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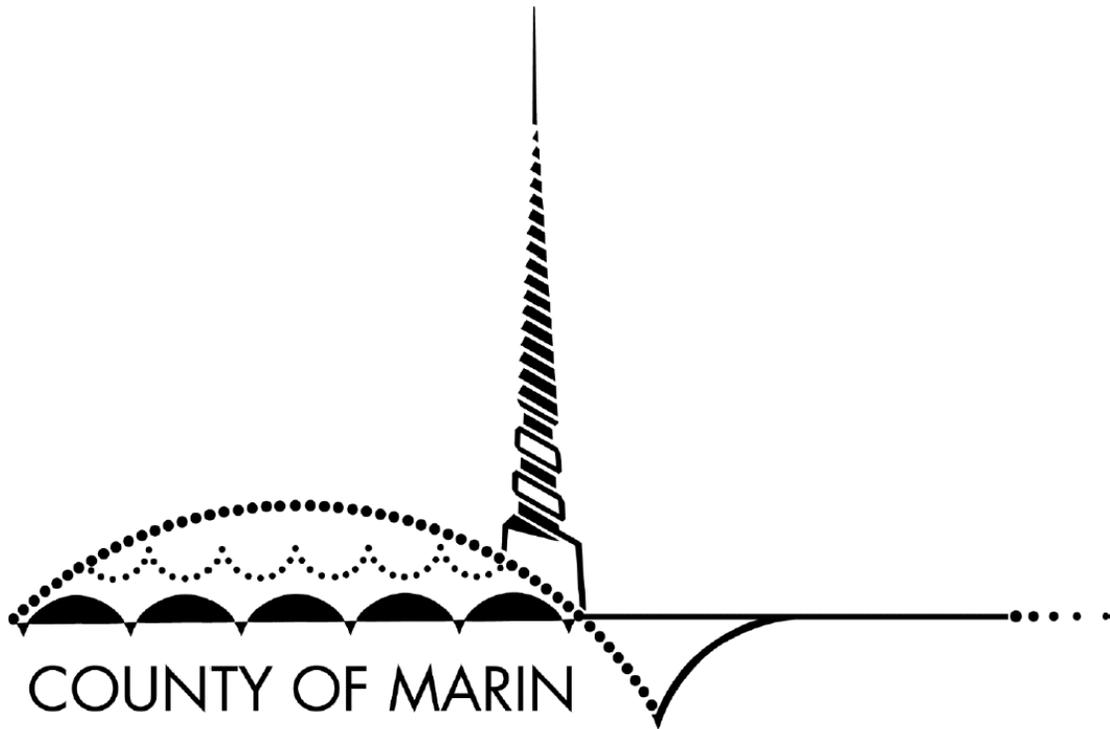


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MARIN COUNTY PROPOSITION 47 COHORT 2



COUNTY OF MARIN

Final Local Evaluation Report

Prepared for the Board of State and Community Corrections by:

Marin County Behavioral Health & Recovery Services

Marin County Proposition 47 Local Advisory Committee

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September 30, 2021



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EXECUTIVE SUMMARY

Project Purpose: Marin County's Proposition 47 Improving Lives Via Opportunity and Treatment (PIVOT) program, funded by a Proposition 47 Cohort 1 grant, was a care coordination program for individuals with low-level criminal charges and behavioral health disorders. The program had two components. First, the program utilized 1.5 FTE Justice Care Coordinators (JCCs) on-site at the Marin County Superior Court and in the community to meet clients, complete intake assessments, and to provide short-term case management to help link clients to services. Second, in partnership with the St. Vincent de Paul Society of Marin, the program operated a five-bed supported living home providing transitional housing (6 months - 1 year) for women at risk of homelessness who needed behavioral health treatment. The primary goals and objectives of the PIVOT program were to help clients exit criminal justice system involvement through improving court ordered compliance, reducing the behaviors that lead to re-arrest and re-incarceration, and stabilizing criminal justice-involved adults in supportive housing.

Project Accomplishments: From August 2018 to August 2021, 175 individuals were referred to the JCC case managers for assessment, and 141 (81%) were found to be eligible and agreed to accept PIVOT case management services. Of the 141 clients that received PIVOT Cohort 1 services, 24% were referred through the Pathways Mental health court. The most common services the JCCs provided and/or referred clients to included mental health services, substance use services, and housing. Of the 34 clients that were involved in the Pathways court 88% successfully completed services and satisfied court orders. Of the 107 clients that were referred to the program through another source 79% had successful completion of JCC services. In total 16 women were referred to the Proposition 47 House, and 14 were admitted to the house. 50% of women admitted successfully graduated from the house.

Goals Accomplished: Although the overall count of clients served was less than anticipated, clients who received PIVOT services saw improvements for all goals set for the program. For Goal 1: "To help repeat offenders improve their lives and exit criminal justice system involvement", clients, as a group, experienced improvement in all quality-of-life measures on the self-sufficiency matrix. The greatest improvements were in the Access to Services, Legal, and Mental Health metrics. For Goal 2: "To reduce homelessness in our population of focus" 14 women were provided safe and stable housing at the Proposition 47 House, with 50% of participants graduating from the house and exiting to stable housing. In addition to the housing improvements seen in the Proposition 47 House, JCCs provided a housing referral for 19% of enrolled clients. For Goal 3: "To reduce recidivism in our population of focus" clients saw a reduction in jail days and booking in the Marin County jail, comparing the 365 days pre-enrollment and 365 days post-enrollment into PIVOT case management services. The average number of jail days per client decreased by 52%, from 70.7 to 34 days. Of the 111 clients evaluated for new convictions as of January 2021, 11.7% had a new conviction for a felony or misdemeanor committed after PIVOT enrollment. Among those who successfully completed services, 9% recidivated post enrollment, compared to 23% who exited the program without completing requirements.

Unintended Outcomes: The flexibility of the JCCs work with the Proposition 47 program allowed them to adapt to new challenges and opportunities in the county. When the COVID-19 pandemic began in March 2020, JCCs were activated as emergency workers to outreach to unhoused individuals in the



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community, many of whom became unhoused for the first time after losing their jobs and housing due to the pandemic. Even once the JCCs were no longer officially deployed as emergency workers (June 2020), they continued direct outreach in the homeless encampments and were able to enroll eligible clients into PIVOT (Cohort 1) and Proposition 47 Cohort 2 services. In early 2021, Marin County launched a Behavioral Health Diversion program focused on offering treatment in lieu of incarceration to people with behavioral health disorders who were charged with criminal offenses. In developing that program, we recognized that eligibility criteria and treatment goals for individuals referred for Diversion were essentially the same as for our PIVOT program. As such, we recognized an opportunity to utilize our JCCs to provide care coordination and support to clients going through the Diversion legal processes.

