



---

**Proposition 47: Contra Costa Holistic Intervention Partnership (HIP) Local  
Evaluation Plan**

**Submitted to**

**Board of State and Community Corrections**

**By**

**Aili Malm, Ph.D.  
Dina Perrone, Ph.D.**

**School of Criminology, Criminal Justice and Emergency Management  
California State University Long Beach  
1250 Bellflower Boulevard  
Long Beach, CA 90840-4603  
(562) 985-0438**

**January 15, 2023**

---

---

## Table of Contents

Project Background.....	1
Local Evaluation Plan .....	2
Process evaluation.....	3
Outcome and costing evaluation.....	3
Logic model.....	7
Local evaluation timeline.....	8

## Table of Figures and Tables

### Tables

Table 1: List of outcome variables and their department sources .....	4
Table 2: Local evaluation logic model .....	7

### Figures

Figure 1: Local evaluation plan at a glance .....	2
---	---

## Project Background

The local evaluator team at CSULB was contracted by the Contra Costa County Office of the Public Defender to conduct a local evaluation of the Holistic Intervention Partnership (HIP) in Contra Costa County. This report documents our evaluation plan.

Across California, more than a million misdemeanor cases are filed every year; these cases are the primary way that most individuals experience the criminal legal system. In Contra Costa County, a large county with a population of 1.1 million, 74.9% of criminal cases prosecuted in 2018 were misdemeanors. Due to their volume, misdemeanors demand extensive resources from all criminal legal system partners—law enforcement, prosecutors, courts, jails, and indigent defense providers. For individuals, the collateral consequences of a misdemeanor arrest can be devastating and long-lasting, hampering access to employment, housing, and other essentials—even if they are not convicted.

Many of those charged with misdemeanors are repeatedly involved in the criminal legal system and are also frequent utilizers of other systems, accounting for a disproportionate share of the County's expenditures across multiple sectors, particularly in healthcare and homeless services. In the most extreme cases, the multi-system fiscal impact can run into the millions of dollars for a single person. Contra Costa County has emerged as a statewide leader in innovative and collaborative justice programming, particularly for individuals reentering communities after incarceration. Various County agencies and community-based organizations (CBOs) have developed specialized initiatives in areas such as housing, behavioral health services, and indigent legal services, which address the needs of justice-involved individuals, as well as a County task force to rectify racial and ethnic disparities in the criminal legal system. For example, in 2016, the Contra Costa Public Defender's Office (CCPD) launched the Misdemeanor Early Representation Program (EarlyRep), a unique partnership with law enforcement agencies (LEAs) and one of a few programs nationwide that extends legal representation to indigent individuals immediately at the time of police contact. EarlyRep has increased court appearance rates and reduced unnecessary incarceration due to bench warrant arrests. However, the acute needs of these individuals are not limited to criminal defense legal services and often include time-sensitive housing, mental health, substance use disorder (SUD), and civil legal needs, which can contribute to a vicious cycle of further system involvement.

