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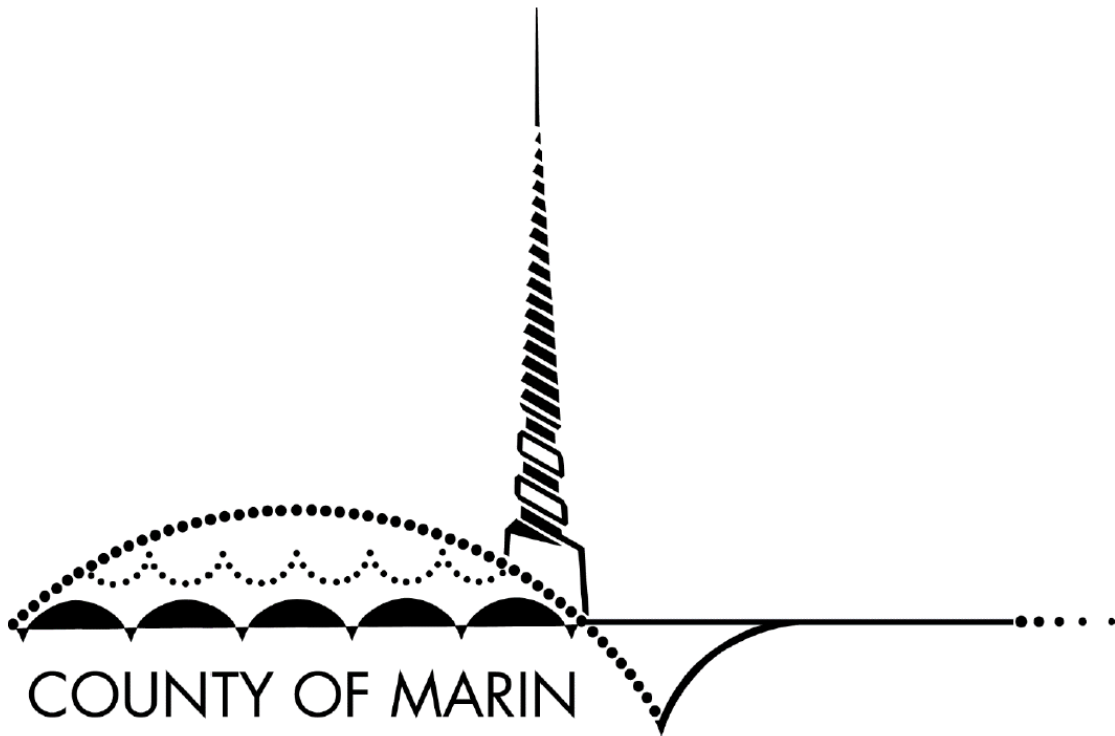


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MARIN COUNTY PROPOSITION 47 SERVICES COHORT 2



Final Local Evaluation Report

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Marin County Behavioral Health & Recovery Services

Marin County Proposition 47 Local Advisory Committee

May 15, 2023



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Executive Summary

Program Description: The Marin County Proposition 47 (Prop 47) Cohort 2 grant aimed to serve county residents who had histories of arrests, charges, or detention by the criminal justice system and a history of repeat, low-level offenses due to homelessness, substance use disorders, and mental health issues. Within our population of focus, Cohort 2 aimed to engage transitional aged youth, Spanish speakers, and unhoused individuals. Many of the rehabilitative services these populations need do exist in the county's system of care, or are under development, but individuals need assistance and guidance with enrollment, transportation, navigating the system, and housing stabilization. Two (1.5 FTE) Recovery Coach/Case Managers (RC/CMs), both bilingual Spanish speakers, met the needs of this population through providing case management services with a particular focus on substance use recovery. Clients were eligible for Prop 47 services if they had a substance use and/or mental health issue and had past or ongoing criminal justice involvement.

Program Goals: The program had three primary goals and objectives: 1) To help repeat offenders improve their lives and exit criminal justice system involvement by improving court ordered compliance; 2) To reduce the impact of substance use by actively engaging clients in substance use recovery services; and 3) To reduce criminal behavior in our population of focus by using evidence-supported programs and practices to reduce behaviors that lead to frequent contacts with law enforcement, re-arrests, and jail commitments.

Referrals to Prop 47: From April 1, 2020 to February 15, 2023, RC/CMs received 223 referrals and enrolled 133 clients. Clients were referred to RC/CMs through the jail re-entry team, other court system partners (Public Defender, District Attorney, Probation), the Novato Police Department, and direct outreach. Although the program was initially designed to rely more on referrals from the jail and other court system partners, due to COVID-19 impacts to the court system and Marin County jail, and changing needs in the community, the program pivoted to provide more direct outreach to people experiencing homelessness. Direct outreach to unsheltered clients increased from 18% of total referrals in 2020 to 61% of referrals in 2022. Overall, 18% of referrals came from the jail re-entry team and 44% came through direct outreach.

Client Characteristics: Among the 133 enrolled clients, 41% identified as Hispanic/Latinx, 25% were Spanish speakers, 74% were male, and 12% were transitional aged youth (ages 18 - 26). Percent Spanish speakers increased from 16% in 2020 to 49% in 2022. Regarding behavioral health, 87% reported a substance use issue, and 59% reported a mental health issue. At the time of enrollment 80% of clients were experiencing homelessness and 95% were unemployed. Regarding criminal justice involvement, 94% of clients reported a prior arrest, 74% a prior conviction, and 34% were on active probation at the time of enrollment. Only 5% (n=7) of clients were enrolled in Prop 47 services as part of court mandated requirements.

Services Received

Of the 133 enrolled clients, 47% (n=63) received a one-time service from the RC/CMs and 52% (n=70) had multiple service encounters with RC/CMs. The most common services provided by the RC/CMs included case management (71%), housing support (65%), basic necessities (52%), and transportation (28%). Regarding referrals to community services, 14% (n=19) of clients were connected to community substance use and/or mental health services. The low referral rate to community services reflects that many unsheltered clients were likely in the pre-contemplation or contemplation stages of change¹ and may not have been ready for engagement in services. RC/CMs engaged clients at every stage of change by having recovery-oriented conversations with 65% of the enrolled clients. These recovery-related conversations included motivational interviewing, discussing recovery services, and supporting clients' emotional/physical needs.

¹ Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consulting and Clinical Psychology, 51*(3), 390-395. <http://dx.doi.org/10.1037/0022-006X.51.3.390>



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Client Outcomes: By providing support and referrals to clients, RC/CMs helped clients exit the criminal justice system, even if not mandated by the court (Goal 1). Among the 70 clients who had multiple encounters with the RC/CMs, 27% (n=19) met program outcomes (had a substance use or mental health referral) (Goal 2). Of the clients who were unhoused at the time of enrollment, 27% moved into long-term, more stable housing prior to discharge. Clients enrolled in the program also had positive outcomes regarding new convictions for felonies and/or misdemeanors and decreasing jail bookings. Only 12% of clients had a new misdemeanor or felony within two years after enrolling in Prop 47 Cohort 2 services. Comparing the 365 days pre-enrollment and post-discharge, clients had a 56% reduction in jail bookings (Goal 3).

Barriers & Facilitators: The key challenges for the program included the low number of referrals from the jail and court system, maintaining contact with clients who did not have access to phones, and barriers to entry into other community services. RC/CMs addressed these issues through pivoting to direct outreach and collaborating with other community partners, including local law enforcement. The key facilitators of the program included the low-barrier services, the program's flexibility to expand into direct homeless outreach, and collaboration with other community partners. The program fills gaps by meeting clients in their own environment, building relationships and trust with clients, and guiding them to existing services in the community.

Conclusion: A key lesson learned from Cohort 2 was that clients needed to have stable housing before they were ready to engage in mental health and substance use treatment services. Without stable housing, clients had difficulty keeping appointments, staying in treatment, and preparing for employment. Once these needs were met the clients had more capacity and interest to engage in other resources. RC/CMs provided substantial assistance for housing, shelter, and other basic necessities, which helped to meet immediate needs and pave the way for many clients to substantially improve their housing situation, engage in substance use recovery, and reduce criminal justice involvement. These low-barrier services have been adopted by BHRS's Recovery Coaches and the Marin County Probation Department and will continue in a similar form even though Cohort 2 funding has ended. Additionally, through Prop 47 Cohort 3 Marin County will be expanding access to transitional housing for individuals involved in Marin's collaborative courts. By continuing to provide low-barrier services to clients experiencing homelessness and through expanding transitional housing resources, Marin aims to support individuals' substance use recovery and successful exit from the criminal justice system, and provide stepping stones to a healthier future.



