the DA • Implementation of screenings • Participant experiences with outreach and screening activities • Reasons participants choose to participate
	Pre-Filing and Post-Filing Diversion	<ul style="list-style-type: none"> • Participant charge • # individuals screened • Results of screenings • # individuals found eligible to participate • # individuals choosing to participate • # individuals recommended for diversion • # individuals enrolled in diversion • # and type of referral to mental health or substance use treatment • Demographics of screened individuals 	

¹ Demographic information will be collected as available at each stage of the program



Activities	Location	Quantitative Data	Qualitative Data
Stage 2: Crisis Stabilization and Linkages	CREDO47 Center	<ul style="list-style-type: none"> • # individuals admitted • Types of Substances Used by individuals • Reason(s) for individuals' admission (sobering, transition from jail, transition to treatment) • # referrals to behavioral health and housing services, by referral type • Participant demographics 	<ul style="list-style-type: none"> • Barriers and facilitators to successful delivery of stabilization services and service linkages • Participant experiences and satisfaction with stabilization services and service linkages • Participant experiences and satisfaction with clinicians, case managers, and other staff
	SCCS Hub	<ul style="list-style-type: none"> • # individuals linked to SCCS services • # individuals who engaged in longer term behavioral health services • Participant demographics 	
Stage 3: Treatment and Services	Step- Down Housing Services	<ul style="list-style-type: none"> • # participants enrolled • # bed days and lengths of stay in Step-Down Housing program • # participants receiving services, by type of services • Participant demographics • Participant goals (education, employment, housing) 	<ul style="list-style-type: none"> • Barriers and facilitators to successful delivery of treatment and services • Participant experiences with treatment and services; and with clinicians, case managers, and other staff
	Behavioral Health Services	<ul style="list-style-type: none"> • # participants who receive Behavioral Health treatment and services, by type and length of time • Participant demographics • Participant goals (education, employment, housing) 	



Outcome Evaluation Measures

In conjunction with process evaluation measures, UCSB will also collect a range of data for the outcome evaluation, which will assess the impact of the CREDO47 program. CREDO47 outcome measures include quantitative data that indicates changes in participant outcomes and qualitative data that provides insight into how and why services impacted participants. The outcome data to be collected, analyzed, and reported through this evaluation, pending data availability, is displayed in Table 5.

Table 5. Outcome Evaluation Measures

Goals	Objectives	Quantitative Data	Qualitative Data
Limit number of individuals in target population who are booked in jail.	Co-response Team to de-escalate mental health related crises that could otherwise lead to arrest and direct CREDO47 participants to behavioral health treatment services.	Of people with a co-response contact and an arrestable offense, less than 10% are arrested and booked in jail.	Staff and participant interviews will provide insight into how the team addresses mental health crisis, what is helpful, and what outcomes occur.
Connect individuals in the target population to the right level and type of care to meet their individualized needs and prevent hospitalization or jail.	Provide immediate support and engagement to successfully transition individuals to the right level of care and services for their individual needs.	Of CREDO47 clients in Sobering Center and in Pre- and post-filing diversion will, on average, score in the “agree” to “strongly agree” range on the perception of quality and appropriateness domain of the consumer survey.	Interviews with program administrators, staff, and participants will provide details about what processes and services have been most helpful to engage clients.
Improve CREDO47 participants’ housing status.	Partner with CBOs to transition adults with SMI/SUD who come into contact with law enforcement to housing and a continuum of support programs.	Of CREDO47 clients in Step Down Housing, 75% will be housed at discharge, according to case manager report.	Staff and participant interviews will help understand nuances of housing support.

Data Analysis

Individual-level quantitative data will be analyzed to calculate service referrals and enrollments to understand how participants flow through the CREDO47 program and identify the backgrounds (e.g., demographics, needs) of individuals receiving CREDO47 services. UCSB will calculate descriptive statistics (e.g., means, frequencies, percentages) to examine the specific attributes of participants such as race/ethnicity, gender, housing, clinical profile (e.g., primary diagnosis, presence of co-occurring substance abuse disorder, etc.), and service history, as well as the types of services received through CREDO47, and rates of program completion. Data will inform the process and outcome objectives and may also inform higher level research questions.