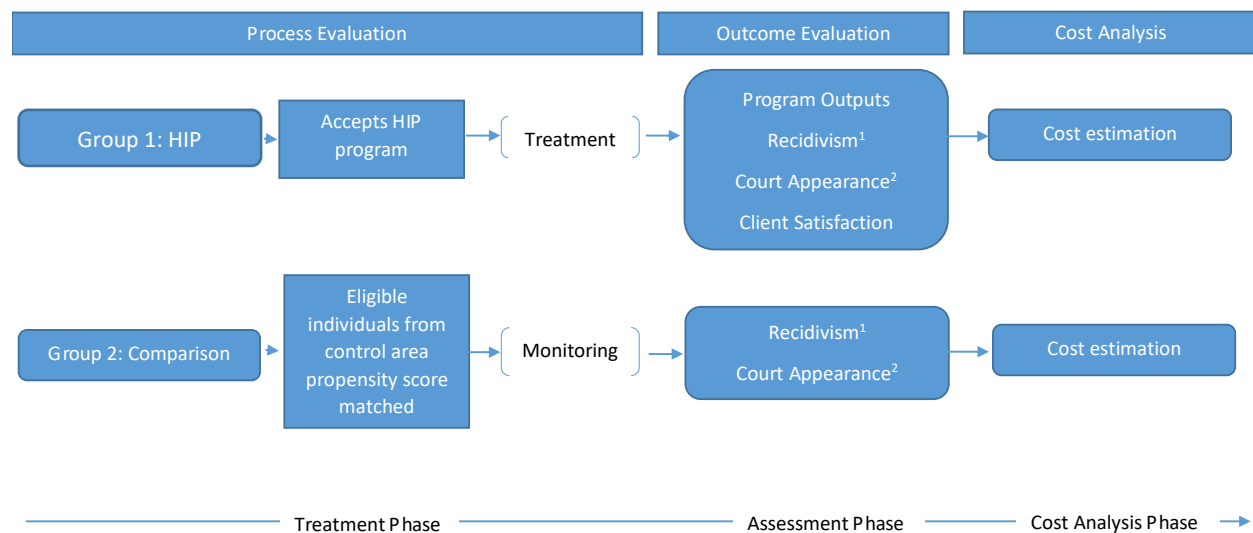
To respond to these needs, in July 2020 CCPD launched an enhancement initiative: the Holistic Intervention Partnership (HIP), a collective impact effort to improve outcomes for this population. Funded by an Edward Byrne Memorial Justice Assistance Grant totaling \$3.1M over 3.5 years (ending March 2023), HIP knits together a tightly integrated, multidisciplinary team of public agencies and community-based organizations. With its current six-person team (three at CCPD, three at community-based organizations), HIP provides a level of case management and coordination for indigent, public-defense clients whose complex challenges require a type of support otherwise unavailable to them: integrated case-planning and tracking; civil legal aid to remedy collateral consequences of arrest, such as employment, driver's license suspension, and housing; transportation to court and other services; drop-in peer support and on-site services at the multi-agency Reentry Success Center; and a limited amount of flexible funding to increase access to housing. In less than two years since its start and despite the concurrent emergence of the COVID-19 epidemic, HIP has served 296 unduplicated clients (118% of the project's total, three-year goal) who engage with HIP for an average of 145 days. To date, the rate of failure to appear (FTA) for HIP clients is only 12.33%; further, 52% of HIP's clients have had no additional

charges filed, a remarkable finding given this population’s typically high levels of persistent system involvement. Given these results, it is no surprise that a diverse set of stakeholders – including the DA, LEAs, and racial justice advocates – report high rates of satisfaction with HIP, citing strong communication and coordination, access to enhanced resources, and relationship-building as key factors. It is evident that in the six years since Early Rep’s start and the less than two years of HIP, CCPD has demonstrated the systemic and individual benefits of developing a ladder approach to foster procedural justice for thousands of indigent people arrested on misdemeanor offenses while also establishing a dedicated team to provide coordinated support to hundreds of higher-needs clients. Indeed, an initial process evaluation of HIP affirmed the value of this approach, which has enhanced inter-agency capacity and leveraged existing resources to improve outcomes for its clients.

However, in this same evaluation, HIP’s partners also report concerns related to sustainability, caseloads, and scalability, specifically identifying the need to increase both staffing and services to better correspond with the size and needs of this population. In the current project, funded by a Proposition 47 grant, Contra Costa will enhance and expand HIP to serve 900 people over three years, tripling the current designed capacity. The team at CSULB will conduct a process, outcome, and costing evaluation of HIP and its expansion.

## Local Evaluation Plan

Figure 1: Local evaluation plan at a glance



<sup>1</sup> Criminal history retrieval through California Department of Justice.

<sup>2</sup> Court appearance data retrieval through CoCo County Public Defender’s Office.