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Project Description

PROGRAM OVERVIEW

Our population of focus for the Marin County Prop 47 grant was county residents who have histories of arrests, charges, or detention within the criminal justice system and have a history of repeat, low-level offenses due to homelessness, mental health disorders, and in some cases co-occurring substance use issues. Within our population of focus, Cohort 2 aimed to engage transitional aged youth, Spanish speakers, and the unhoused. Homelessness, combined with behavioral health disorders, negatively impacts the ability to make and keep appointments or stay in treatment, even when required by the court.

Many of the rehabilitative services this population needs do exist in the county's system of care or are under development. However, individuals need assistance and guidance with enrollment, transportation, navigating the system, and housing stabilization. Two (1.5 FTE) bilingual Recovery Coach/Case Managers (RC/CMs) were hired to meet the needs of our population. The RC/CMs provided case management services with a particular focus on substance use recovery. The RC/CMs provided assessment and case management services as required by the individual. The program aimed to be flexible and meet client identified needs first. For example, individuals received immediate housing assistance through hotel vouchers and guidance to assess if they were eligible for existing housing opportunities. Individuals received services from the RC/CMs until they were evaluated to no longer need services, no longer want services, or were otherwise enrolled in mental health or substance use treatment services. Clients could also be disenrolled from RC/CM services after six months of non-contact. Following discharge, many clients continued to receive services from substance abuse treatment, mental health services, housing support and other providers to which they were referred by the RC/CMs.

Marin finished hiring the two RC/CMs through a community-based organization (Multicultural Center of Marin) for the Cohort 2 program just as the COVID-19 pandemic began in March 2020. The RC/CMs were activated as emergency workers to outreach to unhoused individuals in the community, many of whom became unhoused for the first time after losing their jobs and housing due to the pandemic. Although the RC/CMs transitioned out of their emergency positions in June 2020, changes in the court system and the jail continued to affect the types and volume of referrals made to the Prop 47 program. In April 2020, the California Judicial Council adopted a statewide COVID-19 emergency bail schedule that set bail at \$0 for most people accused—but not yet tried—of misdemeanors and lower-level felonies, and additional COVID-19 emergency orders slowed down court system trial schedules². Zero bail resulted in a much smaller jail population and reduced the number of referrals coming from the jail re-entry team. Zero bail continued through the end of the program, ending on February 28, 2023. Due to the ongoing housing and justice system impacts from COVID-19, RC/CMS built upon their COVID-19 emergency response efforts by continuing direct outreach in the homeless encampments and partnering with the Novato Police Department to proactively outreach to individuals in need of support. The goal of these proactive efforts was to support individuals with previous criminal justice involvement who had frequent contact with law enforcement, but were not currently in jail, to reduce future convictions and jail time. More than 65% of clients came through these proactive outreach efforts in the community (13% Novato PD, 44% direct outreach, and 8% homeless shelters/community-based organizations), with the other 35% of clients coming through jail, ADA, probation, and public defender referrals. Services continued to be flexible as RC/CMs responded to changes in community need, COVID-19 emergency mandates, and local court and jail policies.

² CA Judicial Council emergency rules: <https://www.courts.ca.gov/documents/appendix-i.pdf>
Marin County Proposition 47 Cohort 2 Final Local Evaluation Report



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GOALS AND OBJECTIVES

Goal 1) To help repeat offenders to improve their lives and exit criminal justice system involvement.	
Objective	To improve court ordered compliance (i.e., showing up for hearings, appointments, services, and other court ordered activities) in our population of focus.
Activities	Recovery Coach/Case manager(s), assigned to the courthouse, assist judges and attorneys with clients who need assessments, referral for services, appointment reminders, transportation, and a warm hand off to services in order to comply with court orders
Goal 2) To reduce the impact of substance use in our population of focus.	
Objective	To actively engage clients in substance use recovery services.
Activities	Clients who have substance use disorder(s) receive substance use recovery counseling directly from the RC/CMs and/or are referred and connected to substance use recovery program(s) in the community.
Goal 3) To reduce criminal behavior in our population of focus.	
Objective	To use evidence supported programs and practices to reduce behaviors that lead to frequent contact with law enforcement, re-arrests, and jail commitments, and which lead to long-term stability.
Activities	RC/CMs help clients to reduce criminal involvement through the use of recovery activities, enrollment in public benefits, life skills training, employment/education/ training, housing assistance, restorative justice, and civil legal assistance.

Evaluation Methods and Design

PROGRAM ACTIVITIES

Staff

Two (1.5 FTE) bilingual recovery coach/case managers (RC/CMs) were hired to carry out the activities in the proposal.

Referral Pathways

Clients were referred to Prop 47 RC/CMs through the following pathways:

- **Jail Re-Entry:** Jail Mental Health staff along with other members of the jail re-entry team identified individuals who met enrollment criteria for Prop 47 services and were nearing release to the community. The RC/CM visited with the client in jail to determine if the client was eligible and interested in enrolling in services. In some cases the RC/CM picked up a client from the jail immediately upon release and in other cases connected with the client in the community after they had been released from jail.
- **Public Defender, District Attorney, or Probation:** RC/CMs also received referrals for clients of the public defender, district attorney, or probation office. Clients could be incarcerated at the time of the referral or living in the community.
- **Novato Police Department:** We completed a pilot Memorandum of Understanding with the city of Novato Police Department (PD) to provide outreach services to individuals experiencing homelessness in Novato. Novato PD partnered with one of our RC/CMs to provide outreach and referrals for unhoused individuals in encampments.



The RC/CM met with those referred to determine if they were eligible and interested in enrolling in Prop 47 services.

- **Direct Outreach & Homeless Shelter Referrals:** RC/CMs regularly visited homeless encampments and other outdoor areas in the county where individuals experiencing homelessness live. They built relationships with clients over time and often received referrals from one client to another through the assistance they provided. RC/CMs also received referrals from homeless shelters and other community-based organizations providing services for unhoused community members.

Client Engagement

Clients had three levels of engagement with the program: 1) outreach only, 2) one-time service, and 3) multi-service engagement. 1) Outreach only clients were referred for services or contacted by the RC/CMs who were not eligible or not interested in enrolling in Prop 47 services. 2) One-time service clients agreed to be enrolled in Prop 47 services but only received a one-off service from the RC/CM – this could be securing benefits post release, transportation to a resource in the community, or providing basic necessities. Afterward RC/CMs were not able to establish contact with the client again, or the client was receiving support from another resource and no longer needed RC/CM support. 3) Multi-service clients had multiple encounters with the RC/CMs, often over an extended period. RC/CMs had high engagement with some of the clients (20+ visits) and provided a variety of case work services directly to the client, in addition to providing referrals to other community resources. Clients were discharged for multiple reasons: the client stated they were no longer interested in receiving services, the client moved away, or the client had not received services for six or more months.

Program Fidelity

To ensure the program was implemented according to the local evaluation plan and that data was being entered accurately for clients the following procedures were established:

- 1) **Data review meetings:** As RC/CMs were onboarded and the Prop 47 Cohort 2 database was being established there were bi-weekly meetings to ensure the user friendliness of the database, and to ensure all team members were using similar definitions for eligibility criteria, referrals, and use of the database Google Forms. After September 2020 ad-hoc meetings were scheduled to address any concerns in data capture, either expressed by the RC/CMs or the program evaluator. Program evaluator reviewed data quarterly and emailed RC/CMs questions about any data irregularities, missing forms, and requests for client status updates.
- 2) **Staff meetings:** program staff (program coordinator, jail mental health, re-entry team, and RC/CMs) met biweekly to discuss clients and community referrals
- 3) **Quarterly local advisory committee meetings:** the local advisory committee met quarterly and shared feedback on program progress and key process and outcome measures.

DATA SOURCES FOR PROCESS & OUTCOME MEASURES

Prop 47 Cohort 2 Database (Process & Outcome Measures): Data for Prop 47 Cohort 2 clients was collected and stored in a HIPAA compliant Google database hosted through Marin Health and Human Services. RC/CMs were asked to submit all forms within 48 hours of a client encounter. RC/CMs submitted a Google form depending on the type of the client interaction. These Google forms were then pulled into a central Google sheet where RC/CMs could view historic interactions with clients and what forms had been submitted for each client.

- 1) **Outreach Form:** this form was used for the first meeting or for future meeting when the Initial Assessment Form had not yet been completed.



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- 2) Initial Assessment Form (IAF): this form was used to enroll first-time clients and included all the enrollment fields required by the BSCC, in addition to fields of interest to the RC/CMs and program evaluator. Clients were considered “enrolled” once the IAF was completed.
- 3) Encounter Form: this form was used for any interaction with any enrolled client (including the meeting when the IAF was completed). It tracked services provided during the encounter, length of the encounter, and referrals to community resources that were not SUD, MH, or Diversion related.
- 4) Referral Form: this form was used to track referrals to community SUD, MH, and/or Diversion referrals.
- 5) Status Update Form: the program evaluator requested for RC/CMs to submit a client status update form once a client had not been seen for three or more months, or if a client expressed that they were no longer interested in program services. This form included required BSCC fields, program status (active, paused, discharged), and self-sufficiency scores (see below). If the client continued to not be seen for another three months (six or more months total) they were considered discharged from the program. Discharge date was assigned to the date of the last encounter with the RC/CM.