Barriers: One of the key challenges, for both JCC case management services and the Women's Proposition 47 House, was the low number of referrals into the program. We attempted to boost referrals through the quarterly Local Advisory Committee, asking for more clients and asking how JCCs could help facilitate referrals. In the second half of the PIVOT program, the JCC case managers and Women's Proposition 47 House began accepting referrals through community partners, in addition to the referrals from local justice partners, including Recovery Coaches who work for Marin County's Behavioral Health and Recovery Services. While collaborating with justice system partners and expanding referrals from other community sources increased referrals to the program, additional impacts from COVID-19 continued to keep the number of new referrals into the program lower than forecasted in the initial local evaluation proposal. Once clients were enrolled in PIVOT services, there were additional challenges meeting clients' housing and insurance needs. Many clients referred to PIVOT through community referrals were looking to receive housing or obtain public benefits. However, Cohort 1 did not provide funding for housing and the process to get SSI or MediCal was often time consuming. To meet the housing challenge, JCCs would refer clients to local shelters and in-patient treatment programs, but this only partially met the need. However, Marin County did receive additional funding for housing through Proposition 47 Cohort 2 and we were able to transfer clients as needed. Although one of the programs primary strengths was being able to serve individuals without MediCal, we observed challenges in providing services to these uninsured individuals as we were not able to quickly refer clients to services in the community that required MediCal.

Lessons Learned: The PIVOT program piloted several initiatives in the County for the first time: Behavioral Health Diversion, building out community support for jail re-entry, and the creation of the women's Proposition 47 House. There were many lessons learned from these initiatives: 1) Making connections across the justice-system partners, community organization, and Marin BHRS, helped to break down silos and create a broader network of support for individuals in the community experiencing homelessness, behavioral health challenges, and criminal justice involvement; 2) Both JCC Case Management and the women's Proposition 47 House started with more direct court involvement (Pathways Court for JCC Case Management and District Attorney Referrals for Prop 47 house) and moved towards receiving more community and jail re-entry referrals for clients who had previous justice involvement but did not necessarily have an active court case. Although engagement was difficult for some clients when it was not required, other clients thrived when no longer required to participate in services. These experiences demonstrate that although PIVOT services partnered well with the court system, individuals still found PIVOT services helpful even if not required by a judge or District Attorney;



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3) Challenges with meeting housing and insurance needs, pointed to the need for future programs to provide funds for even transitional or short-term housing, which help to provide stabilize client, develop trust with case managers, and connect clients with services in the community; 4) Although measuring long-term outcomes like independent living, full-time employment, and reduction in recidivism are one important measure of program success, interviews with partners, staff, and clients provided an expanded definition of success. Staff shared stories of clients who got onto medication through Pathways Court and began smiling again and felt pride in their progress, clients who were willing to engage in substance use treatment for the first time, clients who maintained the longest period of sobriety that they had experienced in the last two years, and clients who were able to leave domestic violence situations and receive safer housing. For future programs we will continue to measure recidivism outcomes, but also include these intermediate outcomes and client stories to provide a wholistic view of client success.

Conclusion: Although the program did not receive as many referrals from justice-system partners as anticipated, clients who enrolled in PIVOT services, in JCC Case Management services for Pathways Court and non-Pathways Court clients, and women who stayed at the Proposition 47 House, saw substantial improvements in self-sufficiency, were able to meet Court requirements, and had decreased recidivism post-enrollment. The county continues to build on lessons learned from the Proposition 47 Cohort 1 program, through the Proposition 47 Cohort 2 program, founding a new women's house through MHSA funds, and expanding Behavioral Health Diversion efforts.



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PROJECT OVERVIEW

Project Description

Marin County's Proposition 47 Improving Lives Via Opportunity and Treatment (PIVOT) program was a Proposition 47 Cohort 1-funded care coordination program for individuals with low-level criminal charges and behavioral health disorders. This included a focus on linkages to mental health and substance use treatment, housing, public benefits, and social supports. Eligible clients include Marin County adult residents with low-level charges and behavioral health disorders.

This program had two components.

- First, we utilized 1.5 FTE Justice Care Coordinator (JCC) on-site at the Marin County Superior Court and in the community to meet clients, complete intake assessments, and to provide short-term case management to help link clients to services.
- Second, in partnership with the St. Vincent de Paul Society of Marin, we operated a five-bed supported living home providing transitional housing (6 months - 1 year) for women at risk of homelessness who needed behavioral health treatment.

Goals and Objectives

The primary goals and objectives of the PIVOT program were to help clients exit criminal justice system involvement through improving court ordered compliance, reduce the behaviors that lead to re-arrest and re-incarceration, and to stabilize criminal justice-involved adults in supportive housing.

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

Objectives: To improve court ordered compliance (i.e. showing up for hearings, appointments, services, and other court ordered activities) in our population of focus.

Goal 2: To reduce homelessness in our population of focus.

Objectives: To stabilize homeless, court-involved women with supportive housing and case management support.

Goal 3: To reduce recidivism in our population of focus.

Objectives: To use evidence supported programs and practices to reduce behaviors that lead to frequent contact with law enforcement, re-arrests and jail bookings, and increase behaviors that support long-term stability.

RESEARCH DESIGN

Process Evaluation Design

The process evaluation examines the characteristics of clients served through the PIVOT program, client engagement with the program, and the services and referrals provided. These metrics measure the degree to which clients received the services for which they were eligible and which would help stabilize their lives.



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Measure	Definition	Measurement Tool
Characteristics at Enrollment	Demographics (Race/Ethnicity, Gender, Language), Behavioral Health, Housing and Employment Status	P47 Access Database
Source of Program Referral	Count of referrals, by referral source including Pathways and non-Pathways related referrals	P47 Access Database
Type of Case Management Received	Count of clients that received case management services directly from JCC compared to count of clients that primarily received case management through another community referral	P47 Access Database
Services and Referral Provided	Type of services and referral made to clients (Employment Support, Housing Program, Mental Health Services, Public Benefits Enrollment Counselor, Substance Use Services, Targeted Case Management) and proportion of clients that received/accepted the service	P47 Access Database

Outcome Evaluation Design

The outcome evaluation examines the degree to which being involved in the program impacts participants' well-being, housing status, and recidivism. The outcome evaluation looks at the intermediate and long-term outcomes identified in the logic model. There is no comparison group, but rather the outcome evaluation uses a quasi-experimental pre and post study design. In addition, interviews with program staff provide context to client outcomes and the impact of the PIVOT Cohort 1 program.

Outcome	Definition	Measurement Tool
Intermediate Outcomes		
Complete Court and Program Requirements	Proportion of clients that completed court compliance (for those involved in Pathways court) and who successfully completed the program (all participants)	P47 Access Database
Improved Life Functioning	Measured by changes in scores on Self-Sufficiency Matrix from enrollment to 6 months post enrollment (Goal 1) and improvement in housing stability (Goal 2)	P47 Access Database
Long-Term Outcomes		
Reduced contact with law enforcement	Decrease in jail days and booking in the 365 days pre and 365 days post enrollment.	Sheriff's Database
New Convictions	Measure the proportion of clients with a new misdemeanor or felony charge committed after enrollment in Proposition 47 services (Goal 3)	EJUS & District Attorney

DATA COLLECTION

Data Sources

The following sources of data informed the preparation of this report.



