Proposition 47 Grant Program Evaluation:
Two-Year Preliminary Evaluation Report
Santa Clara County Behavioral Health Services Department
September 2021
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Executive Summary

Santa Clara County Behavioral Health Services Department’s (BHSD) nearly $6 million Proposition (Prop) 47 Cohort II grant increases outpatient co-occurring and substance use treatment and expands transitional housing units for individuals participating in treatment. Annually, the grant is intended to provide co-occurring treatment to 57 individuals, outpatient substance use treatment (SUTS) to 272 individuals, and transitional housing to 200 individuals. Once enrolled in outpatient treatment, participants are eligible to be referred to housing navigation and employment services—with a target of providing housing navigation to 125 individuals and employment services to 75 individuals. The Prop 47 program serves court-involved individuals who have a moderate, severe, or persistent mental health and/or substance use condition that can be treated in a community-based outpatient setting. Out of the nearly $6 million received by the County, 90% of the funds are subcontracted to community-based organizations to deliver services.

Program Accomplishments

**Clients Served.** From April of 2020 through March of 2021, Santa Clara County’s Prop 47 program provided services to 126 unique individuals.

**Co-occurring treatment.** Provided by one community-based organization, the co-occurring treatment provider offers case management, individual and group therapy, medication support, and a variety of evidence-based practices, including cognitive behavioral therapy. Through March of 2021, 89 individuals participated in co-occurring treatment, surpassing the goal of serving 57 individuals annually.

**SUTS.** Three community-based providers provide outpatient and intensive outpatient services. All three providers offer case management, individual and group therapy, and use a variety of evidence-based practices including Dialectical Behavior Therapy. Through March of 2021, 38 participants received SUTS.

**Transitional housing.** Transitional housing placement is available to all participants who need housing. These are provided through transitional housing units and placements at recovery residences or sober living environments. Of the 126 unique individuals enrolled in outpatient services, 112 presented a need for housing and 80 of those with a need (71%) were placed in transitional housing.

**Housing navigation and employment services.** The County subcontracted with one community-based provider for housing navigation and one provider for employment services. These providers connect participants to housing resources and provides job readiness training and transitional employment, utilizing evidence-based practices such as Moral

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1 One participant was enrolled in both co-occurring treatment and SUTS at different times during the reporting period.

2 Even though someone may have presented a need for placement into a THU, participants were given the opportunity to stay in other locations and were not required to accept THU placement.
Reconation Therapy and the housing first model. Treatment providers referred 18 participants to housing navigation services and all 18 enrolled in services. Treatment providers referred six participants to employment services and one enrolled in services.3

Of the 52 individuals who entered the program unemployed, three (6%) gained either full-time or part time employment by program exit. Of the 58 individuals who exited transitional housing, 21 (36%) exited to permanent housing.

Recidivism. Of the 54 individuals who enrolled in the program in 2020, two (4%) were convicted of a new felony or misdemeanor offense committed after program enrollment.4 Recidivism rates are promising but should be considered preliminary.

Opportunities for Growth

Program collaboration. While the County established monthly meetings with all Prop 47 providers to discuss program updates, progress, and challenges, there is limited awareness of the Prop 47 program across County agencies, including the Probation Department and Behavioral Health Treatment Court. To ensure that all key stakeholders are familiar with the Prop 47 program and actively refer potential participants, BHSD developed and distributed a brochure to spread awareness of the program. The newly formed Local Advisory Committee (LAC) should also be able to assist with sharing information more broadly about the Prop 47 program.

Referrals and enrollment. While the co-occurring treatment program enrolled more than its target number of participants, SUTS, employment, and housing navigation did not reach their target enrollment numbers. The COVID-19 pandemic played a large role in the low number of referrals and enrollments into services as normal court and jail procedures were upended. Over the last six months of the reporting period, the number of referrals and enrollments has increased, and the County is implementing solutions to ensure this continues, such as increasing probation officer awareness of the program, expanding referral sources, and working with the treatment providers to increase the number of referrals to the housing navigation and employment services.

Outpatient treatment retention. The Prop 47 program is designed to serve high-need individuals and it has proven difficult to retain participants for their full course of treatment services. For the co-occurring program, 10% of program exits were successful and for SUTS, 39% were successful. COVID-19 also impacted treatment retention as court sessions and probation supervision were conducted virtually. As a result, court staff and probation officers were not as successful as usual in motivating participants to engage in treatment. With normal court and probation supervision operations, these rates should increase. In addition, the County is working with the providers to expand their services, which may help increase participant retention and completion rates.

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3 The four subcontracted outpatient treatment providers also offer their own assistance with housing and employment.
4 Recidivism data through March of 2021; data only reflects convictions in Santa Clara County.
Background

Proposition 47 (Prop 47) was passed on November 4, 2014, by California voters to help address overcrowding in the State’s prison systems. The initiative reclassified certain nonviolent, non-serious drug and property crimes, such as petty theft under $950 and simple drug possession, from felonies to misdemeanors. It generated millions of dollars in State savings from the reduction of the state prison population, patient population, and court caseloads. California directs these savings to the Safe Neighborhoods and Schools Fund, which allows the Board of State and Community Corrections (BSCC) to issue grants to expand mental health treatment, substance use treatment, housing-related assistance, and other community-based services for criminal justice-involved individuals.

The Santa Clara County Behavioral Health Services Department (BHSD) – Criminal Justice System Division (CJS) is among the second cohort of Prop 47 grantees throughout the state, receiving $5.9 million in 2019 to provide services from January 2020 through December 2022. It is partnering with County agencies—including the Office of Supportive Housing, the Office of Reentry Services, the Probation Department—and community-based organizations (CBOs) to provide targeted mental health, substance use, housing, and employment services to justice-involved adults.

As part of the Prop 47 award, the BSCC requires awardees to hire an external evaluator to assess the efficacy of the planned initiative at both the midpoint and ending point of the project; to this end, the BHSD contracted with Resource Development Associates (RDA) to complete this evaluation.

This preliminary evaluation report provides a midpoint review of program implementation and participant outcomes from the first year of Prop 47 activities in the County, between the start of the grant until March 31, 2021. Its purpose is to assess whether Santa Clara County is making progress toward achieving the program goals and objectives as described in the program proposal, which are detailed in Table 1. These goals and objectives are further contextualized in the program logic model found in Appendix A and progress toward these goals is detailed in Appendix B.