Self-Sufficiency Matrix (Process & Outcome Measures): Quality of life measures are the mediating factors to achieve stability, complete court requirements and avoid future justice involvement. The Self-Sufficiency Matrix (SSM) assesses up to 25 client-oriented outcome scales through an interview conducted by the RC/CM. Each scale was scored from 0 (in-crisis) to 10 (thriving).³ Cohort 2 clients were only assessed on legal, access to services, mental health, and substance use. SSM scores were recorded in the Prop 47 Cohort 2 Database in the Initial Assessment Form and the Status Update Form.

Electronic Justice System (EJUS) & District Attorney (DA) Expediter (Outcome Measures Only): EJUS was used to identify clients who had a conviction date following enrollment in Prop 47 services. Clients with a conviction date after enrollment were sent to the DA Expediter who returned commit date for the associated convictions.

Tiburon — Sheriff’s Database (Outcome Measures Only): Jail booking data was provided through Marin’s Data Driven Recovery Project partner through the Stepping Up Initiative.

Interviews with Key Stakeholders and Clients (Process & Outcome Measures): Interviews with Cohort 2 staff were conducted by the program evaluator and interviews conducted with Cohort 2 clients were conducted by the RC/CMs.

³ Self-Sufficiency Matrix: An Assessment and Measurement Tool Created Through a Collaborative Partnership of the Human Services Community in Snohomish County, revised August 1, 2010



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DATA POINTS USED FOR PROCESS & OUTCOME EVALUATION

Participant Characteristics at Enrollment

The following data on demographics, behavioral health, justice involvement, and service access were collected through the Initial Assessment Form at client enrollment.

Characteristic	Definition	Measurement Tool
Age	Number of years since birth, in whole numbers, at the time of enrollment.	Outreach IAF
Race/Ethnicity	American Indian/Alaska Native; Asian – Chinese, Japanese, Filipino, Korean, Vietnamese, Indian, Laotian, Cambodian, Other; Black or African American; Hispanic, Latino, or Spanish; Middle Eastern/North African; Native Hawaiian/Pacific Islander – Native Hawaiian, Guamanian, Samoan, Other; White; Other identified ethnic origin, ethnicity, or race; Decline to state	IAF
Gender	Self-identified gender: Male; Female; Prefer to self-define	IAF
Language	English; Spanish; Other language (please specify)	IAF
Substance Use	Presence of substance use issues (identified by client and/or RC/CM)	IAF
Mental Health	Presence of mental health issues: Serious Mental Illness (SMI), mild to moderate (non-SMI), none (identified by client and/or RC/CM)	IAF
CJI Involvement	<i>PRCS</i> : Self-report or documented probation, parole, or post release community supervision (PRCS) status at date of enrollment. <i>Prior Arrests</i> : Self-report or documented prior arrests at date of enrollment. <i>Prior Conviction</i> : Self-report or documented prior convictions at date of enrollment. <i>Court Mandated</i> : Client participation mandated by the court and/or client had specific treatment objectives that needed to be met as mandated by the court	IAF
Public Benefits	List of public benefits client was currently receiving at time of enrollment: MediCal, CalFresh, General Assistance, Housing Vouchers, and/or SSI	IAF
Housing Status	Independent living/housing, Family/relative homes, Foster care, Permanent Supportive Housing, Bridge Housing, Transitional Housing, Rapid Rehousing, Sober Living Homes, Homeless	IAF
Education Status	Some high school, High School Graduation, GED, Some College, College Graduate, Graduate Degree, Other	IAF
Employment Status	Employed, Full Time; Employed, Part Time; Not working due to age (under 15 years of age) or full-time student status; Unemployed; Other	IAF



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Process Measures

The following process measures capture how clients engaged in Prop 47 Cohort 2 services, and were recorded while the client was enrolled in Prop 47 services:

Process Measure	Definition	Measurement Tool
Count of clients from each referral source	Source of referral into Prop 47 services: Jail Re-entry, Other CJI partner, Novato PD, Direct Outreach (see definitions in “Referral Pathway”)	P47 C2 Outreach & IAF Form
Count of clients by engagement type	Outreach only, One-Time service, Multi-Service (see definitions in “Client Engagement”)	All P47 C2 Database Forms
Count of clients who received a SU, MH, or Diversion Community Referral	If an RC/CM connected client to SU, MH, or Diversion services in the community; or provided them with support to continue to receive substance use treatment/support in the community, this was recorded as a referral. Marin followed the definition of substance-use disorder treatment set by the Substance Use and Mental Health Services Administration ⁴	Encounter notes, Referral Form, BHRS SU database (WITS)
Count of services provided to clients	<p><i>Assistance with Food</i>: received services to help secure food.</p> <p><i>Basic Necessities</i>: received any basic necessities (excluding food), such as clothing, hygiene kits, phone chargers, etc.</p> <p><i>Case Management</i>: the participant had someone that assessed, planned, implemented, coordinated, monitored, and/or evaluated services</p> <p><i>Legal</i>: received services or support to address a participant’s legal issues.</p> <p><i>Education</i>: received education related services or support, such as GED preparation, vocational training, college planning or enrollment, etc.</p> <p><i>Employment</i>: received services or support to increase the likelihood of securing employment.</p> <p><i>Housing</i>: participant received housing related support services</p> <p><i>Social Services</i>: received assistance with enrollment in government funded programs such as MediCal, CalFresh, etc. (Specific public benefits tracker added to Encounter form.)</p> <p><i>Transportation</i>: received transportation services.</p> <p><i>Other</i>: received any other services or support not identified in other categories.</p>	Encounter Form
Count of type of housing service provided by RC/CMs	<p>Because housing was such a critical service for many Prop 47 clients, the type of housing support receive was further categorized:</p> <ul style="list-style-type: none"> • Housing discussed and/or referral made (but no housing received) • Hotel stay only (hotel stay provided with Prop 47 funds) • Hotel stay followed by transition to short term housing (such as a shelter) • Direct to short term housing (shelter) • Long term housing received (SLE, friend, independent living) 	Encounter Form

⁴ According to the Substance Use and Mental Health Services Administration, a treatment for substance use disorders could be comprised of multiple service components, including, but not limited to the following: individual and group counseling, inpatient and residential treatment, intensive outpatient treatment, partial hospital programs, case or care management, medication, recovery support services, 12-step fellowship, peer support. Other services that may qualify could include withdrawal management, and culturally rooted community healing practices.



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Outcome Measures

The following outcome measures examine the impact of receiving support from the RC/CMs and the connection to other community services, and were recorded at the time of discharge or in subsequent recidivism analyses.

Outcome Measure	Definition	Data Source(s)
Change in Average Self-Sufficiency Matrix Measures from Enrollment to Discharge	Legal, Access to Services, Mental Health, Substance Use	IAF Client Status Form
Percent of clients with improvements in housing, education, and employment	Did the client experience a positive change in housing, education, and employment during their period of enrollment in Prop 47 C2 services?	IAF Client Status Form Encounter Form
Percent of clients who gained public benefits	Encounter form asks the RC/CM about support provided for obtaining public benefits (MediCal, CalFresh, General Assistance, Housing Vouchers, SSI). RCs report if they discussed the benefit, if client was in the process of receiving the benefit, and if the client received the benefit	IAF Encounter Form
Percent of clients who successfully completed the Prop 47 program	Client received services for substance use treatment, mental health support, and/or diversion services	Referral Form BHRS SU services (WITS)
Client ordered compliance	Client obtained services required by the court	Encounter Form Referral Form
Qualitative feedback from stakeholder interviews & client interviews	Qualitative theme analysis from client and key stakeholder interviews	Interviews
Marin County Jail Bookings	Count of bookings into Marin County jail 365 days prior to enrollment, compared to bookings 365 post discharge (Data pulled through October 2022)	Tiburon (Booking & Jail Database)
Recidivism	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 (CA Penal Code 6046.1(d). "Committed" refers to the date of the offense, not the date of conviction.	EJUS & DA Expediter

OUTCOME EVALUATION DESIGN

Comparison Group & Research Design

Clients were considered eligible for the outcome evaluation if they were enrolled in Prop 47 Cohort 2 services. This excludes individuals who were "outreach only" and were never enrolled in Prop 47 services. There was no comparison group for this analysis, as anyone interested in enrolling in the program was included. The outcome analysis used a quasi-experimental design of a pre-post analysis based on key indicators, measured at enrollment and discharge.