Figure 1 provides a *birds-eye* picture of the HIP evaluation, which consists of three parts:

1. process evaluation
2. outcome evaluation
3. cost analysis

## Process evaluation

In line with prior research on the viability of policy evaluations, we plan to collect several forms of data and use multiple methodologies to analyze the implementation of the HIP program. The process evaluation seeks to describe HIP development and HIP implementation. The process evaluation can inform other cities/counties/states of best practices and challenges in developing and implementing a program like HIP. The process evaluation will answer the following research questions:

1. What were the barriers and facilitators to program implementation? How were barriers addressed?
2. What are HIP's strengths and areas for improvement?
3. Who was trained and what was the nature of training received for HIP implementation?
4. What are the perceptions of HIP amongst the target population and HIP stakeholders?
5. What advice would partners give to cities, counties, and states seeking to implement a HIP program?

The process evaluation involves three components: 1) document analyses, 2) stakeholder interviews/focus groups, and 3) analysis of the HIP client surveys.

In the first component of the process evaluation, policy documents relating to the implementation of HIP will be reviewed. Relevant data include: the grant application, annual work plans, all iterations of the policy and procedure documents (e.g., public outreach and communications strategies), all iterations of protocols (e.g., MDT protocol) and forms used and developed, MOUs, and stakeholder meeting minutes and/or PowerPoint slides (if used). These data will be analyzed using a content analysis, in which textual data are coded to identify the development and implementation phases of HIP.

In the second component of the process evaluation, data are derived from interviews and focus groups conducted with HIP stakeholders and implementers. Specifically, HIP-hired staff including the assistant public defender, the project coordinator, the client service specialist, the legal assistant, the community service navigators, the civil legal aid, the housing navigators, and the coordinated outreach referral worker will be interviewed within the first three months of implementation and biannually. Transcripts of the focus groups/interviews will be analyzed to identify facilitators of and obstacles to implementation.

In the final component of the process evaluation, client survey data will be analyzed. Survey items include theoretically derived measures of program effectiveness, procedural justice, and life satisfaction as well as demographic and attitudinal data.

## Outcome and costing evaluation

The purpose of the outcome and costing evaluation is to assess the effect of the HIP program on program outputs, recidivism, court outcomes, and criminal justice system vs. program costs. The outcome and costing evaluation is designed to answer the following research questions:

1. Does HIP help facilitate access to services?
  - a. Legal
  - b. Housing
  - c. Behavioral health and/or SUD
  - d. Benefit programs

- e. Community services
2. Does HIP improve court case outcomes?
  - a. Do they appear at scheduled court dates?
  - b. Do they avoid bench warrants without arrest?
3. Does HIP reduce administrative recidivism?
4. Does HIP reduce new arrest/case recidivism?
5. In relation to HIP program costs, does HIP reduce criminal justice costs?

To answer question 1, we will collect program output data for HIP recipients on an annual basis (see Table 1). We will deliver an annual report to Program Management and to the Steering Committee in September of each program year (2024, 2025, and 2026).

To answer questions 2 through 5, we will collect administrative data on two groups (see Figure 1):

Group 1: HIP

Group 2: System-as-usual comparison

The system-as-usual comparison group will be comprised of individuals from areas of the county that are served by LEAs that are not HIP partners (21 of the 25 LEAs in the county). Case management, based out of the Contra Costa Office of the Public Defender, will provide court case outcome data on all or a portion (depending on number) of HIP eligible individuals from comparison areas. Propensity score matching will be used to create a group that is comparable on key demographic and outcome variables.

The two groups will be compared on the key outcome areas. The key areas will be measured using variables collected from key stakeholders (see Table 1). We will collect criminal history, case outcome and costing data in year three and deliver a local evaluation report to Program Management and then to the Steering Committee in September of 2023.