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5 The grant cycle included an implementation period from August through December 2019 and an evaluation period from January 2023 through May 2023. All individuals served by the grant must be enrolled by December 31, 2022 and services must be completed by February 15, 2023.
Table 1. Program Goals and Objectives

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1: To increase access to outpatient treatment and transitional housing for justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders</td>
<td>• 75% of participants referred to Prop 47 are enrolled in treatment(^7)</td>
</tr>
<tr>
<td></td>
<td>• 90% of participants will be linked to treatment within 10 days(^8) of referral</td>
</tr>
<tr>
<td></td>
<td>• 75% of participants with an identified need for housing receive transitional housing services(^9) in conjunction with outpatient treatment services</td>
</tr>
<tr>
<td></td>
<td>• 90% of program participants will be housed within 14 days from referral</td>
</tr>
<tr>
<td>Goal 2: To stabilize and reduce recidivism of justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders through community-based treatment</td>
<td>• 65% of participants will maintain engagement in BHSD treatment and services or successfully complete treatment</td>
</tr>
<tr>
<td></td>
<td>• Over the course of the three-year project, decrease the target population recidivism rate from 45% to 40%</td>
</tr>
<tr>
<td>Goal 3: To stabilize and reduce recidivism of justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders through housing supports</td>
<td>• 75% of participants will exit transition housing to permanent housing</td>
</tr>
<tr>
<td></td>
<td>• Over the course of the three-year project, decrease the target population recidivism rate from 45% to 40%</td>
</tr>
</tbody>
</table>

Program Model

Santa Clara County’s Prop 47 program is designed to increase outpatient co-occurring and substance use treatment services, expand transitional housing units (THUs) for individuals participating in outpatient treatment, fund case management services, and facilitate referrals to CBOs, including employment services and housing resources. Specifically, the program was designed to provide 57 outpatient co-occurring treatment slots, 200 outpatient slots, 72 intensive outpatient slots, and 200 housing slots annually.

Those eligible to enroll in this program have a moderate-severe or persistent mental health condition and/or a substance use condition that can be successfully treated in the community in outpatient settings. Potential participants are identified and recommended by the County’s Behavioral Health Treatment Courts (BHTCs) or the

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\(^6\) The objectives have been modified slightly from Santa Clara County’s original BSCC proposal to increase clarity and better reflect the program model.

\(^7\) This objective was modified from 75% of Department 61 clients are enrolled in treatment.

\(^8\) BHSD defines days as business days.

\(^9\) Transitional housing may include recovery residences, transitional housing units, or sober living environments (SLEs).
Santa Clara County Probation Department. The County’s BHTCs—known as Departments 60 and 61\(^\text{10}\)—serve individuals in the county who enter the criminal justice system with known mental health or substance use treatment needs. Any judge in the county can refer an individual to one of these departments for court processing. Participation in Departments 60 and 61 are voluntary and individuals do not have to participate in one of these specialized dockets. If an individual chooses not to participate, their case remains with the original judge to which they were assigned. For referrals from Probation, the Probation Officer fills out a referral form that is emailed to a BHSD Treatment Court Clinician who determines if a participant is eligible based on their level of care need. No matter the referral source, all individuals are under court supervision (either through the BHTC or Probation).

All individuals who have been recommended and referred to the Prop 47 program are assessed by BHSD Treatment Court Clinicians who determine the most appropriate level of care for each individual. Different assessment instruments are used depending upon if the individual requires co-occurring treatment or substance use treatment alone.\(^\text{11}\)

Individuals need to be considered stable enough in the community to be considered for Prop 47 services and the Behavioral Health Treatment Court Clinicians complete the Integrated Justice Screening (IJS) or the Integrated Screening Tool (IST) to determine the level of care need. Once they have completed their assessments, they create a narrative of participant needs, inform the court, the probation officer, and the participant of the assessment results, and make a referral to one of four Prop 47-funded programs. Individuals with needs that are not best served in outpatient programs are not eligible for Prop 47-funded services and are referred elsewhere.

The BHSD has contracted with three substance use treatment providers and one co-occurring treatment provider to provide Prop 47 services. Individuals are considered Prop 47 participants once they have enrolled in one of the four programs. In addition to co-occurring and substance use treatment, Prop 47 also funds housing navigation and employment services for individuals engaged in outpatient treatment. Once enrolled, treatment provider staff assess the need for these additional services, which are optional, and assist interested participants in accessing those services. Figure 1 details the program’s model and referral flow.

\(^{10}\) Originally, the proposal limited enrollment to individuals served in Department 61 and was modified with BSCC to include individuals in Department 60.

\(^{11}\) For individuals with both mental health and substance use needs, the Behavioral Health Treatment Court Clinicians use the Integrated Justice Services Level of Care Assessment. For individuals with substance use needs alone, the Behavioral Health Treatment Court Clinicians use the Gateway Referral Services that uses the American Society of Addiction Medicine guidelines to determine level of care.
RDA conducted a mixed-methods evaluation, incorporating quantitative and qualitative data collection and analysis to provide a comprehensive assessment of Santa Clara County’s progress toward achieving their program goals and objectives. This approach was selected to maximize validity and provide different perspectives on complex, multidimensional issues. The quantitative analysis explored individual- and system-level measures of program engagement and service delivery, as well as program completion, individual outcomes, and subsequent involvement with the justice system. The qualitative component of the evaluation provided insight into the processes of the Prop 47 program including referral, enrollment, and service delivery processes and the internal and external factors that affected the fidelity of implementation. The qualitative analysis also explored perspectives on service delivery, including ease of and barriers to program enrollment and participation, appropriateness of programs and service delivery to participants’ needs, participants’ satisfaction with services, and perceived changes in participants’ behavior and quality of life.

Quantitative Data Collection

RDA analyzed quantitative data from the BHSD and Santa Clara County’s Probation Department to evaluate improvements in participant outcomes based on participant needs, program status and progress, and subsequent justice system contact documentation. For this evaluation, BHSD has set the definition of successful completion as the number or percent of participants who maintain engagement or are discharged from

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12 Co-occurring and substance use treatment services (SUTS) providers can also both make referrals to SLEs should a THU or recovery residence not be available.
treatment with successful completion. RDA tracked Prop 47 participants’ screening and referral and linked their information to providers’ enrollment and completion data. Table 2 summarizes the data provided by the BHSD and the Probation Department.