Definition of Program Success:

A client successfully completed the program if they met the following criteria: 1) Completed an initial strength and needs assessment interview leading to the creation of a case plan; and 2) Accepted referrals and engaged in or obtained services,



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which may include ongoing RC/CM support and monitoring; and 3) Satisfied court requirement for which the individual was referred to the RC/CM (if applicable).

As one of the Prop 47 program's main goals was to connect clients to substance use treatment in the community, a client was considered successful if they engaged and received community substance use treatment or mental health services.

CHALLENGES IN DATA COLLECTION

There were several challenges in data collection that may impact process and outcome measures.

- Identifying client eligibility criteria: Determining client eligibility, based on behavioral health issues and criminal justice involvement could take multiple interactions with clients and following up with external data sources for verification. Although efforts were made to verify, the presence of substance use or mental health issues, and CJ involvement, may be under-reported in client enrollment characteristics.
- Operationalizing client referrals and referral success in community programs: Knowing the result of a substance use referral was often hard to gather. RC/CMs could record that a client was assessed and connected to services, and attempt to maintain contact during treatment, but may have lost touch if a client received a new case manager or left treatment without contacting the RC/CM.
- Collecting client data at discharge: Client status forms were completed for clients who had not been seen for three or more months or had a known discharge reason. These forms were filled out by the RC/CM based on the last interaction with the client, but as it was often difficult to reach clients, information for client status forms came from RC/CMs and not client self-report.



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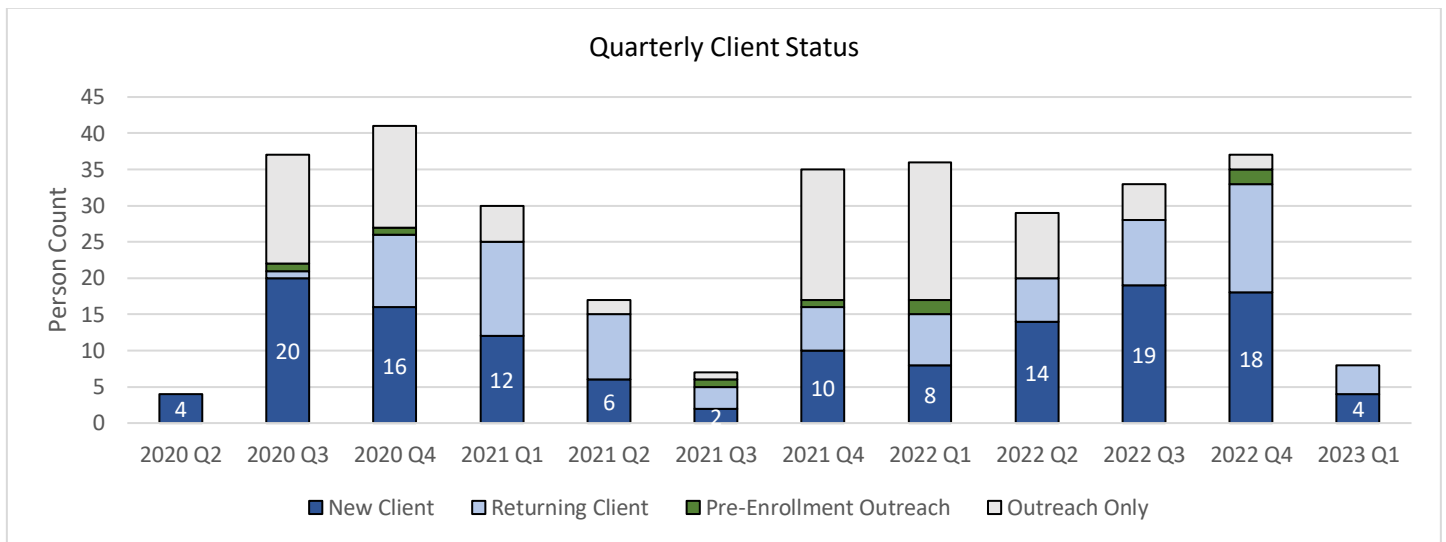


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Preliminary Evaluation Results

QUARTERLY CLIENT CONTACTS

Throughout the program, RC/CMs were enrolling new clients, providing services to existing clients, and outreaching to potential new clients. “Pre-enrollment outreach” refers to clients who received an outreach in one quarter and then were enrolled in the subsequent quarter. “Outreach only” indicates that the individual only received outreaches and was never enrolled in the program. Client enrollment was variable by quarter due to changes in system needs and RC/CM staffing. On average RC/CMs interacted with approximately 30 clients per quarter and enrolled 13 new clients (excluding 2020 Q2 and 2023 Q1 since these were partial quarters). Count of newly enrolled clients is labelled in the chart below.

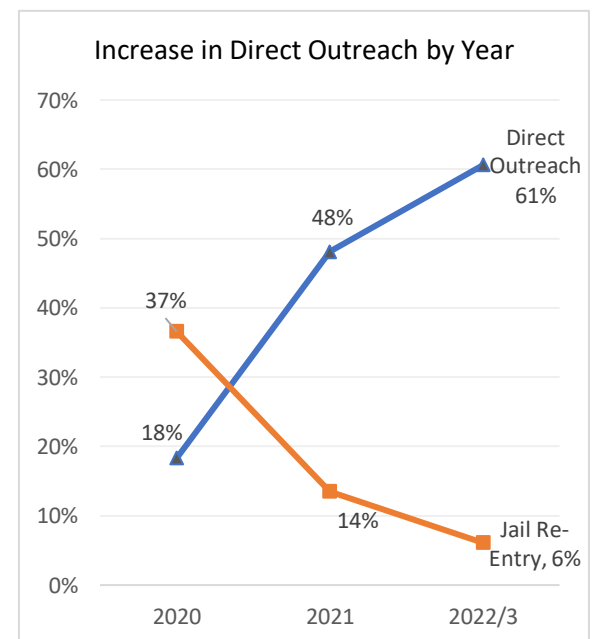


REFERRAL SOURCE

Of the 223 referrals for RC/CMs services, 60% (n=133) enrolled in the program. The most common source of referral was from direct outreach (44%) followed by the jail re-entry team (18%). Percent of direct outreach increased throughout the program while percent of referrals from jail re-entry decreased, demonstrating the shift to focus the program on unhoused clients.

Referrals by Year	2020 (n=71)	2021 (n=53)	2022/3 (n=99)	TOTAL (n=223)
Direct Outreach	18%	48%	61%	44%
Homeless Shelter/CBO	0%	0%	17%	8%
Jail Re-Entry	37%	14%	6%	18%
Novato PD	24%	17%	3%	13%
Other CJJ*	11%	10%	5%	9%
ERC or Other RC/CM	1%	10%	6%	5%
Unknown	8%	2%	2%	4%

*Includes Public Defenders, Probation, ADI, Private Attorney





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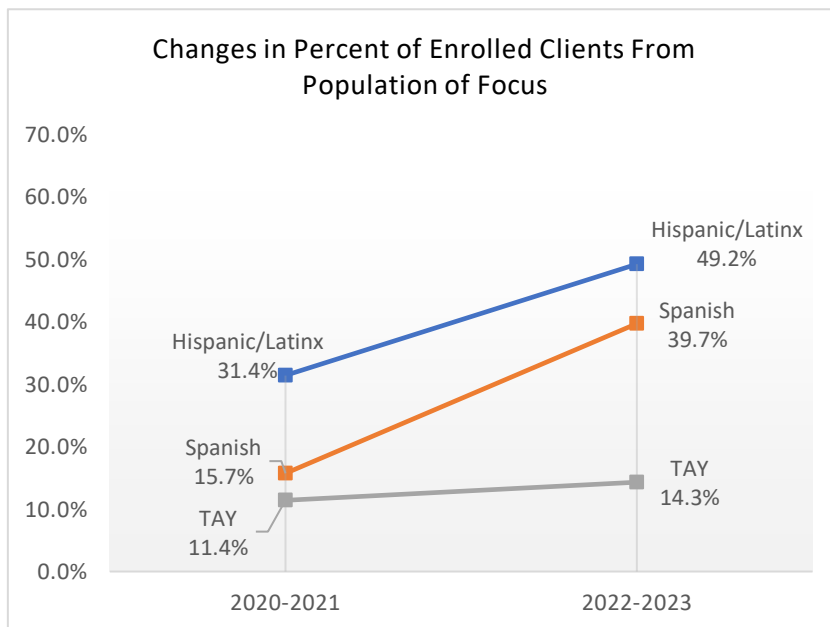
CLIENT CHARACTERISTICS AT ENROLLMENT (n=133)

Demographics

Of the 133 clients enrolled in Prop 47 Cohort 2 services, 41% identified as Hispanic/Latinx, 40% as White, and 14% as Black. 25% of clients spoke only Spanish and 4% were bilingual English/Spanish speakers. 12% of clients were transitional-aged youth (ages 18 - 26) with the most common age grouping being those 35-49 years old (34%). 74% of clients identified as male.