*Table 1: List of outcome variables and their department sources*

Variable	Department Source
<b>Client Identification/Demographics</b>	
HIP Intake Date	CoCo Office of the Public Defender (Client Intake Form)
HIP Exit Date	CoCo Office of the Public Defender (New Data System)
HIP ID#	CoCo Office of the Public Defender (Client Intake Form)
Current Location	CoCo Office of the Public Defender (Client Intake Form)
How Long in Current Location	CoCo Office of the Public Defender (Client Intake Form)
DOB	CoCo Office of the Public Defender (Client Intake Form)
Gender	CoCo Office of the Public Defender (Client Intake Form)
ERP Enrollment	CoCo Office of the Public Defender (New Data System)
Transgender	CoCo Office of the Public Defender (Client Intake Form)
Sexual Orientation	CoCo Office of the Public Defender (Client Intake Form)
Race/Ethnicity	CoCo Office of the Public Defender (Client Intake Form)
<b>Client Case Information</b>	
Date of incident	CoCo Office of the Public Defender (Client Intake Form)
Charges	CoCo Office of the Public Defender (Client Intake Form)

Other Cases	CoCo Office of the Public Defender (Client Intake Form)
Major Case Type	CoCo Office of the Public Defender (New Data System)
<b>Financial/Employment</b>	
Employment Status	CoCo Office of the Public Defender (Client Intake Form)
Ever Been Employed	CoCo Office of the Public Defender (Client Intake Form)
Highest Level of Education	CoCo Office of the Public Defender (Client Intake Form)
Public Assistance	CoCo Office of the Public Defender (Client Intake Form)
# of Employment Program Referrals	CoCo Office of the Public Defender (Client Intake Form)
Employment Programs Referred To	CoCo Office of the Public Defender (Client Intake Form)
Public Assistance Goals	Community Service Partner
Public Assistance Goals Achieved	Community Service Partner
<b>Client Assessment</b>	
On Probation or Parole	CoCo Office of the Public Defender (Client Intake Form)
Mandated to DV or Anger Management	CoCo Office of the Public Defender (Client Intake Form)
Mandated to DUI Classes	CoCo Office of the Public Defender (Client Intake Form)
# of MDTs Convened	CoCo Office of the Public Defender (New Data System)
<b>Substance Abuse</b>	
Alcohol/Substance Abuse Problem	CoCo Office of the Public Defender (Client Intake Form)
Drug of Choice	CoCo Office of the Public Defender (Client Intake Form)
Method of Use	CoCo Office of the Public Defender (Client Intake Form)
Mandated to Drug Treatment Program	CoCo Office of the Public Defender (Client Intake Form)
How Long for Drug Treatment	CoCo Office of the Public Defender (Client Intake Form)
In Recovery or Attending 12-step	CoCo Office of the Public Defender (Client Intake Form)
# of Drug Treatment Referrals	CoCo Office of the Public Defender (Client Intake Form)
Drug Treatment Programs Referred To	CoCo Office of the Public Defender (Client Intake Form)
<b>Medical</b>	
Health Concerns	CoCo Office of the Public Defender (Client Intake Form)
Currently Taking Medications	CoCo Office of the Public Defender (Client Intake Form)
Treated for Mental Health Issues	CoCo Office of the Public Defender (Client Intake Form)
Health Insurance	CoCo Office of the Public Defender (Client Intake Form)
# of Behavioral Health Referrals	Behavioral Health Partner
Behavioral Health Programs Referred To	Behavioral Health Partner
# of Medical Referrals	CoCo Office of Public Defender (Client Intake Form)
<b>Family</b>	
Restraining Order Pending	CoCo Office of the Public Defender (Client Intake Form)
Marital Status	CoCo Office of the Public Defender (Client Intake Form)
Number of Children	CoCo Office of the Public Defender (Client Intake Form)
How Many Children Live with Client	CoCo Office of the Public Defender (Client Intake Form)
# of Child Support Program Referrals	CoCo Office of the Public Defender (Client Intake Form)
<b>Housing</b>	
Housing Status	CoCo Office of the Public Defender (Client Intake Form)
Where is Housing	CoCo Office of the Public Defender (Client Intake Form)
# of Housing Referrals	CoCo Office of the Public Defender (Client Intake Form)
Housing Programs Referred To	CoCo Office of the Public Defender (Client Intake Form)
Housing Goals Achieved	Housing Partner
<b>Legal Services</b>	