**Table 2. Quantitative Data Sources**

<table>
<thead>
<tr>
<th>Agency</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BHSD</strong></td>
<td>• Participant demographic characteristics, diagnosis, and needs</td>
</tr>
<tr>
<td><em>(Includes information from the Prop 47 providers)</em></td>
<td>• Referral, assessment, and enrollment indicators (dates and scores)</td>
</tr>
<tr>
<td></td>
<td>• Services provided (dates and types of services)</td>
</tr>
<tr>
<td></td>
<td>• Outcome and program completion indicators (dates, types of outcomes, and participant satisfaction)</td>
</tr>
<tr>
<td></td>
<td>• Proportion of bilingual and trauma-informed provider staff</td>
</tr>
<tr>
<td><strong>Probation Department</strong></td>
<td>• Probation status</td>
</tr>
<tr>
<td></td>
<td>• CAIS (Correctional Assessment and Intervention System) score</td>
</tr>
<tr>
<td></td>
<td>• Prior arrests and convictions</td>
</tr>
<tr>
<td></td>
<td>• Recidivism date and charge</td>
</tr>
</tbody>
</table>

Data was received in multiple spreadsheets according to different components of content and data was merged on a Prop 47 client identifier. Outpatient co-occurring, substance use, housing, employment, and recidivism datasets utilized a common participant identification number allowing the evaluation team to track Prop 47 participants’ experiences with all the Prop 47-funded services. Descriptive analytic techniques were used to summarize participant demographic characteristics, types of services received, service characteristics, and short-term programmatic outcomes. Characteristics and trends were examined by service type for all participants and over time.

**Qualitative Data Collection**

For the qualitative component of the evaluation, RDA conducted interviews with multiple sources including:

- BHSD staff
- BHTC clinicians and staff (case manager and probation officers)
- Office of Reentry and the Office of Supportive Housing staff
- Probation Department staff
- Contracted service provider leadership and direct service providers

In addition, RDA developed a satisfaction survey to examine participants’ experience with Prop 47 services and developed a phone interview protocol to use with survey responders who volunteered to be interviewed. Table 3 details the number of individuals who participated in each of the qualitative data collection activities.
Table 3. Qualitative Data Collection Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Agency</th>
<th># of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interviews</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Santa Clara County (including BHSD and other relevant departments)</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Treatment Court Clinicians</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>BHTC</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Office of Reentry</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Office of Supportive Housing</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Providers (including leadership and line staff)</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>Probation Department</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Prop 47 participants</td>
<td>2</td>
</tr>
<tr>
<td><strong>Satisfaction</strong></td>
<td>Prop 47 participants</td>
<td>7</td>
</tr>
<tr>
<td><strong>Survey</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

RDA designed interview protocols and a survey questionnaire appropriate for diverse participants from a range of cultural, linguistic, and educational backgrounds. The participant survey was collected online with Spanish and English versions. Prop 47 participants received a $20 gift card for their participation in the online survey and $40 gift cards for their participation in individual phone interviews. Participants with no access to a cellphone or computer could respond to the online survey with the assistance of their treatment provider.

Qualitative data focused on understanding the following topics:

- Effectiveness of identification, screening, referral, and enrollment process
- Fidelity to program model, including services delivered and staff competencies
- Implementation successes and challenges
- Effectiveness of system coordination
- Perceived outcomes of Prop 47 for participants and staff
- Participant satisfaction
- COVID-19 impacts
Considerations and Limitations

As with any real-world evaluation, there are limitations to this evaluation that are important to consider.

**Impacts of COVID-19.** Santa Clara County began enrolling participants into the Prop 47 program in April of 2020, at the beginning of the COVID-19 pandemic. Data collection activities, including interviews and focus groups, that were planned to be in-person shifted to virtual settings. Virtual meetings mitigated some travel and scheduling barriers, but the pandemic also created personal challenges for some individuals that may have impacted their availability to engage in data collection activities.

**Data access request.** To ensure that the necessary data security measures are in place, Santa Clara County requires all external organizations to complete a Data Access Request (DAR) form prior to receiving sensitive and confidential protected health information. Therefore, the RDA evaluation team could not review any individual-level data or talk with Prop 47 participants prior to the DAR approval. RDA submitted the DAR on January 11, 2021 and received DAR approval on May 27, 2021. Due to the length of time to attain the DAR approval, RDA had limited time to conduct qualitative data collection with participants.

**Selection bias.** Providers invited current Prop 47 participants to participate in the online survey and telephone interviews. A total of seven individuals completed the participant survey and two individuals participated in interviews. The individuals interested and able to participate in interviews and the survey represent a small fraction of total participants. It is possible that those who participated in data collection have different characteristics (e.g., more communicative, or actively engaged with treatment, hold more positive impressions of the program) than those who did not participate.

**Outcome measures.** Since Santa Clara County’s Prop 47 program is new—just launched in April of 2020—only 67 participants exited the program through March of 2021. Therefore, there is limited data to date regarding program outcomes and all outcome data should be viewed as preliminary. The final evaluation, to be submitted in May of 2023, will provide a comprehensive assessment of program outcomes.
Outpatient Co-occurring Program

The **outpatient co-occurring program**, provided by Community Solutions, provides evidence-based services to criminal justice-involved adults who have co-occurring disorders and whose level of functioning, symptoms, and psychiatric history necessitate service intervention to maintain the individual in community settings. The co-occurring treatment program is designed to be one year. When participants are enrolled into the program, they are paired with a case manager that connects them to mental health treatment such as medication support, rehab services, group support sessions, therapy, and access to a psychiatrist. When a participant is released from jail, the co-occurring provider also conducts several assessments to identify participants’ needs. The Prop 47 co-occurring treatment team includes one bilingual staff and two staff trained in trauma-informed services.

The co-occurring program aims to provide treatment services to 57 individuals annually and has the capacity to house all participants who need stable housing. The provider has housing flex funds that are utilized to provide linkage to Transitional Housing Units (THUs) and other community housing placements. To date, all of the Prop 47 participants referred to Community Solutions were in the County Jail at the time of the referral. As designed, Community Solutions staff pick up the participant from jail, conduct the intake, and take them to a THU or their place of residence on the day of their release.

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13 These include the Daily Living Activities 20 (DLA20)—which identifies the degree to which activities are impacted by mental illness or disability, Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) which determines the need for permanent housing, and a mental health assessment within the first 45 days.
Referrals and Enrollment

As can be seen in Figure 2, between April of 2020 and March of 2021, 130 individuals were referred to Prop 47-funded, outpatient, co-occurring services with 89 individuals (68%) enrolling in services. Therefore, the program has exceeded its target to serve 57 individuals annually. Although the COVID-19 pandemic highly impacted the program’s referral flow during the first months of the grant cycle, the program was close to reaching its intended enrollment goal of providing services to 75% of the referred individuals.