Changes in Population of Focus throughout the Program

Through 2021, 31.4% of enrolled clients identified as Hispanic/Latinx. After 2021 (2022-2023) this increased to 49.2% Hispanic/Latinx. Similarly, the percent of Spanish-speaking clients increased from 15.7% to 39.7%. Reasons for this increase in Hispanic/Latinx and Spanish-speakers enrollment will be elaborated in the discussion section below. Percent TAY slightly increased from 11.4% to 14.3%.



Demographics (n=133)	Count	Percent
Race/Ethnicity		
Asian	4	3.0%
Black	18	13.5%
Hispanic/Latinx*	54	40.6%
Indigenous/Alaska Native	2	1.5%
White	53	39.8%
Unknown	2	1.5%
Language		
English only	93	69.9%
Bilingual (English/Spanish)	5	3.8%
Spanish	33	24.8%
Sign Language	1	0.8%
Unknown	1	0.8%
Age Category		
0 – 17	1	0.8%
18 – 26	16	12.0%
26 – 35	29	21.8%
35 – 49	45	33.8%
50 – 64	34	25.6%
65+	6	4.5%
Unknown	2	1.5%
Gender		
Female	34	25.6%
Male	98	73.7%
Prefer to self-define	0	0%
Unknown	1	0.8%
*Three (3) clients listed Hispanic/Latinx in addition to other race/ethnicity identities		



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Housing, Employment, and Education Status

Most of the clients enrolling in the program were unhoused and unemployed. 80% of enrolled clients were unhoused at the time of enrollment, 95% were unemployed, and 35% had less than a GED or high school graduation.

Behavioral Health

More clients reported substance use than mental health challenges. At the time of enrollment, 87% reported having a substance use issue and 59% reported having a mental health issue (29% SMI, 29% non-SMI). About half of clients (47%) had co-occurring substance use and mental health challenges.

Behavioral Health	Count	Percent
Substance Use		
Yes	115	86.5%
No	18	13.5%
Mental Health		
SMI	39	29.3%
non-SMI	39	29.3%
None	55	41.4%
Co-occurring Mental Health & Substance Use		
Yes (co-occurring)	63	47.4%
No	72	54.1%

Criminal Justice Involvement

Prop 47 clients often had more than one type of criminal justice involvement. At enrollment, 94% of clients reported a prior arrest, 74% a prior conviction, 34% were on existing probation, and 5% of clients were enrolled in Prop 47 services as a fulfillment of a court order. 19% of enrolled clients were referred by the Novato police department.

Housing, Employment, and Education Status	Count	Percent
Housing		
Unhoused/Homeless	106	79.7%
Sober Living Homes	6	4.5%
Family/relative homes	12	9.0%
Independent living/housing	4	3.0%
Residential Treatment Program	2	1.5%
Other	3	2.3%
Employment		
Unemployed	126	94.7%
Employed, part time	4	3.0%
Employed, full time	2	1.5%
Education		
Less than high school	12	9.0%
Some high school	33	24.8%
High school/GED	39	29.3%
Some college	14	10.5%
College graduate	4	3.0%
Unknown	31	23.3%

Criminal Justice Involvement at Enrollment	Count	Percent (n=133)
Prior Arrest	125	94.0%
Prior Conviction	98	73.7%
PRCS (active probation)	45	33.8%
Fulfillment of Court Order	7	5.3%
Police Department Referral	25	18.8%



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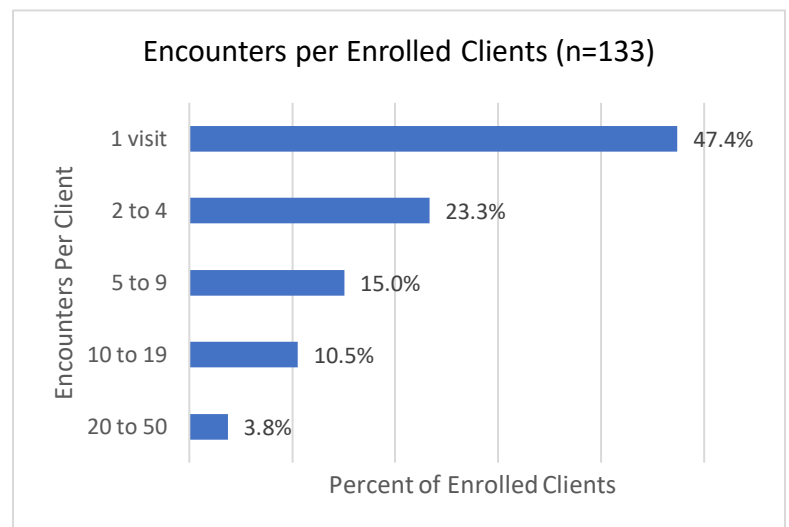
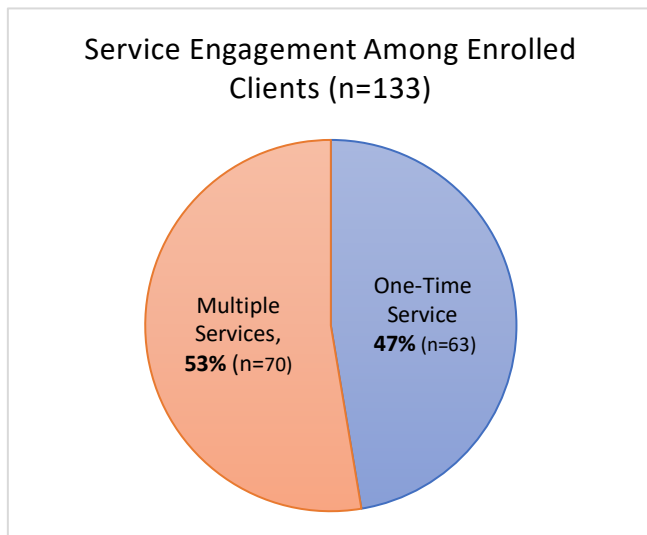


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PROCESS MEASURES

Client Enrollment Status & Encounter Frequency

Of the 133 enrolled clients, 47% (n=63) only had one interaction with the RC/CMs and 53% (n=70) had multiple interactions with the RC/CMs. RC/CMs formed close relationships with some clients, with 14% of clients having more than 10 encounters with RC/CMs. Two clients had more than 40 encounters with the RC/CMs over many months.



Public Benefits Assistance Provided by RC/CMs

At the time of enrollment most clients had Medi-Cal services, CalFresh, General Assistance and SSI, but only 37% of clients had Housing Assistance. Of clients who did not have a given public benefit at enrollment, RC/CMs helped 38% obtain Medi-Cal, 21% obtain CalFresh, 24% obtain General Assistance, and 11% gain Housing Assistance. Only 2% were able to gain public benefits for SSI.

Public Benefits	Count with PB at Enrollment	% with PB at Enrollment	Clients without PB at Enrollment	Clients Gained PB through RC/CM	% of Clients Gained PB
Medi-Cal	117	88.0%	16	6	37.5%
CalFresh	95	71.4%	38	8	21.1%
General Assistance (GA)	92	69.2%	41	10	24.4%
Housing Assistance (HA)	49	36.8%	84	9	10.7%
SSI	82	61.7%	51	1	2.0%

Services Provided by Recovery Coach/Case Managers

The most common services provided by the RC/CMs were social services (77%) and case management (71%), followed by housing support (63%) and basic necessities (52%).



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Of the 106 clients who were homeless at the time of enrollment, 79% (n=84) received housing support from the RC/CMs. Of those 84 clients, 38% discussed housing with their RC/CM or the RC/CM assisted in the application for housing, but no housing was secured. Many unhoused clients benefited from a short-term stay in a hotel. 32% received funding from Prop 47 for a hotel-stay only and 7% received funding for a hotel-stay followed by a stay at a shelter or other short-term housing. RC/CMs assisted two clients into moving to long-term housing in the client's own apartment.