A consumer satisfaction survey will be given to clients in Step Down Housing, the Sobering Center, and Pre- and post-filing diversion approaching or at discharge. The consumer satisfaction survey will be administered by program staff but all data will be entered into Qualtrics, a web-survey system hosted by UCSB. Thus, clients will have the opportunity to provide anonymous program feedback. No identification or tracking will be used; data will be reported in aggregate.

Qualitative data—collected from program administrators, program staff, program partners, and participants—will provide key insights and perspectives into the facilitators, barriers, and outcomes of the CREDO47 program. UCSB will employ a framework analysis approach to analyze qualitative data. Through this approach, UCSB will identify commonalities and differences in perspectives of project stakeholders, staff, and participants. UCSB will compare qualitative thematic responses to quantitative data in order to identify areas of convergence and divergence. In this way, the qualitative and quantitative analyses will complement one another to produce a well-rounded picture of program implementation and outcomes.

Data Management

Software Programs and Storage

Santa Barbara County will not share PHI with UCSB; the CREDO47 internal evaluator will clean, aggregate, and de-identify all data prior to sharing with UCSB. UCSB will use Excel and SPSS to conduct analyses. When utilizing SPSS, UCSB develops syntax and coding files to document cleaning and analytic processes. All data collected for this evaluation will be aggregated, de-identified, and transferred via a secure SFTP site and stored on a password-protected computer in a secure drive. UCSB will not receive identifying information other than dates of services.

Quality Assurance

To ensure quantitative data availability and shared understandings of data definitions, BWell will provide technical assistance with agencies providing quantitative process and outcome data. As needed, BWell will hold data meetings with the program staff data leads to ensure clear understanding of the processes behind the data collection and entry, as well as the data and variables themselves. During quality control, the internal evaluator will clean the data for use in analysis. The internal evaluator will identify any duplicate entries, merge data across sources, explore patterns of missing data, and format data into the appropriate analytic structure to allow calculations of all measures to be included in the quarterly reports, annual reports, and final report. UCSB will analyze and report data as needed for continuous progress monitoring and the final evaluation report.

Human Subjects Protections

For all methods, UCSB will employ procedures to safeguard respondent rights including obtaining informed consent, ensuring confidentiality and voluntary participation, limiting access to identifying information, and properly securing data. Study protocols, consent forms, and primary data collection instruments will be reviewed through UCSB's Institutional Review Board (IRB) for approval.



Evaluation Timeline

UCSB’s three-part evaluation approach includes 1) a collaborative evaluation planning process, 2) a final evaluation at the end of the grant period, and 3) ongoing collaboration with the Behavioral Wellness, the District Attorney’s Office, the Sheriff, Good Samaritan, Family Service Agency, and other program partners and stakeholders. Figure 2 on the following page provides a detailed timeline of each evaluation phase. The first phase will lay groundwork for the evaluation to come by drawing from local knowledge, experience, and vision to develop a finalized Local Evaluation Plan. In the second phase, we will work with program partners to refine evaluation activities based on learnings to date, and will focus on program effectiveness and outcomes, whether CREDO47 met its goals and objectives, and which program components supported or hindered program success. Throughout, all reporting will be geared to meeting BSCC evaluation requirements while also providing useful and actionable information to Behavioral Wellness and other program partners so that lessons learned over the course of the grant can inform long-term program design and service systems.

Figure 2. Evaluation Timeline

	Q4 2022	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025	Q2 2025	Q3 2025	Q4 2025	Q1 2026	Q2 2026
Phase 1: Evaluation Planning															
Project Kickoff Call	█														
LAC Presentation		█													
Develop Evaluation Plan	█														
Refine Evaluation Plan		█													
Evaluation Technical Assistance		█	█	█	█	█	█	█	█	█	█	█	█	█	█
Establish Data Sharing Agreements	█	█													
Obtain IRB Approval		█													
Phase 2: Final Evaluation															
<i>Data Collection Planning</i>			█												
<i>Data Collection</i>															
Identify Respondents, Develop Protocols		█													
Interview with CREDO47 Partners															
Focus Groups with CREDO47 Staff															
Focus Groups with CREDO47 Participants															
Obtain Administrative Data															
<i>Analysis</i>															
Quantitative Data Analysis															
Qualitative Data Analysis															
<i>Reporting</i>															
Draft Report															
Finalize Report															
Present Findings															
Ongoing Project Activities															
Check-in Calls	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
Ongoing Communications & Project Management	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
Quarterly Evaluation Reports	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█