Of the 89 individuals enrolled in outpatient co-occurring services, 88 (99%) were referred through the BHTC, and one (1%) was referred by the Probation Department. On average, co-occurring participants were enrolled in the program 17 days after referral, with a median of 11 business days.14 As shown in Figure 3, the number of individuals enrolled since March of 2020 has generally increased over time. As of March 31, 2021, 51 individuals15 were actively enrolled in the co-occurring program.

After the initial assessment by the Behavioral Health Treatment Court Clinicians, all Prop 47 participants were further assessed by the co-occurring provider, Community Solutions as part of the intake process. While all participants start their intake paperwork on the day of their release, the intake often takes additional time to complete. Approximately half of the participants had their intake completed on the same day of enrollment (N=46, 52%), while 48% did not (N=43) with an average of 20 days between enrollment the intake being completed.

14 Two participants had unknown referral dates. The average days, including weekends and holidays, between enrollment and referral was 24 days, with a median of 14 days.
15 Two participants were discharged and re-enrolled in the program.
Services
In addition to outpatient co-occurring treatment, Community Solutions offers a range of additional services. Table 4 describes these additional services and indicates the proportion of participants who received each service. Concerning transitional housing, 55% of the participants enrolled in the co-occurring program received assistance with transitional housing. As shown, the most common services were social and case management services and support for transportation and basic needs. Over half (55%) of co-occurring participants were placed in Prop 47–funded transitional housing while they were engaged in treatment.

Table 4. Outpatient Co-occurring Program Services (N=89)

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of participants receiving this service</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transitional Housing</td>
<td>49</td>
<td>55%</td>
</tr>
<tr>
<td>Assistance with food</td>
<td>76</td>
<td>85%</td>
</tr>
<tr>
<td>Basic needs</td>
<td>84</td>
<td>94%</td>
</tr>
<tr>
<td>Case management</td>
<td>85</td>
<td>96%</td>
</tr>
<tr>
<td>Legal services</td>
<td>4</td>
<td>4%</td>
</tr>
<tr>
<td>Employment(^{18})</td>
<td>10</td>
<td>11%</td>
</tr>
<tr>
<td>Housing(^{19})</td>
<td>71</td>
<td>80%</td>
</tr>
<tr>
<td>Social services</td>
<td>85</td>
<td>96%</td>
</tr>
<tr>
<td>Transportation</td>
<td>84</td>
<td>94%</td>
</tr>
<tr>
<td>Prop 47 Referrals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing Navigation</td>
<td>13</td>
<td>15%</td>
</tr>
<tr>
<td>Employment Provider</td>
<td>6</td>
<td>7%</td>
</tr>
</tbody>
</table>

Participant Demographics and Needs
Prop 47 participants enrolled in co-occurring treatment were primarily male (82%), with an average age of 38 years. Slightly over a third of participants (34%) were White, with 28% Black/African American and 28% White.

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\(^{16}\) According to the assessment completed by the provider, 76 (85%) participants showed a need for stable housing. While all of these participants were offered a THU placement, 49 opted to receive a THU placement.

\(^{17}\) Basic needs include but are not limited to services such as providing hygiene items, reading glasses, clothing, backpacks, bus tokens, and application fees.

\(^{18}\) These refer to employment services that are not Prop 47 funded. These may be in-house or from another provider.

\(^{19}\) These refer to housing services that are not Prop 47 funded. These may be in-house or from another provider.
Hispanic/Latino. At the time of enrollment, over half of participants (55%) had attained some high school education with 31% either graduating high school or obtaining a GED. Almost all (97%) reported being unemployed at intake. The most common primary psychiatric diagnosis at enrollment was psychotic disorder (35%), followed by anxiety (34%) and mood (29%) disorders.

**Program Completion**

As of March 31, 2021, 40 individuals exited the program. Of those who exited, four (10%) participants successfully completed the program and 36 (90%) exited the program without completing program requirements. Of the 36 individuals who exited the program without completion, two re-enrolled in the program and were active participants as of March 31, 2021. The co-occurring program started serving participants in April of 2020 and is designed to last one year. The evaluation period for this report is only one year. As such, it is unsurprising that there are fewer successful completions at this one-year mark.

Table 5 provides more information about the reasons for unsuccessful exits. Participants who successfully completed the program had an average period of enrollment of 114 days and those with unsuccessful completions were enrolled for an average of 97 days.

**Table 5. Co-occurring Program Exit Status (N=40)**

<table>
<thead>
<tr>
<th>Exit Status</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Successful Completion</strong></td>
<td>4</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Exit without Completion</strong></td>
<td>36</td>
<td>90%</td>
</tr>
<tr>
<td>Disengaged/withdrew without goals achieved</td>
<td>30</td>
<td>75%</td>
</tr>
<tr>
<td>Incarcerated</td>
<td>3</td>
<td>8%</td>
</tr>
<tr>
<td>Other(^\text{22})</td>
<td>3</td>
<td>8%</td>
</tr>
</tbody>
</table>

**Other Outcomes**

**Housing.** Through March of 2021, 31 individuals exited THUs. Some of these individuals exited the THU at the same time as exiting treatment, while others continued in treatment after they exited the THU. Of the 31 individuals who exited THUs, 71% left without notice, 16% were asked to leave, and 12% were either discharged, left with family, or transferred. Of the 31 individuals who exited THUs, five individuals (16%) exited to permanent housing.

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\(^{20}\) Participants are considered to successfully complete the program if they achieve their treatment/program goals and/or receive a clinical change in needs to a lower level of care.

\(^{21}\) While the program is designed to last one year, the provider works with each individual participant to meet their needs. Once a participant’s goals have been achieved, they are considered a successful completion.

\(^{22}\) Other includes (1) individuals who did not complete intake and (2) individuals upon intake were found to require a different level of care other than outpatient services (higher or lower level of care).
Employment and Education. As noted, 40 individuals exited the program. Of these, 37 were unemployed. Of these 37 individuals who entered the program unemployed, two (5%) gained either full-time or part-time employment by program exit.23 Participant education status did not change during program enrollment.

Recidivism. One of the goals of the Prop 47 program is to reduce recidivism.24 To provide background on the Prop 47 clients, the Santa Clara County Probation Department provided information on the criminal justice system history of the participants who enrolled between April and September of 2020. Within this sample of 43 co-occurring participants,25 individuals had an average of 5.6 convictions since 2015, including the offense that resulted in Prop 47 enrollment. Approximately two-thirds of participants were convicted of drug and alcohol-related offenses, half were convicted of property offenses (e.g., theft, burglary, robbery), and approximately 40% were convicted of assault. One-third of co-occurring participants had been convicted of domestic violence and 17% were convicted of sex offenses.