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Service utilization – Marin County HHS created a Microsoft Access database to track client referrals, admissions, completion, services provided by the JCC, and referrals for services. This report includes data from the start of client admissions from August 2018 through August 2021.

Quality of life assessment - Quality of life measures are the mediating factors to achieve stability, complete court requirements and avoid future justice involvement. The Self Sufficiency Matrix assesses 25 client-oriented outcome scales through an interview conducted by the JCC with the client at initial assessment and at six-month follow-ups. Each measure is scored on a scale from 0 (in crisis) to 10 (thriving)¹.

Partner interviews – The evaluator conducted brief interviews with Marin County Behavioral Health & Recovery Services staff and criminal justice system partners to learn about the observed value of PIVOT services for clients, partners’ work, as well as systems impact. In addition to the interviews conducted for the mid-term evaluation report, interviews for the final report included: two Justice Care Coordinators, BHRS Forensic Division Director, Jail Mental Health Supervisor, Public Defender, and Women’s Proposition 47 House case manager.

Jail days and Bookings – Booking and jail days provided through Marin’s Data Driven Recovery Project partner through the Stepping Up Initiative in coordination with the Marin County Sheriff’s IT department. Booking and jail days were compared in the 365 days pre and the 365 days post-enrollment.

Recidivism – The Electronic Justice System (EJUS) was used to identify clients that 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.

Challenges in Data Collection

Overall, there were few challenges in data collection throughout the program. The main challenge was collecting client data at the time of discharge. Many clients did not have an official discharge with the JCC, and therefore the JCCs had to make their best assessment of client status at the time of the last meeting. This means that not all clients have self-sufficiency matrix scores at both enrollment and 6 months following enrollment, and that the forms filled out 6 months following enrollment do not always come directly from client self-report. In addition to the challenge with discharge data, JCCs found it burdensome to fill out all 25 measures of the self-sufficiency matrix for every client at enrollment and discharge. In the second half of the program, JCCs focused on a smaller subset of 10 measures, which was further narrowed down to 4 key measures for Proposition 47 Cohort 2 clients.

PROCESS EVALUATION

Referrals & Admissions to PIVOT JCC Services

Referrals were made to case management services provided by Justice Care Coordinators (JCCs) through several mechanisms. These included the following:

1. *Pathways Mental Health Court*: The Marin County Superior Court operated an adult mental health specialty court, called Pathways, on a weekly basis. All individuals in Pathways who met eligibility criteria

¹ 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

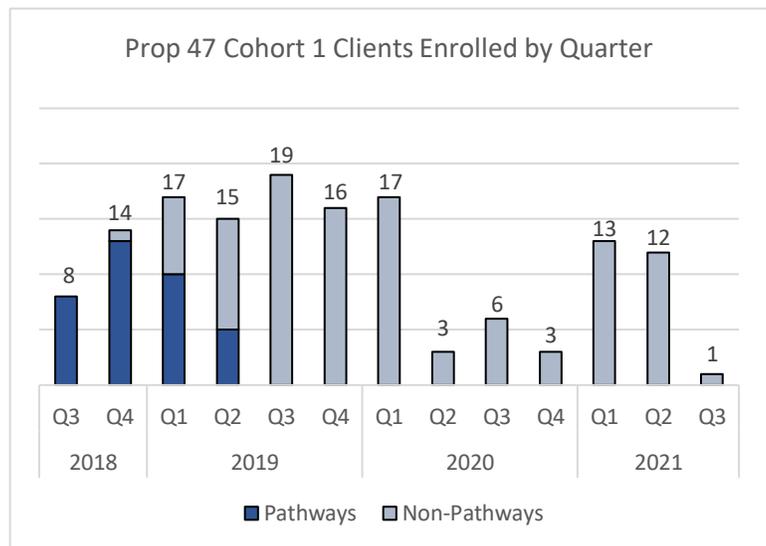
were referred for PIVOT services. This occurred through a weekly pre-court collaborative meeting with the mental health court Judge, District Attorney, Public Defender, Sheriff’s Jail Reentry Team, Whole Person Care (WPC) business unit team, and Health and Human Services (HHS) staff. Referrals from Pathways Court began August 2018 and ended Fall of 2019.

2. *General Misdemeanor Court (Courtroom M)*: Referrals for individuals seen in the general misdemeanor court typically came directly from the representing Public Defender who called or emailed JCCs to alert them of potential client. Referrals also came from the Judge, District Attorney, Probation, or a self-referral. Referrals from Courtroom M began March 2019.

3. *Marin County Jail Re-Entry*: Jail Mental Health staff along with other members of the jail re-entry team referred individuals in-custody who met enrollment criteria for PIVOT services and were nearing release to the community. The JCC visited with the client in jail to determine if the client was eligible and would like to enroll in services. In some cases, the JCCs would pick-up a client from the jail immediately upon release and in other cases the JCC would connect with the client in the community after they had been released from jail.

4. *Community Partnerships*: Referrals could be made through other community service providers and BHRS Recovery Coaches. The JCC would visit with the client to determine if the client met eligibility in criteria and would like to enroll in services.

Marin County’s PIVOT Cohort 1 program had several changes in referral source and client enrollment over the course of the grant period. August 2018 through July 2019 the program enrolled clients from the Pathways court. In 2019 the program started enrolling non-Pathways court clients, including through the General Misdemeanor Court and referrals from the Marin County jail re-entry team, including clients with substance use issues. Client enrollment was substantially reduced in the first 9 months after the COVID-19 pandemic began in March 2020 due to impacts on the court and jail system. 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. In January 2021, the Behavioral Health Diversion program launched in Marin County, and JCCs provided support to clients referred for Diversion. The following table provides the timeline of program milestones and changes in participant inclusion criteria over the course of the program.



175 individuals were referred to the JCC for assessment, and 141 (81%) were found to be eligible and agreed to accept PIVOT case management services. Of the 141 clients that received services, 24%

² CA Judicial Council emergency rules: <https://www.courts.ca.gov/documents/appendix-i.pdf>

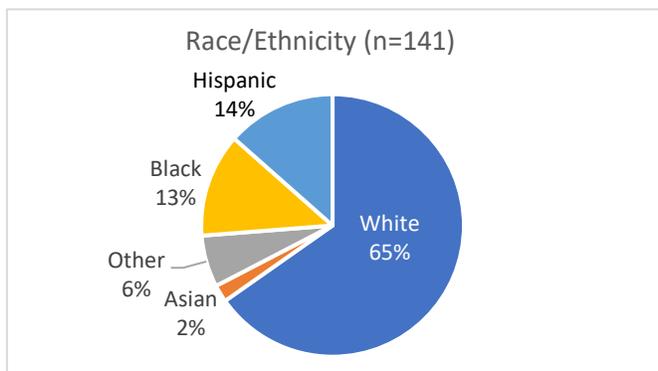
(n=34) were referred through the Pathways Mental health court (dark blue portion of the bar chart). Of the 24 individuals who were referred to PIVOT but did not accept services, 67% were not eligible, and 33% declined services.