# of Legal Service Referrals	CoCo Office of the Public Defender; Legal Services Partner
Types of Legal Service Referrals	CoCo Office of the Public Defender; Legal Services Partner
Hours of Legal Services Provided	CoCo Office of the Public Defender (New Data System)
Legal Service Goals	Legal Services Partner
Legal Service Goals Achieved	Legal Services Partner
<b>Community Services</b>	
Community Service Referrals	CoCo Office of the Public Defender (New Data System)
# of Transportation Assistance	CoCo Office of the Public Defender (New Data System)
Assigned to Community Service Navigator	CoCo Office of the Public Defender (New Data System)
Community Service Goals	Community Service Partner
Community Service Goals Achieved	Community Service Partner
<b>Recidivism Outcomes</b>	
Number of Felony Cases	CoCo Office of the Public Defender
Number of Misdemeanor Cases	CoCo Office of the Public Defender
Number of Felony Arrests	CoCo Office of the Public Defender
Number of Misdemeanor Arrests	CoCo Office of the Public Defender
<b>Court Outcomes</b>	
# of Court Appearances	CoCo Office of the Public Defender (New Data System)
# of Bench Warrants	CoCo Office of the Public Defender (New Data System)

## Logic model

The logic model describes the Contra Costa HIP program inputs, activities, outputs, and outcomes (see Table 2).

Table 2: Local evaluation logic model

Inputs	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>- 1 dedicated Project Coordinator;</li> <li>- 2 Client Services Specialists;</li> <li>- 1 Legal Assistant;</li> <li>- 2 Community Service Navigators;</li> <li>- 2 Civil Legal Aid Attorney (1 Bilingual);</li> <li>- 1 Housing Navigator;</li> <li>- 1.5 Housing Case Manager</li> <li>- 1 Social Worker;</li> <li>- 1 Bilingual Attorney/Immigration Specialist;</li> <li>- 1 Bilingual Immigration Legal Assistant;</li> <li>- Early buy-in and collaboration with key partners.</li> </ul>	<ul style="list-style-type: none"> <li>- Train HIP staff on best practices in client-centered service delivery;</li> <li>- Refine client intake protocols, assessment and screening tools;</li> <li>- Form and convene MDTs for case coordination and conferencing;</li> <li>- Proactively identify and enroll HIP participants;</li> <li>- Assess client needs, develop case management plans, provide intensive case management services, and track progress against case management plans;</li> <li>- Assist participants with their criminal legal cases beginning in pre-filing phase;</li> <li>- Based on client needs assessments, provide clients with: appropriate housing; diversion services; transportation to court/community-based services; connections to behavioral health and SUD programs/services; civil legal services; enrollment in government-funded benefits programs; community-based services through Community Service Navigators; other services.</li> </ul>	<ul style="list-style-type: none"> <li>- Increase HIP's caseload to annually serve 300 indigent, mentally ill clients arrested on misdemeanors or wobblers;</li> <li>- 100% of HIP participants screened in line with HIP intake protocols;</li> <li>- 100% of HIP clients have a case management plan and receive case management services;</li> <li>- 100% of HIP participants assisted with their legal cases;</li> <li>- 300 participants provided with appropriate housing;</li> <li>- 100% of participants offered transportation assistance in making court dates and other critical services;</li> <li>- 100% of participants assessed with behavioral health or SUD needs offered placement in harm reduction programs and other behavioral health services;</li> <li>- 100% of participants with civil legal needs receive civil legal aid services;</li> <li>- 100% of participants are advised of other available services and programs;</li> <li>- 100% of those interested are connected to these services and programs.</li> </ul>	<ul style="list-style-type: none"> <li>- Increase in participants' access to services;</li> <li>- Increase in participants' access to housing;</li> <li>- Increase in participants' court appearance rates;</li> <li>- Decrease in participants' one-year administrative recidivism;</li> <li>- Decrease in participants' one-year new offense recidivism;</li> <li>- Cost savings to the county.</li> </ul>