Of this sample of 43 co-occurring participants, only two individuals (5%) were convicted of a new felony or misdemeanor offense committed after program enrollment.26 One offense was committed during program enrollment and the other was committed after successful program completion. Both offenses were misdemeanors for domestic violence.

Substance Use Outpatient and Intensive Outpatient Services

The Prop 47 substance use treatment services (SUTS) provides outpatient and intensive outpatient services to criminal justice-involved adults with substance use disorders. The program delivers evidence-based services including individualized assessments, treatment planning, individual and group counseling, participant education, family therapy, medication services, collateral services, crisis intervention, and discharge planning and coordination. Treatment length varies based on participant need. The three providers, which all provide both outpatient and intensive outpatient services, are Family and Children Services (FCS) of Silicon Valley – Caminar, Pathway Society, and Momentum for Mental Health. The Prop 47 SUTS treatment team includes four bilingual staff and 16 team members trained in trauma-informed services.

The substance use program is intended to provide services to 200 individuals in the outpatient substance use treatment program and 72 individuals requiring intensive outpatient services annually. This program also has 200 annual Transitional Housing Unit (THU) slots.27 Individuals receiving treatment services in a SUTS outpatient program are also eligible for transition housing placement in recovery residence for up to six months (with the opportunity for extensions, as needed) as they participate in substance use treatment and seek long-term housing opportunities. When a referred individual is released from jail, they are provided a taxi that takes them

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23 Employment status at exit missing for 12 individuals.
24 Over the course of the three-year project, Santa Clara County aims to decrease the target population recidivism rate from 45% to 40%.
25 Data was not available for an additional three participants who were also enrolled during this time.
26 Recidivism data through March of 2021; data only reflects convictions in Santa Clara County.
27 These are mainly recovery residences, but also can include other sober living environments (SLEs).
directly to a recovery residence, which helps link the individual to the outpatient treatment program to which they have been referred.

Referrals and Enrollment

Figure 4 illustrates that between April of 2020 and March of 2021, 104 individuals were referred to Prop 47-funded SUTS with 38 individuals (36%) enrolling in services. At its current pace, the program is not on target to reach its intended goal of serving 272 participants and enrolling 75% of referred individuals.

To try and increase substance use treatment enrollment, the County has recently implemented several measures to support providers in conducting immediate outreach to individuals and coordinating with Behavioral Health Treatment Court Clinicians when facing difficulties in contacting referred individuals. As a result of these measures, referrals and enrollments to the SUTS program has begun to increase.

All the participants enrolled in the SUTS program were referred by the BHTC. On average, it took 28 business days after referral for participants to be officially enrolled in the programs, with a median of 21 days. As shown in Figure 5, the number of individuals enrolled since March of 2020 has consistently increased over time. As of March 31, 2021, 10 participants were actively enrolled in the SUTS program.

After the initial assessment by the Behavioral Health Treatment Court Clinicians, all Prop 47 participants were further assessed by one of three SUTS providers. Almost all participants were assessed by their service provider prior to enrollment or on the same day of enrollment (N=37, 97%), with only one remaining participant who waited over 30 days to be assessed.

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28 One participant enrolled in both SUTS and co-occurring treatment.
29 One participant waited over 90 days to enroll in the program. The average days, including weekends and holidays between enrollment and referral was 32 days, with a median of 24 days.
Services

In addition to substance use treatment, the contracted providers offer a range of additional services. Table 6 describes these services provided by the program and indicates the proportion of participants who received each service. As shown, the most common services were case management and housing services. The majority (84%) of SUTS participants were placed in Prop 47-funded recovery residences while they were engaged in treatment and another 14% were provided housing navigation services by their SUTS provider.

Table 6. SUTS Program Services (N=38)

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of participants receiving this service</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recovery Residence</td>
<td>31</td>
<td>82%</td>
</tr>
<tr>
<td>Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assistance with food</td>
<td>3</td>
<td>8%</td>
</tr>
<tr>
<td>Basic needs</td>
<td>3</td>
<td>8%</td>
</tr>
<tr>
<td>Case management</td>
<td>16</td>
<td>42%</td>
</tr>
<tr>
<td>Housing</td>
<td>16</td>
<td>42%</td>
</tr>
</tbody>
</table>

**Prop 47 Referrals**

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of participants receiving this service</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Navigation</td>
<td>5</td>
<td>13%</td>
</tr>
<tr>
<td>Employment Provider</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Participant Demographics and Needs

All Prop 47 participants enrolled in the SUTS programs were male, with an average age of 38 years old. Of the participants with data available for race/ethnicity (N=19), a quarter of participants (25%) were Black/African American, 40% Hispanic/Latino, and 30% White.

SUTS participants have housing needs, with 68% homeless at time of enrollment. Missing data makes it difficult to fully explain participant employment status at the time of enrollment. Employment status was listed as other\(^{31}\) or unknown for 57% of participants and 43% were unemployed at the time of enrollment into SUTS. Participants’ primary diagnosis indicated 65% were assessed to have a dependence to amphetamines or other stimulants, while the remaining fraction presented dependence to alcohol (16%) and cannabis (16%).

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\(^{30}\) These refer to housing services that are not Prop 47 funded. These may be in-house or from another provider.

\(^{31}\) It is unclear what is included in the “other” employment status category.
Program Completion

As of March 31, 2021, 28 individuals exited the program. Of those who exited, 11 participants (39%) successfully completed the program and 16 (57%) exited the program without completing program requirements.32 Participants who completed the program successfully had an average time of enrollment of 91 days and those with unsuccessful completions were enrolled for an average of 22 days.33 Table 7 presents the number and percentage of participants by exit status.

Table 7. SUTS Program Exit Status (N=28)

<table>
<thead>
<tr>
<th>Exit Status</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Successful Completion</td>
<td>11</td>
<td>39%</td>
</tr>
<tr>
<td>Completed treatment plan</td>
<td>5</td>
<td>45%</td>
</tr>
<tr>
<td>Left before completion with satisfactory progress</td>
<td>6</td>
<td>55%</td>
</tr>
<tr>
<td>Unsuccessful Completion</td>
<td>16</td>
<td>57%</td>
</tr>
<tr>
<td>Left before completion with unsatisfactory progress34</td>
<td>15</td>
<td>94%</td>
</tr>
<tr>
<td>Incarceration</td>
<td>1</td>
<td>6%</td>
</tr>
<tr>
<td>Unknown Status</td>
<td>1</td>
<td>4%</td>
</tr>
</tbody>
</table>

Other Outcomes

Housing. Through March of 2021, 27 SUTS participants exited recovery residences. Some of these individuals exited the recovery residence at the same time as exiting treatment, while others continued in treatment after they exited the recovery residence. Of the 27 individuals who exited recovery residences, 41% completed, 34% exited for a rules violation or intoxication, and 26% were voluntary discharges. Of the 27 recovery residence discharges, 16 individuals (59%) exited to permanent housing.