<i>Proposition 47 Cohort 1 Program Milestones</i>			
Stage	Date	Program Milestones	Participant Inclusion
1	August 2018	JCCs hired, begin working with Pathways court clients	Client with mild to moderate mental illness in Pathways court
2	2019	Pathways court continues, expanded participant inclusion	In addition to Pathways court clients, added non-Pathways court clients with behavioral health issues (including mental illness and substance use issues)
3	January 2020	Pathway court ends	Pathways court ends, JCCs continue serving non pathways clients with mental illness and/or substance use issues
4	March 2020	COVID-19 pandemic begins	No changes to participant inclusion, but fewer client referrals as jail and court system responds to COVID-19 pandemic
5	January 2021	Behavioral Health Diversion launches	JCCs supported clients referred for Diversion
6	August 2021	Cohort 1 program ends	

Client Characteristics at Enrollment

Demographics

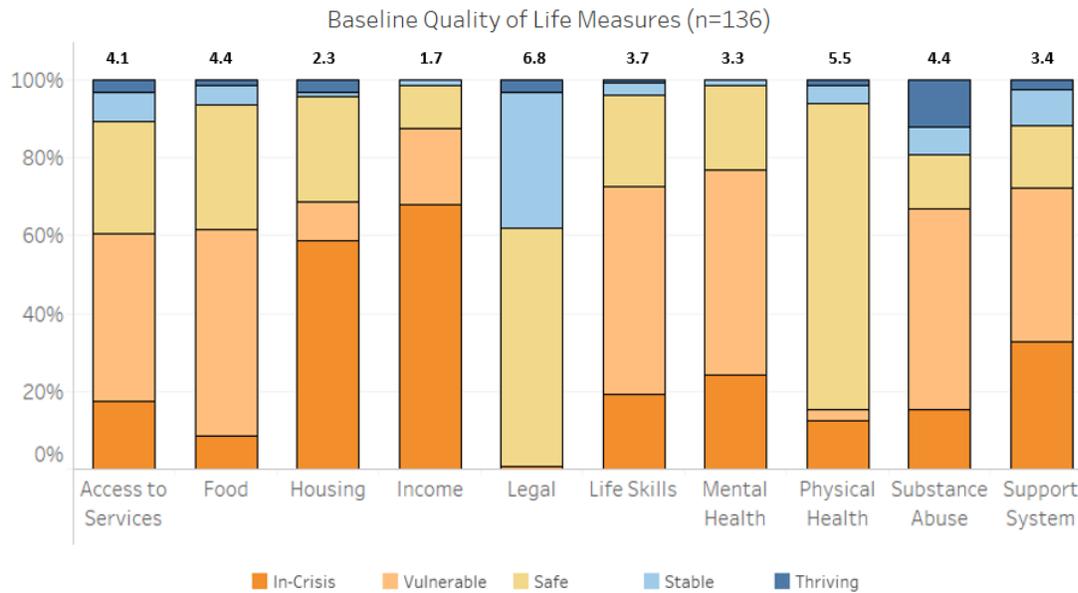
Of the 141 clients that enrolled in the program, the majority identified as white male English speakers between the ages of 26 to 64. 14% identified as Hispanic Latinx, 0.7% spoke Spanish as their primary language, and 7% were transitional age youth (ages 18 to 25).



Demographics (n=141)	Count	Percent
Race/Ethnicity		
Asian	3	2.1%
Black	18	12.8%
Hispanic/Latinx	19	13.5%
Indigenous/Alaska Native	2	1.4%
White	92	65.2%
Other/Multi-Racial	7	5.0%
Primary Language		
English	134	95.0%
Spanish	6	0.7%
Unknown	1	4.3%
Age Category		
18 – 25	10	7.1%
26 – 43	65	46.1%
44 – 64	63	44.7%
65 +	3	2.1%
Gender		
Female	12	35.5%
Male	43	63.8%
Other	1	0.7%

Self-Sufficiency Measures

JCCs complete the Self-Sufficiency Matrix as part of the assessment process. The figure below shows the baseline average scores and benchmark levels for clients who enrolled in PIVOT services for the most frequent client identified priority issues. The self-sufficiency matrix was filled out for 136 out of 141 enrolled clients. At the time of enrollment, most clients were in-crisis or vulnerable in terms of income, mental health, housing, access to services, substance use, and food insecurity. The great majority were in the safe benchmark for legal issues meaning that they are responding to and receiving assistance on legal issues. The goal of case management services was to provide support and refer clients to services that would assist them in moving to a higher benchmark level.



Behavioral Health, Housing, and Employment Characteristics of Enrolled Clients

At the time of enrollment 87% of clients reported having a substance use issue and 59% reported having a mental health issue (24% SMI, 35% non-SMI). 55% of clients were unhoused and 89% were unemployed.

Behavioral Health	Count	Percent
Substance Use		
Yes	96	68.1
No	45	31.9
Mental Health		
SMI	76	53.9%
non-SMI	48	12.1%
None	17	34%

Housing, Employment, and Education Status	Count	Percent
Housing		
Street/ Outdoors	67	48%
Shelter	10	7%
Someone else's apartment, room, or house	30	21%
Own/ rent apartment, room, or house	24	17%
Group home or SLE	3	2%
Residential treatment	2	1%
Jail	5	4%
Education		
Employed full-time (35 hours or more)	3	2.1
Employed part-time (less than 35 hours)	12	8.5
Unemployed, looking for work	36	25.5
Unemployed, not seeking work	80	56.7
Unemployed: FT student, disabled or retired	10	7.1

Services Provided by Justice Care Coordinators

JCCs supported various courtrooms and justice-involved clients in different ways depending on the source of the referral and needs of the client. For example, the Pathways Mental Health Court provided comprehensive Court oversight for individuals with behavioral health disorders and low-level criminal offenses. Defendants were expected to spend at least six months in the Court, with regular (often weekly or biweekly) court appearances. For these clients, the JCCs actively engaged in making referrals to mental health and substance use services, providing transportation when needed, liaising with existing service providers, coordinating services with the Jail Reentry Team, Whole Person Care (WPC), and the County Recovery Coach assigned to the court and regularly reporting back to the Court in both pre-Court meetings and in open Court about clients’ progress and compliance with Court requirements. In contrast, the general Misdemeanor Courtroom experiences a high daily caseload with relatively few appearances by each Defendant. The services provided by JCCs were typically short term, often single referrals to housing or public benefits, or brief case management designed to link clients to other services and sometimes includes continued support and transportation. For clients referred through jail re-entry or other community organizations, level of engagement with the JCC was determined by the client’s goals and level of support needed. **Of the 141 enrolled clients, 62% (n=87) received active, ongoing service through JCC case management and 38% (n=54) received case management through another referred community source.**

Care Coordination: The JCCs created a bridge of communication between community service provider and criminal justice partners for the benefit of both clients and targeted case management staff. An externally based service provider cannot bill Medi-Cal for services provided while the client was in jail, so the JCC could step into that support role. After admission to PIVOT, the JCCs collaborated regularly with targeted case management staff regarding how PIVOT clients were doing.