Appendix A. Crisis Intervention, Diversion, and Support (CREDO47) Program Logic Model

Process			Outcome	
Inputs <i>What do we contribute to accomplish our activities?</i>	Activities <i>What activities does our program offer to accomplish our goals?</i>	Outputs <i>Once we complete our activities, what is the evidence of service delivery?</i>	Short- & Middle-Term <i>What changes do we expect to see during engagement period?</i>	Long-Term <i>What changes do we expect to see during engagement period?</i>
<p>Funding</p> <ul style="list-style-type: none"> BSCC Prop 47 grant funding Leveraged funds <p>Leadership, Oversight, and Staffing</p> <ul style="list-style-type: none"> Partnerships <ul style="list-style-type: none"> Public Defender Behavioral Wellness Sheriff's Office District Attorney Good Samaritan Family Service Agency Local Advisory Committee <p>EBPs</p> <ul style="list-style-type: none"> Trauma-Informed Care Cognitive Behavioral Therapy Motivational Interviewing Grounding Techniques <p>Existing Services & Resources</p> <ul style="list-style-type: none"> South County Crisis Service Hub (SCCS) Crisis Stabilization Unit (CSU) Crisis Intervention Team (CIT) & Mobile Crisis Response (MCR) Psychiatric Health Facility (PHF) Crisis Residential Treatment (CRT) program for mental health stabilization Residential Treatment Programs (RTPs) for substance use treatment Individualized outpatient services Homeless shelters 	<p>Stage 1 Engagement and Screening</p> <ul style="list-style-type: none"> Co-response (CoR) screening in the field Engagement and screening at pre- and post-filing <p>Stage 2 CREDO47 Stabilization Center</p> <ul style="list-style-type: none"> Alcohol and drug counseling Medical care Case management & linkage to treatment Transportation from jail discharge and to treatment Transportation to/from CREDO47 Center <p>South County Crisis Service Hub (SCCS)</p> <ul style="list-style-type: none"> Medical screening Participant needs assessment Linkages to other services and resources <p>Stage 3 Step-Down Housing</p> <ul style="list-style-type: none"> Housing Case management Transportation <p>Other County Behavioral Health Services</p> <ul style="list-style-type: none"> Outpatient treatment Residential treatment 	<p>Stage 1 Engagement and Screening</p> <ul style="list-style-type: none"> CoR Team <ul style="list-style-type: none"> Source of calls CoR team receives # crisis response & engagement activities by CoR team Results of screenings # individuals eligible for diversion to Sobering Center & SCCS Hub treatment Pre- and post-filing Diversion <ul style="list-style-type: none"> # individuals screened & results # individuals found eligible & # choosing to participate # and type referral to mental health or substance use treatment <p>Stage 2 CREDO47 Center and SCCS</p> <ul style="list-style-type: none"> # individuals admitted and assessed (when appropriate) # receiving services & type of services provided # of referrals to behavioral health and housing services <p>Stage 3 Step-Down Housing</p> <ul style="list-style-type: none"> # receiving housing # bed days # receiving services & type of services provided (e.g., transportation, case management) <p>Other County Behavioral Health Services</p> <ul style="list-style-type: none"> # receiving services & type of services provided 	<p>Behavioral Health</p> <ul style="list-style-type: none"> Reduced crisis system encounters Reduced psychiatric hospitalizations Engagement in referred treatments Improved behavioral health functioning <p>Housing</p> <ul style="list-style-type: none"> Increased housing stability <p>Criminal Justice</p> <ul style="list-style-type: none"> Improved public safety Decreased number of jail bookings for program participants <p>Community Partnership</p> <ul style="list-style-type: none"> Increased collaboration between county and community service providers 	<p>Behavioral Health</p> <ul style="list-style-type: none"> Positive outcomes related to behavioral health treatment Improved quality of life Step-down in levels of care <p>Housing</p> <ul style="list-style-type: none"> Maintained housing stability <p>Criminal Justice</p> <ul style="list-style-type: none"> Improved public safety Reduced recidivism for program participants Reduced burden on jail system <p>Community Partnership</p> <ul style="list-style-type: none"> Expanded and sustained diverse network of county and community service providers