Employment and Education. Of the 16 SUTS participants who entered the program unemployed, one individual (6%) gained employment by program exit.35 Participant education status did not change during program enrollment.

Recidivism. Within a sample of 11 SUTS participants who enrolled in the Prop 47 program between April and September of 2020,36 individuals had an average of 5.5 convictions since 2015, including the offense that resulted

32 Participants are considered to successfully complete the program if they achieve their treatment/program goals and/or receive a clinical change in needs to a lower level of care. One participant had an unknown discharge status.
33 Three discharged participants had an unknown exit date. Median time from enrollment to exit was 38 days.
34 Six of these individuals enrolled in services but were discharged in less than 10 days for any reason.
35 Employment status at enrollment was missing for 11 individuals and exit was missing for 22 individuals.
36 Data was not available for an additional participant who also enrolled during this time period.
in Prop 47 enrollment. Approximately 70% of participants were convicted of drug and alcohol-related offenses, over half (55%) were convicted of domestic violence, and 45% were convicted of assault.

Looking at the ability of the Prop 47 to assist in recidivism reduction, of the sample 11 SUTS participants, no individual (0%) was convicted of a new felony or misdemeanor offense committed after program enrollment.\textsuperscript{37}

Housing Navigation and Employment Services

The Prop 47 program aims to provide employment/educational linkage services to 75 individuals annually and housing navigation services to 125 individuals annually. Individuals are referred to housing navigation and employment services through their Prop 47 co-occurring or substance use treatment provider and can be referred at any point during their outpatient treatment.

The \textit{housing navigation service}, provided by Abode Services, assists participants with connecting to housing resources, enrolling them into the Emergency Assistance Program for immediate and short-term housing support, and assisting with other housing-related case management needs. Housing navigation services follow best practices including harm reduction, motivational interviewing, and housing first. The housing navigation team includes two bilingual staff and five staff trained in trauma-informed services.

The \textit{employment services program}, provided by Goodwill Industries, implements evidence-based assessments to identify individuals’ employment/educational skill level and provide individualized job readiness training, transitional employment, peer support, and connection to employment/educational opportunities. These optional supportive services aim to facilitate participants’ access to subsidized employment as a way to build further financial independence, secure stable housing, and reduce recidivism. The employment services team follows best practices including providing Moral Reconciliation Therapy (MRT) and includes one bilingual staff and one staff member trained in trauma-informed services.

\textsuperscript{37} Recidivism data through March of 2021; data only reflects convictions in Santa Clara County.
Referrals and Enrollment

Between April of 2020 and March of 2021, 126 individuals were enrolled in the Prop 47 program (89 in co-occurring treatment and 37 in substance use treatment). As can be seen in Figure 6, approximately 19% of Prop 47 participants were referred to and 15% enrolled in housing navigation and/or employment services. Eighteen unique individuals were referred to and received housing navigation services. Six individuals were referred to employment services and one individual enrolled in the program.38

While it is a small proportion of Prop 47 participants that receive Prop 47-funded housing navigation and employment services, co-occurring and substance use treatment providers also provide some of these services internally or have relationships with other service providers who provide these services. To increase referrals and enrollments in Prop 47 housing navigation and employment services, the County is making efforts to increase awareness of the availability and benefits of the Prop 47-funded housing navigation and employment services. Additionally, the County is increasing the variety of services that Abode and Goodwill can provide to Prop 47 clients. These efforts should help to significantly increase the number of Prop 47 participants who access and receive these supplemental services.

Of the 18 individuals enrolled with the housing navigation provider, 13 (72%) were referred by the co-occurring provider, and five (28%) were referred by the SUTS providers. The one individual who enrolled in employment services was referred by the co-occurring provider. On average, individuals participating in the housing navigation program began to receive services six days after referral. As shown in Figure 7, individuals began to enroll in the housing navigation and employment program in January of 2021.39 As of March 31, 2021, 17 individuals were actively enrolled in the housing navigation and employment program.

Figure 7. Housing and Employment Program Enrollment by Month

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38 Four individuals were referred to both housing navigation and employment services. Therefore, 20 unique individuals were referred to housing navigation and/or employment services and 19 unique individuals received these services.

39 The housing navigation provider was contracted to provide services in October 2020.
Participant Demographics and Needs
The housing navigation provider conducts the VI-SPDAT to support participants in their application to permanent housing. The VI-SPDAT is an evidence-based assessment that determines appropriate housing interventions and enables providers to provide resources based on the score of the assessment. Scores within 0–3 are considered low acuity and require minimal intervention. Scores between 4–7 for individuals (or 4–8 for families with children) are moderate acuity and placed in the rapid rehousing queue. Scores of 8 and higher (or 9 and higher for families with children) are high acuity and placed in a queue for permanent supportive housing. Almost all housing navigation participants (94%) had scores in the highest range and were placed in the queue for permanent housing.

Prop 47 participants enrolled in housing navigation and employment services were primarily male (95%), with an average age of 40. Of the participants with data available for race/ethnicity (N=14), the majority were White (42%), 29% were Black/African American, and 21% were Hispanic/Latino.

Program Completion and Outcomes
Since only two participants have exited either housing navigation services or employment services, this evaluation is unable to report on program outcomes.
Findings and Discussion

Based on qualitative and quantitative data collection and analysis, the findings below describe facilitators to program success and barriers impacting progress toward program goals. Strengths, challenges, and recommendations are provided across four areas: referrals and enrollment, service delivery, program completion and outcomes, and collaboration. The strengths, challenges, and recommendations are provided by the evaluation team using the results from the quantitative data combined with the impressions gleaned from the qualitative data. Given that the County is already implementing changes to address some of the challenges, recommendations are not provided for every challenge.

Referrals and Enrollment

While program referrals and enrollments have increased, Santa Clara County’s Prop 47 program has enrolled fewer participants than the program was designed to serve. Between April of 2020 and March of 2021, 89 individuals enrolled in the co-occurring treatment program and 37 individuals enrolled in the SUTS program. The co-occurring treatment program exceeded its goal of serving 57 individuals, but the SUTS program fell short of its goal to serve 272 participants. Additionally, enrollment in employment services and housing navigation services are lower than expected. The County planned to provide employment services to 75 participants each year and housing navigation services to 125 participants each year, but only one individual enrolled in employment services and 18 individuals enrolled in housing navigation services during this reporting timeframe.