Support: JCCs provided support to the client while in custody and when they were in the community. While providing services the JCCs also taught clients how to access resources on their own.

Public Benefits: JCCs connected clients with a Public Benefits Enrollment counselor and worked with clients directly to help them obtain public benefits. Of the 16 clients referred by JCC to a Public Benefits counselor, 4 clients obtained MediCal, 3 clients obtained CalFresh, and 5 clients obtained General Assistance.

Referrals for services: During the process of assessing potential clients’ needs, the JCC would identify resources within the county to make referrals for services. Some clients received multiple referrals from the JCCs. Mental Health and Substance Use services made up the largest number of referrals. 67% of clients who received a mental health service referral from the JCC accepted and/or got connected to the service, 92% of clients who received a substance use service referral from the JCC accepted and/or got connected to the service.

Service/Referral Type	Total Referrals	Clients with 1+ Referral	Clients Accepted at Least 1+ Ref	% Clients Accepted to 1+ Ref
Mental Health Services	114	67	45	67%
Substance Use Services	111	52	48	92%
Housing Program	72	42	27	64%
Case Management	40	28	23	82%
Public Benefits Enrollment Counselor	16	14	11	79%
Employment Support	5	5	4	80%



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Services Provided by the Women’s Proposition 47 House

The Women’s Proposition 47 House, run by the St. Vincent de Paul Society of Marin, was a supportive living environment for women with justice involvement and substance use disorders who experience chronic homelessness when not otherwise incarcerated. The Women’s Proposition 47 House promoted individual healing through positive peer group interactions, substance use treatment, and intensive case management. There was no cost to participants.

At the start of the program, participants were referred to the Women’s Proposition 47 House through the Marin County District Attorney and Public Defender’s Offices, but in the second half the program women who met the eligibility requirements (recent criminal justice involvement and existing behavioral health issues) could be referred through community partners even if they did not have an existing court case. Women with an open court case were given the opportunity to accept the Proposition 47 House program as an alternative to serving the remainder of their sentence. They then signed a plea deal which stated that they were required to live in the Proposition 47 House for a minimum of one year (later revised to 6 months), participate in an intensive outpatient substance use program, meet regularly with the Proposition 47 House Case Manager, meet regularly with their probation officer, attend regular house meetings, and follow all house rules. If a participant violated this agreement beyond reasonable expectations, they were at risk of being incarcerated and serving the remainder of their sentence. Once a participant successfully completed the program the team held a graduation ceremony, their case was dismissed, they were removed from supervised probation, and were supported through moving into independent housing.

In total 16 women were referred to the Proposition 47 House, and 14 were admitted to the house. Of the 14 people admitted to the house, 71% identified as White, 14% as Hispanic/Latinx, 7% Multi-Racial, and 7% (n=1) declined to state. **57% (n=8) of admitted clients were exited to stable housing**, with 7 of the 8 successfully graduating from the house. Of the 6 clients who were not exited to stable housing, 3 were exited because they were re-incarcerated. Among the 8 clients who were exited to stable housing the average length of stay was 341 days, with 5 of the 8 clients staying at the house for longer than 1 year.

Race/Ethnicity	Count	Percent	Age	Count	Percent
White	10	71.4%	18 -26	2	14.3%
Hispanic/Latinx	2	14.3%	27 - 39	5	35.7%
Decline to State	1	7.1%	40 - 59	5	35.7%
Multi-Racial	1	7.1%	60+	2	14.3%

OUTCOME EVALUATION

Completion of PIVOT Services

Successful completion of JCC services signifies that clients engaged in case management services, accepted referrals, and support, and, if applicable, satisfied the requirements set by the court for which they were referred to the JCC. Clients could be discharged for multiple reasons including if the client stated they are no longer interested in receiving services, the client moved away, or the client had no contact with a JCC for 6 or more months

Successful completion of JCC services: 1) Completed an initial strength and needs assessment interview leading to creation of a case plan; and 2) Accepted referrals and engaged in or obtained services, which may include ongoing JCC support and monitoring, and, if applicable, 3) Satisfied court requirements for which individual was referred to JCC.

Unsuccessful disenrollment from JCC services: 1) Refused services/referrals or contact with JCC after enrolling in services and signing consent form; or 2) Moved out of county prior to completing court required services for which JCC was providing assistance; or 3) Acquired new felony criminal charges that preclude continued involvement with PIVOT services.

Of the 141 clients that enrolled in PIVOT case management services, 81% successfully completed JCC services. Of the 34 clients that were involved in the Pathways court, 88% successfully completed services and satisfied court orders. Of the 107 clients that were referred to the program through another source, 79% had successful completion of JCC services.

<i>Discharge Status of Enrolled PIVOT Clients</i>			
Discharge Status	Not Pathways (n=107)	Pathways (n=34)	Total (n=141)
Successful completion of JCC services	84	30	114
Unsuccessful disenrollment from JCC services	23	4	27
% Successful Completion	78.5%	88.2%	80.9%