Service Type	Total (n=133)
Social Services	77.4%
Case Management	70.7%
Housing Support	63.2%
Basic Necessities	51.9%
Transportation	27.8%
Legal	12.0%
Employment	9.0%
Education	5.3%

Housing Services Provided to Homeless Clients (n=84)	Count	Percent
Housing discussed only (no housing received)	32	38.1%
Application only	8	9.5%
Hotel stay only	27	32.1%
Hotel stay followed by other short-term housing	6	7.1%
Shelter only	4	4.8%
SLE	5	6.0%
Long-term housing (apartment)	2	2.4%

Referrals to Community Substance Use and Mental Health Services

RC/CMs connected 14% (n=19) of enrolled clients to substance use treatment or mental health resources in the community, with some clients receiving a referral for multiple services. One client received both substance use and mental health community services. Withdrawal Management (Detox) and 90-Day Residential Treatment services were the most common referrals. RC/CMs had recovery-oriented conversations with 65% of the enrolled clients, once this field started getting collected in July 2021 (as a result of the two-year report evaluation findings). These recovery-related conversations included motivational interviewing, discussing recovery services, and supporting clients' emotional/physical needs.

Referral Type	Client Count
Community Substance Use Services (n=18 clients)	
Withdrawal Management (Detox)	5
90-Day Residential Treatment Program	5
Outpatient Treatment Services	3
12-Step Program	2
SU Treatment Assessment	1
Individual and Group Counseling Sessions	1
NTP Treatment	1
Community Mental Health Services (n= 2 clients)	
Mental Health Community Services	2



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OUTCOME MEASURES

Successful Program Completion:

To successfully meet program requirements a client must have completed a referral to community substance use or mental health services prior to discharge. In total, 19 clients completed a referral to mental health or substance use services in the community (see Referrals section above for more details). Among all enrolled clients (n=133) this means 14% successfully completed the program.

Reason for Discharge

Per BSCC guidelines, client status updates were not required for one-time clients. Of the 70 multi-service clients, client status/discharge forms were filled out for 63 clients. The most common reason for discharge was no interaction with the client for six or more months. This means that the client did not communicate a preference to the RC/CM to stop services, but the RC/CM was not able to get into contact with the client again. It is unclear to what to attribute the clients' lack of response in these cases, we speculate this could be due to the client's situation having improved and no longer needing support, or that they left the geographic area, or no longer had the means to communicate, among other possibilities. However, the lack of ongoing contact makes this impossible to determine.

Reason for Discharge (n=63)	Count	Percent
No interaction for 6+ months	27	42.9%
Client no longer wants services	18	28.6%
Client Moved	5	7.9%
Assigned to Other CM	2	3.2%
Deceased	1	1.6%
Successful completion	1	1.6%
Active at Program End	9	14.3%

Improvements in Housing, Employment, and Education

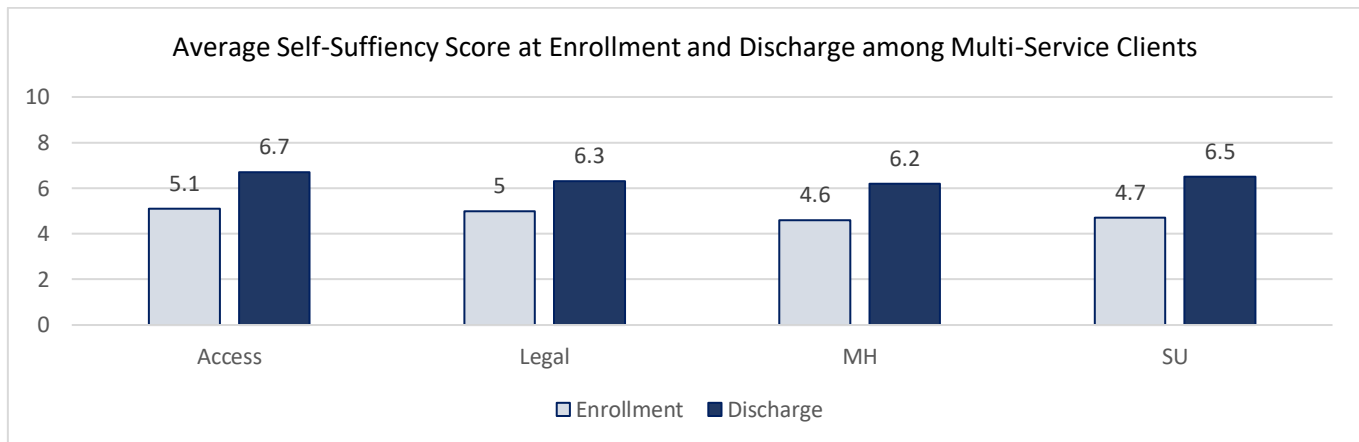
Among the 42 status forms submitted for clients who were unhoused at enrollment, 27% of homeless clients moved from being unhoused to having an improved housing status. Among the 50 status forms submitted for clients who were unemployed at enrollment, 12% gained employment. No notable changes were reported in client education status (data not shown).

Change in Housing Status (Enrollment -> Discharge)	Unhoused Clients with Discharge Form (n=42)	Client Percent
Unhoused -> Improved Housing Status	16	26.7%
Relative's home	5	
Independent Living	7	
Permanent supportive housing	1	
Residential treatment Center	1	
Transitional Housing	2	
Unhoused -> Unhoused (No Change)	26	43.3%

Change in Employment Status (Enrollment -> Discharge)	Unemployed Clients with Discharge Form (n=50)	Client Percent
Unemployed -> Unemployed (No change)	45	88.0%
Unemployed -> Employed Full Time	5	10.0%
Unemployed -> Employed Part Time	1	2.0%

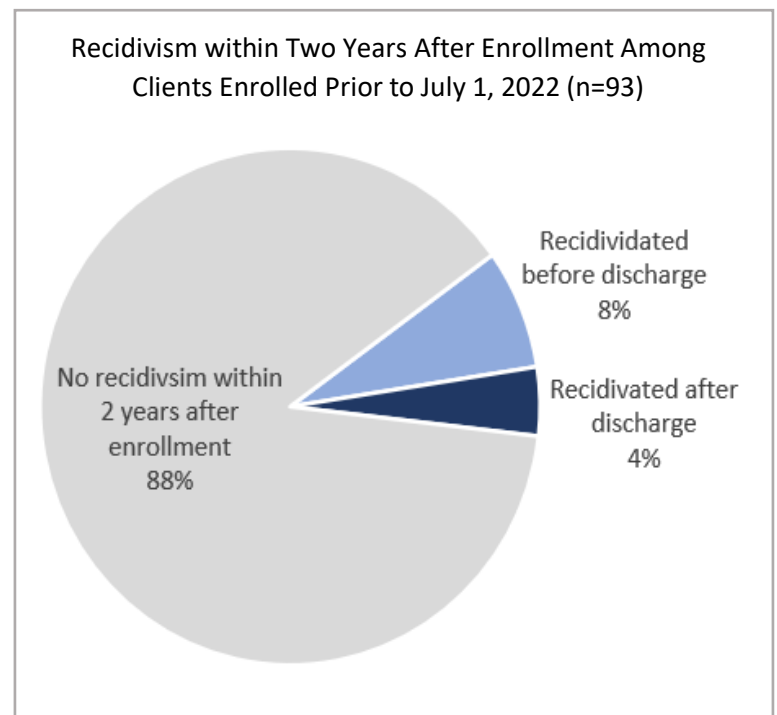
Changes in Self-Sufficiency Score

Self-sufficiency scores were only required to be filled out for clients when the RC/CMs had the time to complete a more in-depth assessment and were familiar with the circumstances of a client at discharge. This section shows the changes in self-sufficiency scores for 44 discharged multi-service clients. Self-sufficiency scores range from 0 (in-crisis) to 10 (thriving). Compared to enrollment, at discharge the average self-sufficiency scored improved for all measures.



Recidivism – Commit Date

Recidivism outcomes were measured in two ways: conviction of a misdemeanor or felony after enrollment and changes in jail booking pre-enrollment to post discharge. Among the 93 clients enrolled prior to July 1, 2022⁵, 11.8% (n=11) recidivated within two years after enrollment. Among those 11 clients, 4 committed the offense prior to program discharge (on average 222 days after enrollment), while 7 committed the offense after program discharge (on average 157 days after discharge).



⁵ No clients who were enrolled and/or discharged after July 1, 2022 had a conviction for a misdemeanor or felony as of January 1, 2023. As this likely reflects the time it takes for an individual to move through the court process, rather than a true reflection of offense timing, this analysis only examines recidivism data for clients who were enrolled prior to July 1, 2022



Recidivism – Jail Bookings

In addition to looking at convictions, the Prop 47 advisory council recommended looking at other recidivism measures including changes in jail bookings. Bookings in the Marin County jail were compared during the 365 days pre-enrollment and post-discharge in Prop 47 services. Note, conclusions for this analysis should be treated cautiously for several reasons:

- If participants were booked or served time in another county jail or prison, that time would not be reflected here.
- As some clients entered Prop 47 services directly after being released from jail, some reduction in bookings is expected.

