

HUMBOLDT COUNTY

Community Corrections Partnership (CCP) Plan Implementation

In FY 2011-12, 2012-13 and or 2013-14 identify the community corrections programs and or services implemented (e.g. program or service was operational) by CCP agencies (e.g. Probation Department, Sheriff's Department, Department of Public Health, etc.).

County-provided programs and services include:

- October 2011: Implementation of assessments and evaluations; increased subsidies for alcohol, drug treatment and support services for criminal offenders; and implementation of Group Therapy and Cognitive Behavioral Therapy (Thinking for a Change, Moral Reconciliation Therapy and Cognitive Behavioral Interventions) with AB 109 population.
- April 2012: Opening of Community Corrections Resource Center (CCRC) and implementation of pre-trial/jail alternative program.
- June 2012: Community Based Organizations (CBOs) implemented multi-disciplinary team process for integrated case management and decisions making.
- October 2013: Re-entry navigator positions authorized to assist with offender case management and linkages to community services/programs.

In FY 2011-12, 2012-13 and 2013-14 the CCP plan adopted by the Board of Supervisors included the following areas derived from Penal Code section 1230.1

| | FY 2011-12 | FY 2012-13 | FY 2013-14* |
|--|------------|------------|-------------|
| Community Service Programs | | | |
| Counseling Programs | ✓ | ✓ | ✓ |
| Day Reporting Center | ✓ | ✓ | ✓ |
| Drug Courts | | | |
| Educational Programs | ✓ | ✓ | ✓ |
| Electronic and GPS Monitoring Programs | ✓ | ✓ | ✓ |
| Mental Health Treatment Programs | ✓ | ✓ | ✓ |
| Residential Multiservice Centers | | | |
| Victim Restitution Programs | | | |
| Work Training Programs | ✓ | ✓ | ✓ |

*FY 2012-13 and FY 2013-14: The county continued and/or enhanced all evidence-based programs and practices found in FY 2011-12.

Describe an accomplishment or highlight (as defined by the CCP) achieved in FY 2011-12 and or 2012-13.

Established CCRC near courthouse and filled most core positions rapidly; established "crosswalk" service for mental health clients (both AB109 and non-AB109) from jail to CCRC to stabilize in community and reduce likelihood of return to custody; multi-disciplinary team process established/implemented on all AB109 and pre-trial cases; contract treatment services with CBO's implemented for alcohol/drug treatment/detox, sex offender treatment and residential services; managed jail population by expanding jail alternative programs to reserve jail beds for highest risk offenders; Sheriffs Work Alternative Program expansion, participant fee subsidy, Electronic Monitoring/GPS program implemented for probation Post Release Community Supervision (PRCS)/Mandatory Supervision violators; established pre-trial release pilot program and secured grant funding, and trained multiple agencies on evidence-based practices.

Describe a local success story (as defined by the CCP).

- An offender anxious to find any type of work met with vocational counselor and was placed at Job Market. After completing a landscaping work experience placement he found employment full time at a prominent hotel as a maintenance worker. After assistance with résumé preparation and purchase of basic tools, he has since transitioned to a well-paying job in construction.
- A female offender released from the California Department of Corrections and Rehabilitation in October entered directly into a residential drug treatment program. The individual successfully completed the program and returned to her home on the Indian reservation, engaging in outpatient alcohol and drug services/supports on the reservation. Though her brother died in an auto accident, the offender utilized her supports and remained clean/sober. She was discharged successfully from PRCS in July 2013.

For FY 2011-12, 2012-13 and 2013-14 rank the priority areas^ of the CCP on a scale from 1 to 9. A rank of 1 indicates that area was the HIGHEST priority (as defined by the CCP) and a rank of 9 indicates that area was the LOWEST priority (as defined by the CCP).

| FY 2011-12 | FY 2012-13 | FY 2013-14 |
|--------------------|--------------------|--------------------|
| 1. Day Reporting | 1. Day Reporting | 1. Day Reporting |
| 2. Staffing | 2. Staffing | 2. Staffing |
| 3. GPS | 3. GPS | 3. GPS |
| 4. Risk Assessment | 4. Risk Assessment | 4. Risk Assessment |
| 5. Health | 5. Health | 5. Health |
| 6. Staff Training | 6. Staff Training | 6. Staff Training |
| 7. Medical | 7. Medical | 7. Medical |
| 8. Data | 8. Data | 8. Data |
| 9. Law Enforcement | 9. Law Enforcement | 9. Law Enforcement |

[^]Priority areas are representative of the information counties included in the FY 2011-12 and 2012-13 CCP plans and the information BSCC received from counties and published in the *report 2011 Public Safety Realignment Act: Report on the Implementation of Community Corrections Partnership Plans*.

Priority areas: Day Reporting Center, Data (e.g. data identification, collection, analysis, etc.), GPS/Electronic Monitoring, Staff Training (e.g. Probation Dept., District Attorney’s Office, etc.), Local Law Enforcement (municipal police), Public Health/Mental Health (e.g. substance abuse, treatment, etc.), Medical Related Costs, Risk Assessment Instruments (COMPAS, STRONG, etc.), and Staffing (e.g. Victim Witness Advocate, Deputy Sheriff, Deputy Probation Officer, etc.).