Intermediate Outcomes

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

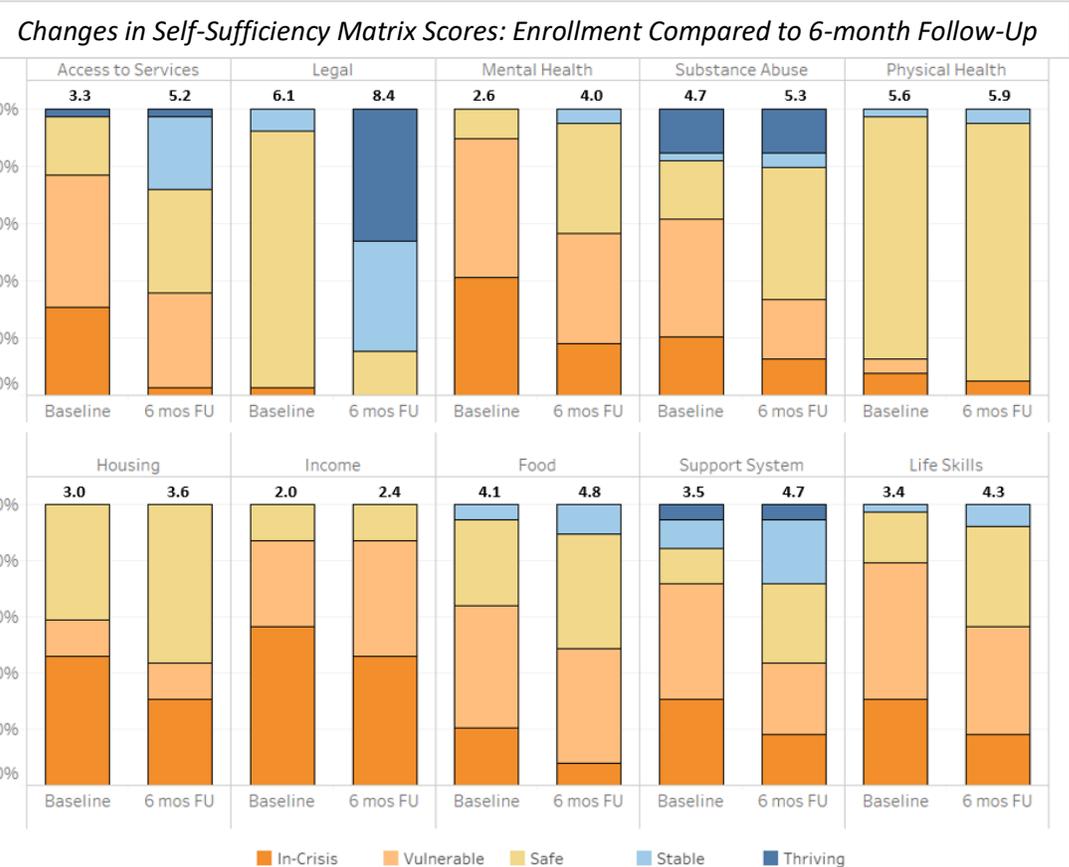
In addition to completing the Self-Sufficiency Matrix at program entry, JCCs conduct a follow-up assessment six months after entry into PIVOT services. The results below show the baseline and follow-up average scores and benchmark levels for the 136 individuals who enrolled in services at least six months ago and with whom we were able to conduct a follow-up assessment.

Clients, as a group, experienced improvements in all quality-of-life measures.

- **Legal** – At six months nearly all clients were stable (legal issues moving towards resolution) or thriving (legal issues fully resolved or dismissed).
- **Access to Services** – Barriers to obtaining services were greatly reduced from entry to follow-up.
- **Mental Health** – At baseline, the majority of clients experienced significant problems and difficulty caring for their mental health. At follow-up, increasing numbers were at the safe benchmark.

- **Substance Use** – About 60% of clients were vulnerable or in-crisis at the initial assessment. This dropped to less than 30% at follow-up.
- **Housing** – Three-fifths of clients were in-crisis or vulnerable in terms of housing at enrollment in services. While we did see improvements at six months this continues to be a problem area for many individuals.
- **Physical Health** – Although this was not the greatest need area at baseline, clients continued to have improved status, indicating that conditions were being better managed and more had health insurance coverage.
- **Income** – There was a small improvement at six months, though many clients continued to have inadequate income for meeting basic needs.
- **Food** – Access to food also improved somewhat, with the majority of clients at the safe or stable benchmark.
- **Support Service** – Through accessing services clients had increasingly reliable support systems.
- **Life Skills (setting goals & resourcefulness)** – Through PIVOT and other county targeted case management services to which clients were referred, they became increasingly able to set goals and be resourceful about meeting their needs.

Multiple partners observed that while enrolled in the programs clients are more productively engaged in their community and getting into “less trouble”. They can better maintain themselves in stable shelter, participate in community supports, and in some cases maintain employment.



Goal 2: To reduce homelessness in our population of focus.

The key objective of this goal is to stabilize homeless, court-involved women with supportive housing and case management. Of the 14 women admitted to the Proposition 47 House, 57% (n=8) of admitted clients were exited to stable housing, with 7 of the 8 successfully graduating from the house. Of the 6 clients who were not exited to stable housing, 3 were re-incarcerated. Among the 8 clients who were exited to stable housing the average length of stay was 341 days, with 5 of the 8 clients staying at the house for longer than 1 year. In the second half of the program, funding was approved to provide financial support for women moving to independent housing for the first 6 months after graduating and leaving the Proposition 47 House. This funding provided a crucial support during the transition from the Proposition 47 House to learning to live independently, retain a job, and pay for rent. As of September 2021, the three women who received this funding were able to gain employment, learn to navigate roommate and housing situations, and maintain employment following the 6-month period of additional financial support.

In addition to the housing improvements seen in the Proposition 47 House, JCCs provided housing referrals for clients receiving case management services. JCCs provided a housing referral for 19% (n=27) of enrolled clients, with 63% (n=17) of clients accepting the housing referral.

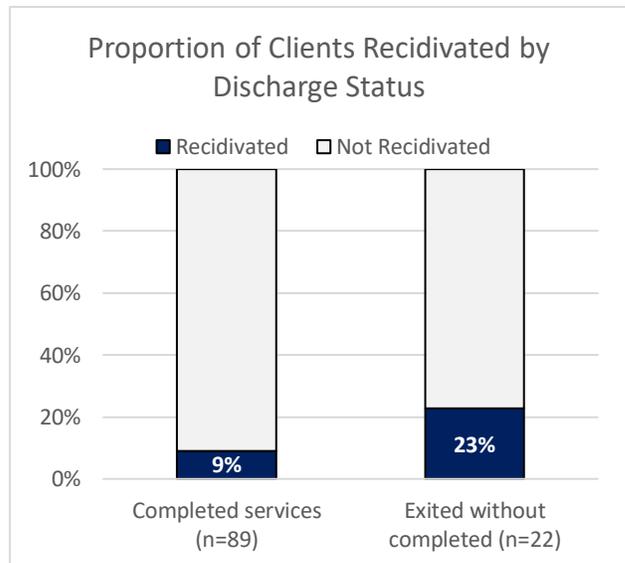
Long-Term Outcomes

Goal 3: To reduce recidivism in our population of focus.

Recidivism outcomes were measured in three ways: conviction of a misdemeanor or felony, jail bookings, and jail days (length of stay). Note, there are several limitations to this recidivism analysis: 1) results are for Marin county jail only, if participants were booked or served time in another county jail, that time would not be reflected here and 2) as many clients entered PIVOT services directly after being released from jail, some reduction in booking and jail days is expected.