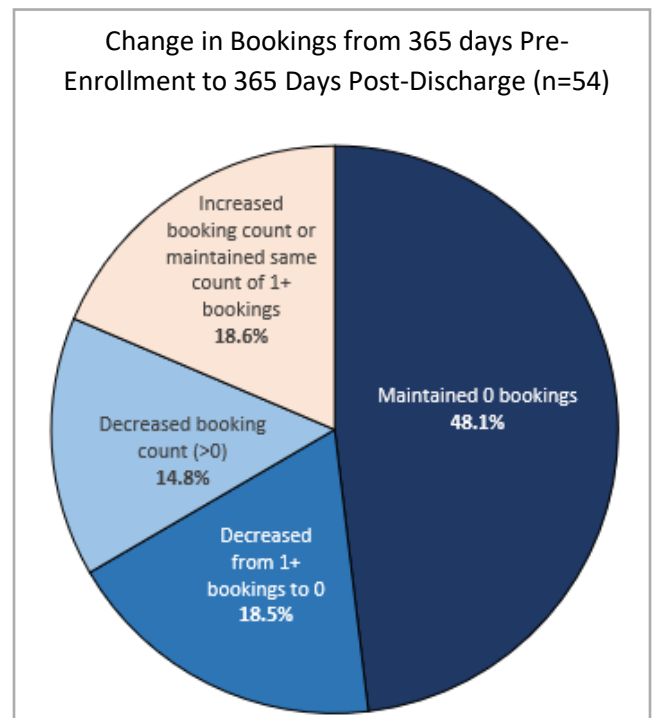
To ensure the same time period was compared pre-enrollment and post-discharge, only the 54 clients who were discharged by October 2021 were included in this analysis, since booking data was only available through October 2022. The number of clients with 1+ bookings decreased by 23% (43% pre-enrollment, 33% post-discharge). The overall count of bookings decreased by 56%; from an average of 1.26 bookings per client pre-enrollment to 0.55 bookings per client post-enrollment.

Time Period (n=54 clients)	Percent of Clients 1+ Booking	Average Bookings per Client
365 days pre-enrollment	43%	1.26
365 days post enrollment	33%	0.55
Percent Reduction	23%	56%

Overall, 81.4% of clients had a positive outcome regarding bookings:

- 48.1% maintained 0 bookings pre-enrollment and post-discharge
- 18.5% decreased from 1+ bookings pre-enrollment to 0 bookings post-discharge
- 14.8% decreased the number of bookings from pre-enrollment to post-discharge. For example, one client had 11 bookings pre-enrollment and only 2 bookings post-discharge.

Among the 18.6% of clients who did not have a positive outcome for bookings, 11.2% increased the number of bookings and 7.4% had the same number of bookings greater than zero comparing pre-enrollment to post-discharge.





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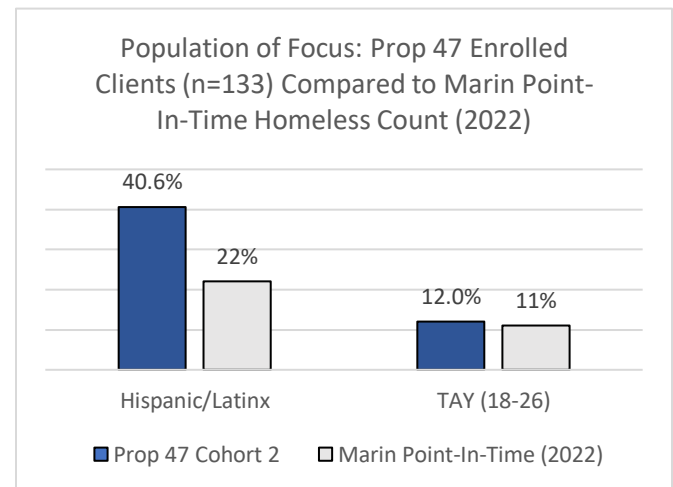


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Progress Towards Goals

POPULATION OF FOCUS

Through directly outreaching to community members experiencing homelessness, while maintaining a staff of bilingual RC/CMs, Prop 47 was successful in reaching its target population of Spanish speakers and transitional aged youth (ages 18-26). Over time, the program also improved its outreach to these populations. Percent Hispanic/Latinx increased from 31% in 2020-2021 to 49% in 2022-2023 (41% total). Percent Spanish-speaking increased from 16% in 2020-2021 to 40% in 2022-2023 (29% total). RC/CMs spoke to the importance of providing a warm hand off for community resources by ensuring that translation services or bilingual staff would be available to support referred clients who primarily spoke Spanish. Percent transitional aged youth (18-26) also increased from 11% in 2020-2021 to 14% in 2022-2023 (12% total). These percentages exceeded the 2022 Marin County Point-In-Time homeless count⁶ where 23% of Marin’s homeless population identified as Hispanic/Latinx and 12% were transitional aged youth (18-26).



GOAL 1) TO HELP REPEAT OFFENDERS TO IMPROVE THEIR LIVES AND EXIT CRIMINAL JUSTICE SYSTEM INVOLVEMENT

Activities: Recovery Coach/Case manager(s), assigned to the courthouse, assisted judges and attorneys with clients who need assessments, referral for services, appointment reminders, transportation, and a warm hand off to services in order to comply with court orders

Progress: Cohort 2 shifted from a focus on serving clients with court-mandated orders to providing services for unhoused individuals, as the need for services from this community was substantial. In total seven clients were assigned to work with the RC/CMs by the court. By providing support and referrals to clients, RC/CMs help clients to exit the criminal justice system, even if not mandated by the court. Only 12% of clients committed a new misdemeanor or felony after enrolling in Prop 47 Cohort 2 services.

“Success can be a lot of things. Even harm reduction. If we can setup the client with a different atmosphere [housing], maybe they are still smoking and drinking, but at least they aren’t out and about committing new crimes. If we can get them shelter and case management, the basic things, they can stabilize and be successful.” (RC/CM Interview)

GOAL 2) TO REDUCE THE IMPACT OF SUBSTANCE USE IN OUR POPULATION OF FOCUS.

Activities: To actively engage clients in substance use recovery services

⁶ Housing First Marin Health and Human Services Point in Time Count. <https://housingfirst.marinhhs.org/point-time-count>
Marin County Proposition 47 Cohort 2 Final Local Evaluation Report



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Progress: Prop 47 funding for housing, including hotel stays, provided a critical bridge to engage clients who had recently been released from jail or who were experiencing homelessness. Hotel stays provided safe housing while RC/CMs worked to get clients into substance use recovery services or housed in other areas in the community. Of the 133 enrolled clients, 14% (n=19) were connected to community substance use treatment. In addition to short term hotel-stays, RC/CMs helped 27% of the clients who were unhoused at the time enrollment transition into longer-term housing prior to discharge. RC/CMs provided community referrals to clients when clients were ready to engage in treatment, but also had many recovery-related conversations with clients who were not yet ready to enter a substance use treatment program. RC/CMs had recovery-oriented conversations with 65% of the enrolled clients once this field started getting collected in July 2021. These recovery-related conversations included motivational interviewing, discussing recovery services, and supporting clients' emotional/physical needs.

"Before your services, I had just lost my mom to cancer, I was drinking every day, getting in trouble, in and out of jail, but since Prop 47 has helped it got me sober living, I've been living clean and sober, I've been taking care of everything I messed up one day at a time. I'm now trying to go from sober living into housing, my own place, is what I'm hoping for." (Client interview)

GOAL 3) TO REDUCE CRIMINAL BEHAVIOR IN OUR POPULATION OF FOCUS.

Activities: To use evidence supported programs and practices to reduce behaviors that lead to frequent contact with law enforcement, re-arrests and jail commitments, and which lead to long-term stability.

Progress: By participating in Prop 47 services, clients received immediate support from RC/CMs and were connected to benefits and other community support services which contributed to reducing the number of booking pre-enrollment compared to post-discharge. Furthermore, RC/CMs collaborative relationship with local law enforcement, particularly the Novato Police Department, created an opportunity for RC/CMs to support individuals with previous criminal justice involvement, but who are not currently in jail, to reduce future convictions and jail time. 81% of clients either maintained 0 bookings pre-enrollment and post-discharge or decreased the number of bookings.