The most likely explanation for the enrollment disruption is because Prop 47 referrals were significantly impacted by the COVID-19 pandemic. First, due to shelter-in-place restrictions, the BHTC did not hold in-person hearings for individuals out of custody, and individuals found in violation of court orders were not remanded. Second, individuals in custody received “compassionate release,” which allowed them to leave custody early, but treatment providers could not utilize traditional face-to-face methods to outreach and engage participants before jail release.

Over the past six months, the number of Prop 47 referrals have increased considerably. To further increase referrals, the County is working to increase probation officer awareness of the availability of Prop 47 services and expand referral sources beyond BHTC and the Probation Department. Specifically, the County has received approval from the BSCC to include referrals from two other departments, 62 and 63 and from the County’s Resource Reentry Center. To increase referrals to housing navigation and employment services, the contracted

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40 These are traditional collaborative courts.

41 In addition to expanding referral sources, the BSCC also approved the Resource Reentry Center as a service provider for outpatient substance abuse treatment which should also help to increase referral and enrollment numbers.
providers are working with BHSD to expand and strengthen their services, as well as increase providers’ awareness of these services. These strategies are all seen as important steps towards increasing referrals and maximizing reach to participants.

- **Evaluation Team Recommendation:** Santa Clara County should continue to work with the BSCC to expand referral sources and service provision availability. This will help to ensure the grant continues to make strides to reaching the intended goals.

**Challenges with the referral process may contribute to low participant enrollment and engagement.** Between April of 2020 and March of 2021, 68% of individuals referred to the co-occurring treatment program enrolled in treatment and 36% of the individuals referred to the SUTS program enrolled in treatment. These enrollment rates are lower than expected. One reason is that treatment referrals to the four Prop 47 providers are only active for 30 days. If there is a delay in a referred individual’s release date, this causes the referral to lapse in the system.

Concerning SUTS specifically, differences in the outreach and enrollment process between the co-occurring and SUTS program also contributes to the different enrollment rates. While the co-occurring provider meets with participants in custody and escorts participants to housing upon release, the substance use program model does not include “warm handoffs” to services, whereby treatment providers meet with individuals prior to release and escort them to treatment. Instead, referred individuals are provided taxis from custody to recovery residences. While this transportation is an essential component, some individuals simply walk away from the recovery residences after the taxi leaves.

> “Whatever is happening from exiting jail to getting to [substance use treatment], there needs to be more hand holding...We don’t have outreach like the mental health side, so maybe something can happen right there. Like having transportation and do case management work and link them to services. Providing them with a Wi-Fi hot spot would be great and a phone.” – Provider

Further, once the individual is housed at the recovery residence, sometimes they are not immediately linked with one of the three SUTS providers. Related, there is a high rate of individuals who simply walked away from the recovery residence placement which meant that they were no longer able to participate in SUTS.

Hampering outreach efforts further for those who are referred to SUTS while in custody, they often were not able to provide a call-back number to include on their referral form, therefore making it difficult for the SUTS treatment providers to contact participants once they are released, especially if they walk away from the recovery residences. Since SUTS providers face these challenges engaging participants from the moment they are released, interviewed SUTS providers suggested that participant enrollment could be most successful if there is a direct hand-off from a social worker or peer to provide support and guidance from the moment they are released from jail. Providers also suggested adding exhaustive contact information to referral forms (e.g., phone number, email, emergency contact).

- **Evaluation Team Recommendation:** (1) Santa Clara County should consider developing a process to review referrals who are close to their 30-day closing date to see if they can extend the referral length or...
create a new referral. (2) Santa Clara County should support the SUTS providers to adopt the methods used by the co-occurring program to increase enrollment rates.

Service Delivery

**Santa Clara County’s Prop 47 program offers a range of services that integrate evidence-based practices.** As discussed previously, in addition to behavioral health treatment, Santa Clara County’s Prop 47 services provide temporary housing (through transitional housing units and recovery residences), as well as housing navigation and employment services to support participants’ long-term stability and self-sufficiency. All programs include a range of evidence-based assessment tools to assess needs, including the Milestones of Recovery Scale (MORS), the American Society of Addiction Medicine guidelines, and VI-SPDAT. Programs also use evidence-based treatment, including Moral Reconation Therapy (MRT) and cognitive behavioral therapy (CBT). In the participant survey, six of seven respondents agreed or strongly agreed that they were satisfied with services received and that staff treat participants with respect. Another area of support is that the treatment providers can flex their funding to assist participants with basic needs, such as clothing and hygiene items.

**To increase enrollment and meet participants’ needs, the housing navigation and employment services programs are expanding their services.** The employment program is incorporating a tattoo removal program, expanding their vocational pathways to include construction, electrical, carpentry, IT support, and heating, ventilation, and air conditioning (HVAC); and providing customer service classes. Additionally, the program will offer incentives such as vision care, dental services, legal services, and transportation vouchers. The housing navigation program is providing new temporary housing solutions; supporting participants with rent, security deposit, and application fees; and providing transportation vouchers. These are important steps to take and can be further strengthened by ensuring that all Prop 47 participants—including the 15% of Prop 47 participants who have committed sex offenses—are eligible for services.43

Program Completion and Outcomes

**Prop 47 programs have struggled to retain the high-need participant population.** Prop 47 participants are often facing homelessness, barriers to employment, and other unmet basic needs. Given the high needs of this population and that recovery from addiction is a continual process that often necessitates repeated enrollments

“*I really like the CBT classes; they are very good. They have opened my eyes to things that I wouldn’t normally think about when I’m using drugs. Now that I’m clean ... I’m getting to know myself.***

– Participant

“I have learned computer skills, how to make a resume, and how to properly search for a job and see if I can meet their requirements. I have also learned to be more friendly and open to more people.”