Convictions

Of the 111 clients evaluated for new convictions (clients enrolled August 2018 to June 2020) as of January 2021, 11.7% (n=13) had a new conviction for a felony or misdemeanor committed after PIVOT enrollment. Among those who successfully completed services, 9% (8 out of 89), recidivated post enrollment, compared to 23% (5 out of 22) who exited the program without completing requirements. 2 out of 5 clients who completed services and recidivated post-discharge were in the Pathways court. None of the Pathways court clients recidivated while enrolled in PIVOT services. In 10 of the 13 convictions that occurred, the crime was convicted within 1 year of enrolling in PIVOT services.





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Recidivism Outcomes by Discharge Status (among clients enrolled between August 2018 – June 2020)

	Recidivated Pre-Discharge (During Enrollment)	Recidivated Post-Discharge	Total Recidivated
Completed services (satisfied court orders) (n=89)	3	5*	9.0% (n=8)
Exited without completed (n=22)	3	2	22.7% (n=5)
Totals (n=111)	6	7	11.7% (n=13)

*2 out of 5 clients who completed services and recidivated post-discharge were in the Pathways court.

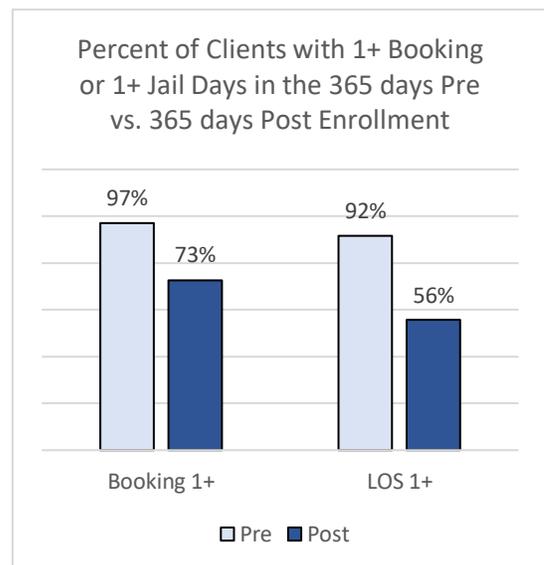
Recidivism: Duration of Time from Enrollment to Commit Date (among clients enrolled between August 2018 – June 2020)

	Count Time Post-Enrollment	Percent	Count Time Post-Discharge	Percent
0-6 months	6	46.2%	4	57.1%
7-12 months	4	30.8%	2	28.6%
1 - 2 years	3	23.1%	1	14.3%
2+ years	0	0.0%	0	0.0%
Total	13	100%	7	100%

Jail Days and Bookings

We compared the number of days in Marin County jail 365 days pre- and 365 days post- entry to Proposition 47 services for the 99 clients who had been enrolled for at least 6 months at the time of the analysis. The average number of jails days per client decreased from 70.7 to 34 days. This represents a 51.9% decrease in jail days corresponding to substantial averted costs.

For clients involved in the Pathways courts, JCCs provided assistance obtaining appointments for services requested by the court (e.g., anger management, substance use disorder treatment, mental health services) and JCCs provided support transporting clients to court appointments. As one justice partner shared, the Pathways court and JCC case management treated individuals as people with mental health issues, looking for ways to help them, rather than treating them as criminals. JCC case management for Pathways and non-Pathway’s clients also supported clients through other mechanisms, such as securing housing and public benefits, helping to reduce contributing factors to recidivism. This support likely contributed to lower convictions and jail stays post enrollment in services.





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Time Period (n=99)	Percent 1+ Booking	Percent 1+ Jail Days	Average Count of Bookings	Average LOS in Jail (Days)
365 days pre-enrollment	97.00%	91.70%	3.8	70.7
365 days post enrollment	72.70%	55.60%	2.3	34.0
Percent Reduction	25.1%	39.4%	38.6%	51.9%

DISCUSSION

Barriers & Facilitators to Program Success

During interviews, staff and justice partners were asked about the barriers and facilitators to referring clients to PIVOT services, maintaining client engagement, providing referrals to community resources, and discharging clients back into the community.

Program Barriers:

Referrals: One of the key challenges, for both JCC case management services and the Women’s Proposition 47 House, was the low number of referrals. We attempted to boost referrals through the quarterly local advisory committee, asking for more clients and asking how JCCs could help facilitate referrals. In the second half of the PIVOT program, the JCC case managers and Women’s Proposition 47 House began accepting referrals through other community partners, in addition to the initial referrals provided through local justice system partners, including recovery coaches who work for Marin County’s Behavioral Health and Recovery Services. While collaborating with justice system partners and expanding referrals from other community sources increased referrals to the program, additional impacts from COVID-19 continued to keep the number of new referrals into the program lower than forecasted in the initial local evaluation proposal.

Client Engagement: Both JCC case managers and the Women’s Proposition 47 House experienced some challenges enrolling and retaining clients who were referred to the programs. For clients referred to JCC case managers through community referrals, many clients were looking to receive housing or get public benefits. However, Cohort 1 did not provide funding for housing and the process to get SSI or MediCal was often time consuming and challenging. Not being able to meet the immediate needs of clients, made it more difficult to establish rapport with clients and follow-up with additional services. To meet the housing challenge, JCCs would refer clients to local shelters and in-patient treatment programs, but this only partially met the need. However, Marin County did receive additional funding for housing through Proposition Cohort 2 and we would periodically transfer clients to take advantage of those housing funds. The Proposition 47 House also experienced challenges engaging clients who had been referred. For some women coming directly from jail or from living on the streets, committing to a full year of sobriety at the house was daunting and prohibitive to enrollment. The program responded by shortening the required stay at the house to 6 months, and clarified the house’s harm reduction approach, really seeking to support women where they were at in their recovery.

Insurance: For both the JCC Case Managers and Proposition 47 House, being able to serve clients without MediCal expanded the number of clients they could serve and the how soon they could start



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seeing those clients. However, we observed challenges in providing services to these uninsured individuals as we were not able to quickly refer those same clients for services in the community that require insurance. For example, clients at the Proposition 47 House were required to participate in outpatient treatment services, but these services based in the community required individuals to have MediCal to enroll. It could take 3-6 months for clients to gain MediCal in which time they had limited access to services in the community. Staff at the house sought to connect women to Alcoholics Anonymous or Narcotic Anonymous meetings for support, but the waiting period between enrolling into the house and receiving treatment services was often a difficult period for clients.

Program Facilitators:

Collaboration with Community Partners: Expanding both JCC case management and Proposition 47 House services to clients with had criminal justice involvement but not a pending/on-going court case allowed greater collaboration with community partners. These community partners not only became a key source for referring clients to the program, but also providing services to these clients. In this way, Proposition 47 was looped into a larger network of organizations seeking to improve lives of individuals with behavioral health issues and justice-system involvement. One PIVOT staff member mentioned that this network could be strengthened through deepening the integration of the community network of care with justice system partners. For example, when the District Attorney provided a referral to the Proposition 47 House, they would only include a client's criminal history, and no mental health history. It might then take several months of evaluation and working with a client to figure out what their behavioral health diagnosis and needs might be. Having better collaboration between both court partners and community organization would facilitate getting clients the support they need right away.