"When I came home [from prison], I still bumped my head, but not committing real crimes but at the same time small crimes that are getting me locked up and taking me away from my kids. I vow now not ever to do anything that would jeopardize me being with my kids, and not getting locked up this time, and I bumped into you, and by me bumping into you, you've been an outlet showing me how to better myself, and how to help others... Participating in y'all service...it gave me a bigger picture on life, it opened up my eyes to something bigger, and now I'm willing to help people and help others when they might need it, because you never know when I might need it." (Client Interview)

Staff interview speaking about the same client. "I have one client I pick up on Thursday and he joins me for outreach, and he loves it, it keeps him active and it keeps him out of trouble. He has been in jail for so many years since he was a teenager, and since we started working together he hasn't been back. He's been compliant with his probation conditions, and he has full blown housing. He's getting his food stamps and his GA. And he feels successful. He's not committing crimes, not doing anything he shouldn't be doing. This is a guy who has been identified by many departments as being a high risk member of the community. We talk all the time and we have a good relationship. And that's the biggest thing, the relationship... because they feel safe and they feel comfortable being around the Recovery Coach. That's a huge part of the success is the relationship." (RC/CM Interview)



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BARRIERS AND FACILITATORS TOWARDS REACHING PROGRAM GOALS

Client and staff interviews point to some of the program's key barriers and facilitators towards reaching program goals.

Barriers:

- **Low number of referrals coming from the jail and court system:** Although the program was able to pivot into direct outreach, the count of total clients was fewer than projected.
- **Maintaining client contact:** Establishing and maintaining contact with clients after an initial meeting in jail or in the community could be challenging as most clients did not have a phone and moved to different geographic areas in the county. RC/CMs applied creative strategies to meet clients through attending church-sponsored meal outreaches, networking with peers, and checking in with other community partners to see if they knew where to find clients. Even with these strategies, 47% of clients only received a one-time service, which limited the opportunities for RC/CMs to build long-term relationships with clients and refer them to community resources.
- **Matching timing of client readiness with timing of available community resources:** There was often a short window in which clients were interested in getting services, and services were often not available within that window. At enrollment, most clients were in the pre-contemplation or contemplation stage of substance use recovery and mental health treatment⁷. RC/CMs would have recovery-oriented conversations with clients, and over time some clients would be interested in going to a shelter or into treatment services. However, if services were not available at the exact moment, it was challenging to connect clients to those services.
 - *"The first challenge is that [many clients] know they are using, they know they are in a very critical condition, but they don't want to hear it. Just getting them to accept that and being willing to get the help is a challenge. I would swing by, and they would know who I was and they wouldn't want to talk to me, "I'm good today, I don't want to stop using today". I have to be respectful of their decision, but I also let them know that whenever they are ready to give me a call, or I'll be back, or hopefully I'll find you here again. The next challenge, once the client was ready, was if there was a place with a bed. If I came that particular day, at the perfect moment to get them in and sober up, but there wasn't a bed, the client would say "hey too bad I'm not going to go", leading to lots of back and forth." (RC/CM Interview)*
 - *"I've been referring a client for almost a month to [a shelter], but they keep saying that they are full. We could put someone up in a hotel for a week, but if they aren't accepted into that shelter at the end of the week, they end up going back to the streets. That's been a real challenge, folks end up back unsheltered because it's a whole process to get accepted." (RC/CM Interview)*

Facilitators

- **Low-barrier services focused on relationship between RC/CM and client:** clients were not required to do anything to receive services and RC/CMs could help clients right away with a hotel referral, and/or meeting other basic needs. By meeting clients where they were at, RC/CMs were able to build meaningful relationships with many clients which contributed to short-term and long-term beneficial outcomes.
 - *"There are a lot of programs out there, but Prop 47 is a bit more flexible, less structured, and we do things a bit differently than other systems, that require a lot from their clients... and the client gets overwhelmed because they have to comply with the [other systems'] terms and conditions. We don't require for clients to meet us once a week or to follow certain guidelines. Our situation is a bit different because clients want to meet with us. It's cool that it's flexible and not as structured as other programs. And with us, we meet with*

⁷ Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consulting and Clinical Psychology, 51*(3), 390-395. <http://dx.doi.org/10.1037/0022-006X.51.3.390>



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the client, and do the work, and then follow-up with them to make sure they have the services that they need.” (RC/CM Interview)

- **Program flexibility:** pivoting from primarily relying on court and jail referrals to direct outreach in the community was a key aspect of the program’s success. This flexibility allowed the program to continue bringing in new clients even as the court systems all but closed, and fewer individuals were incarcerated at the Marin County jail. Proactively going into the community, and meeting clients where they were, was a key aspect to building relationships with clients. RC/CMs could bring paperwork for public benefits and other resources directly to clients, who did not want to leave their tent unattended on the street, for fear of being robbed or losing their spot.
 - *“We are out there in their environment, we aren’t forcing them to come into our environment, but we are out there going into theirs. And without the judging. I go into that park and see a lot people using, and I’m not like “man you should stop”, I say whenever you’re ready, let’s go. Meeting them where they’re at. They know we aren’t there to judge them, we are there to help them. They said they are grateful to talk to someone without being judged.” (RC/CM Interview)*
- **Collaboration with other community partners:** Collaborating with other BHRS programming (including the Enterprise Resource Center (ERC)), substance use treatment providers, probation, community shelters, the Novato PD, and other case managers increased referrals to the Prop 47 program and provided opportunities to refer clients to resources that clients may not have known existed in the community.
 - *“The collaboration with all the other programs...is really helpful. We can help each other out, taking clients on different days, helping with different services. I think that’s the biggest thing, connecting with clients when others aren’t available. We can provide a warm hand-off, which adds another support system to the client. We have to do a warm hand off to other programs, and the best way to do that is through relationship.” (RC/CM Interview)*
 - *“I got involved in your services being incarcerated for mistake I made that cost me. It was a little hectic, I didn’t know as much as I know now with y’all services, how much help y’all provide. Your help allows us if we want help to make us better, if we make the effort to become better...I know I’ve learned a lot about y’all services, I didn’t really know that this county provided the services that I know now being around y’all services and participating in y’all service. It gave me a bigger picture on life, it opened up my eyes to something bigger.” (Client Interview)*

Conclusion

A key lesson learned from Cohort 2 was that clients needed to have stable housing before they were ready to engage in mental health and substance use treatment services. Without stable housing, clients had difficulty keeping appointments, staying in treatment, and preparing for employment. Once these needs were met the clients had more capacity and interest to engage in other resources. RC/CMs provided substantial assistance for housing, shelter, and other basic necessities, which helped to meet immediate needs and pave the way for many clients to substantially improve their housing situation, engage in substance use recovery, and reduce criminal justice involvement. These low-barrier services have been adopted by BHRS’s Recovery Coaches and the Marin County Probation Department and will continue in a similar form even though Cohort 2 funding has ended. Additionally, through Prop 47 Cohort 3 Marin County will be expanding access to transitional housing for individuals involved in Marin’s collaborative courts. By continuing to provide low-barrier services to clients experiencing homelessness and through expanding transitional housing resources, Marin aims to support individuals’ substance use recovery and successful exit from the criminal justice system, and provide stepping stones to a healthier future.



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Marin County Prop 47 Cohort 2 Logic Model

Problem Statement: County residents who have been arrested, charged, and/or detained by the criminal justice system and who have a history of repeat, low-level offenses due to homelessness, mental health disorders, and in some cases co-occurring substance use issues struggle to make and keep appointments or stay in treatment, even when required by the court. When these individuals are required to complete court ordered activities or provide some level of restitution, the Judges and Prosecutors do not have the resources to assist, supervise or to track progress and compliance.

Goal 1: To help repeat offenders to improve their lives and exit criminal justice system involvement.

Goal 2: To reduce the impact of substance use in our population of focus.

Goal 3: To reduce criminal behavior in our population of focus.

INPUTS

- Court system partners (Judge, PD, DA, Probation, Jail Reentry Team and WPC)
- Recovery Coaches/Case Managers (RC/CMs, 1.5 FTE)
- County contracted behavioral health services
- Other leveraged services: employment training, primary care services etc.

ACTIVITIES

- Referrals to program:
 - Assess suitability of low-level offenders for program
 - Refer 270 individuals in grant period
- Case Management:
 - Describe services available to potential participants
 - Enroll participant and assess with Self-Sufficiency Matrix
 - Jointly prioritize needs
 - Provide transportation as needed
 - Check-in with participant as needed
- External Service Referrals:
 - Provide referrals to community programs and resources
 - Follow-up with participants and programs on status of participant engagement

OUTPUTS

- Number of individuals referred to a RC/CM
- Number of individuals that attend an initial screening with a RC/CM
- Number of individuals that enroll and receive services from a RC/CM
- Referrals to needed and prioritized services in the community as appropriate
- Enrollments in substance abuse and/or mental health treatment
- Screening for public benefits completed

OUTCOMES

Short-term:

- Participants engage in behavioral health services as needed
- Participants receive appropriate public benefits
- Participants receive other social services in the community as needed

Intermediate:

- Improved court compliance
- Completion of court requirements

Long-term:

- Reduced contact with law enforcement, arrests & jail commitments
- Reduced recidivism for up to 36 months post completion