Low-Barrier Services: one of the key strengths of JCC case management is the low barrier to providing that service. Because JCCs could visit with clients in jail prior to being released, which was not possible for other community organizations that require MediCal eligibility, they could start meeting with clients right away and set up a plan for release. Although clients in the Pathways court were required to obtain and stay engaged with services, facilitated through the JCC, many non-Pathways clients stayed engaged with the case managers who could provide flexible support regardless of insurance status.

Unintended Outcomes

The flexibility of the JCC's work with the Proposition 47 program allowed them to adapt to new challenges and opportunities in the county. When the COVID-19 pandemic began in March 2020, JCCs 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. Even once the JCCs were no longer officially deployed as emergency workers (June 2020), they continued direct outreach in the homeless encampments and were able to enroll eligible clients into PIVOT (Cohort 1) and Proposition 47 Cohort 2 services. In early 2021, Marin County launched a Behavioral Health Diversion program focused on offering treatment in lieu of incarceration to people with behavioral health disorders who were charged with criminal offenses. In developing that program, we recognized that eligibility criteria and treatment goals for individuals referred for Diversion were essentially the same as for our PIVOT program. As such, we recognized an opportunity to utilize our JCCs to provide care coordination and support to clients going through the Diversion legal processes.



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Lessons Learned

The Proposition 47 Cohort 1 program piloted several initiatives in the county for the first time: mental health diversion, building out community support for jail re-entry, and the creation of women's Proposition 47 House. The county continues to build on lessons learned from the Proposition 47 Cohort 1 program, through the Cohort 2 program, expanding Behavioral Health Diversion efforts, and founding a new women's house through MHSA funds. The following lessons learned have been used to inform these efforts of the county moving forward:

Importance of Collaboration between Justice-System Partners, Community Organizations, and Marin BHRS: Making connections across the justice-system partners, community organization, and Marin BHRS, helped to break down silos and create a broader network of support for individuals in the community experiencing homeless, behavioral health challenges, and criminal justice involvement. Moving forward Marin seeks to continue growing these partnerships (such as Cohort 2's partnership with the Novato Police Department) to proactively reach out to members of the community to provide services and connect to the resources that they need.

Clients Engage in Services Even When Not Required: Both JCC Case Management and the women's Proposition 47 House started with more direct court involvement (Pathways Court for JCC Case Management and District Attorney Referrals for Prop 47 house) and moved towards receiving more community and jail re-entry referrals for clients who had previous justice involvement but did not necessarily have an active court case. There were fewer mandatory requirements for clients to participate. Some clients benefitted for the structure and requirements of the court, while others met the requirements needed to avoid jail time and then returned to previous behaviors. Although engagement was difficult for some clients when it was not required, other clients thrived when no longer required to participate in services. These experiences demonstrate that although PIVOT services partnered well with the court system, individuals still found PIVOT services helpful even if not required by a judge or District Attorney.

Importance of Housing: During interviews, multiple case managers shared how the challenges in developing rapport with clients and retaining client engagement when case managers were not able to quickly connect clients to the services they need, especially immediate housing. Providing funds, even for transitional or short-term housing, provides a substantial benefit for stabilizing clients, developing trust with the case management system, and connecting clients with services in the community.

Broaden Definition of Success: Although measuring long-term outcomes like independent living, full-time employment, and reduction in recidivism are one important measure of program success, interviews with partners, staff, and clients provided an expanded definition of success. Staff shared stories of clients who got onto medication through Pathways court and began smiling again and felt pride in their progress, clients who were willing to engage in substance use treatment for the first time, clients who maintained the longest period of sobriety that they had experienced in the last two years, and clients who were able to leave domestic violence situations and receive safer housing. Documenting these stories through staff and client interviews helps to highlight the broader impact of the PIVOT services on the lives of the individuals who participated in services. For future programs we will continue



to measure recidivism outcomes, but also include these intermediate outcomes and client stories to provide a wholistic view of client success.

Conclusion

Clients who enrolled in PIVOT services, in JCC Case Management services for Pathways and non-Pathway’s clients, and women who stayed at the Proposition 47 House saw substantial improvements in self-sufficiency and well-being, were able to meet court requirements, and saw decreases in recidivism post-enrollment. Although the program did not receive as many referrals for its services as anticipated, and as result did not enroll as many clients as planned, the program was able to adapt by receiving more referrals from organizations and partners working with individuals in the community. Overall, the program did work as intended to help clients meet immediate service needs and court requirements and see long-term benefits in recidivism outcomes post-enrollment. Proposition 47 Cohort 1 program piloted several initiatives in the county for the first time (Behavioral Health Diversion, building out community support for jail re-entry, and the creation of women’s Proposition 47 House), and the resulting lessons learned are now being carried forward through the Proposition 47 Cohort 2 program, founding a new women’s house through MHSA funds, and expanding Behavioral Health Diversion efforts.

Marin County Proposition 47 Logic Model

- Goal 1:** To help repeat offenders improve their lives and exit criminal justice system involvement.
- Goal 2:** To reduce homelessness in our population of focus.
- Goal 3:** To reduce criminal behavior in our population of focus.

INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES
<ul style="list-style-type: none"> • Court system partners (Judge, PD, DA, Probation, Jail Reentry Team and WPC) • Justice Care Coordinators (1.5 FTE) • County contracted behavioral health services • Other leveraged services: employment training, primary care services etc. • Behavioral health co-pays • 5 bed Women’s Proposition 47 house with staff 	<ul style="list-style-type: none"> • Referrals to program: <ul style="list-style-type: none"> ○ Assess suitability of low level offenders for program ○ Refer 120 individuals a year to court-based JCCs • Case Management: <ul style="list-style-type: none"> ○ Describe services available to potential participant ○ Enroll participant and assess with Self Sufficiency Matrix ○ Jointly prioritize needs ○ Provide referrals and follow-up ○ Provide transportation as needed ○ Check-in with participant as needed • Housing Support: <ul style="list-style-type: none"> ○ Refer Proposition 47 House women to supportive housing units ○ Provide housing support to all other participants ○ Work with WPC case Managers for housing through WPC 	<ul style="list-style-type: none"> • Number of individuals referred to a JCC • Number of individuals that attend an initial screening with a JCC • Number of individuals that enroll and receive services from a JCC • 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 	<p>Short-term:</p> <ul style="list-style-type: none"> • Participants engage in behavioral health services as needed • Participants receive appropriate public benefits • Participants receive other social services in the community as needed • Participants receive housing for which they are eligible <p>Intermediate:</p> <ul style="list-style-type: none"> • Improved court compliance • Completion of court requirements <p>Long-term:</p> <ul style="list-style-type: none"> • Reduced contact with law enforcement, arrests & jail commitments • Reduced recidivism for up to 36 months post completion