– Participant

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43 Currently, the employment program requires that participants pass Megan’s Law screening, which checks whether individuals are required to register on the sex offender registry.
in treatment,\textsuperscript{44,45} it is unsurprising that many participants do not complete the program successfully in their first enrollment. The U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) publishes an annual report detailing treatment outcomes for publicly funded substance use treatment programs. The 2019 report indicates that nationally, 42\% of discharges from outpatient treatment were successful. California has a lower completion rate, with only 23\% of outpatient treatment discharges indicated as successful.\textsuperscript{46}

Within the co-occurring program in Santa Clara County, 10\% program exits were successful. Within the SUTS program, 39\% of exits were successful. Since these programs have only been in operation a year, the findings are preliminary and will likely increase as individuals who are currently engaged in the program have time to successfully complete. One contributing factor to lower than anticipated completion rates may be the impact that COVID-19 has had. To illustrate, the co-occurring treatment provider usually spends a lot of time at the jail meeting with individuals who are referred prior to their release. Further, the provider usually provides a lot of in-person case management. However, this outreach and personal attention was limited due to COVID-19. Similarly, the SUTS providers used Telehealth strategies for all of their appointments which may have reduced engagement in two ways—(1) participants with limited or unreliable phone/internet service may not have been able to fully participate and (2) some individuals may have preferred in-person treatment. Lastly, COVID-19 also impacted treatment retention as court sessions and probation supervision were conducted virtually. As a result, court staff and probation officers were not as successful as usual in motivating participants to engage in treatment.

- **Evaluation Team Recommendation:** Both the SUTS program and co-occurring program should collect information from staff and participants to identify the primary reasons for participants disengaging in the treatment. Once identified, strategies should be brainstormed and implemented to help increase successful completion rates. Additionally, the process for re-enrolling in treatment (for individuals who leave unsuccessfully) should be simple and streamlined, recognizing that repeat enrollments will be necessary for many participants.

**Limited affordable, permanent housing challenges participants’ engagement in programs and long-term recovery.** Stable housing is vital to support participants’ participation in treatment and overall stability. As noted by several participants, maintaining sobriety is much more difficult when homeless:

- "My biggest fear is getting clean, completing, and not having housing. It doesn’t matter how good I’m doing. The only reason I’m doing good is because I’m housed. It doesn’t matter how much you learn." – Participant

- "I am in a court-mandated one-year residential program which I am truly benefitting from. However, when my year is up, I don’t have anywhere to go except back to the streets, which I fear will lead me back to drug use.” – Participant


\textsuperscript{46} Ibid.
To address participants’ immediate housing needs, the Prop 47 program provides a range of transitional housing options while participants participate in outpatient co-occurring or substance use treatment; and treatment providers can refer participants to housing navigation services. Of the 59 participants that enrolled in transitional housing, slightly over a third of participants (35.5%) exited to permanent housing, with the majority not receiving permanent housing.

Overall, a lack affordable housing options in Santa Clara County creates barriers to both program participation and completion and long-term success concerning substance use and justice system involvement. In 2016, the County of Santa Clara Office of Supportive Housing set forth on a 10-year plan to end homelessness. The goal included creating 4,800 housing units in four areas—permanent supportive housing, rapid rehousing, extremely low-income, and very low-income units. To date, the County has been able to create about 2,070 of the 4,800 units. According to a recent County report, in calendar years 2019 and 2020, 8,210 individuals were assessed with the VI-SPDAT and found in need of permanent housing and only 49% were able to be placed in housing. In order to qualify for permanent housing, participants must have sustained and prolonged homelessness. Prop 47 participants are aware that staying in transitional housing may compromise their ability to be placed in permanent housing. Therefore, some participants may choose to remain unhoused in order to qualify for long-term housing.

“My whole goal is to get housing and stay clean… I’m going to be unhoused and wait another year to reapply [for permanent housing]. That was the whole goal of getting clean… It is impossible to be homeless and sober. We have to keep going to these programs, which is harder when you are on the street. Prop 47 has been a good thing for me, I just wish they would fix the [transitional housing] … I don’t have any family or someone I can call. I don’t have anywhere to go.” – Participant

Prop 47 leadership and providers are aware of this disincentive for participants to accept transitional housing and are working to address this issue, as well as increase the services and resources provided by the housing navigation program.

Recidivism rates are promising but should be considered preliminary. Of a sample of 54 participants who enrolled in the Prop 47 program between April and September of 2020, only two individuals (4%) were convicted of a new felony or misdemeanor offense committed after program enrollment. This recidivism rate is promising, particularly since many Prop 47 participants had lengthy criminal histories, with an average of 5.6 convictions from January 1, 2015, until program enrollment. However, due to a limited follow-up time period and the impacts of the COVID-19 pandemic, which impacted police and court processes, these findings are considered preliminary.

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48 Ibid.
49 Data was not available for an additional four participants who also enrolled during this time.
50 Recidivism data through March of 2021.
Collaboration

While Santa Clara County’s Prop 47 program has taken steps to increase internal communication across providers, additional efforts are needed to strengthen cross-system collaboration. Over the first year of implementation, the Santa Clara County BHSD established monthly meetings with all Prop 47 providers to discuss program updates, progress, and challenges. These meetings have provided a productive venue to share information about new program offerings, such as the expanded housing navigation and employment services. However, there is limited awareness of the Prop 47 program across the Probation Department, BHTC, and other agencies. Additionally, while the BHSD team that oversees the Prop 47 program is housed within the same division that oversees the co-occurring treatment program, the SUTS program is managed by a different division of BHSD. The SUTS division has distinct data systems, referral processes, and program models, which can lead to challenges in communication, oversight, and consistency of the program. BHSD has already developed and distributed an informational brochure for participants to ensure they are aware of all of the Pro 47 services that are available. Providers are giving each participant this brochure at time of intake. The English version of the brochure can be found in Appendix C. The brochure is also available in Chinese, Farsi, Spanish, Tagalog, and Vietnamese.

- **Evaluation Team Recommendation:** Santa Clara County should strengthen communication across the referral sources (including the recently added referral sources), and, ideally, increase consistency between the co-occurring and SUTS treatment program referral processes.
Conclusion and Looking Forward

This preliminary evaluation report provides a midpoint update on the County’s implementation of the Prop 47 grant award. The program exceeded its co-occurring program target (enrolling 89 individuals) but faced enrollment challenges in other services—272 individuals in SUTS (enrolling 37 individuals) and of providing 200 housing slots (enrolling 80 individuals). Supplemental services—employment and housing navigation—were not utilized to the degree initially planned. As such, the BHSD has been coordinating with the other County partner agencies and has made a series of promising changes to both increase the number of individuals served and to increase the variety of services provided. These changes will be reflected in the final report for this program. Despite the enrollment challenges, the outcome data yielded at this early stage shows promising patterns in areas of housing support and recidivism. The County can continue to build on the strengths of the program and the areas of opportunity outlined in this report by continuing to increase awareness of Prop 47-funded programs and determine how to help Prop 47 participants complete the services. This can be achieved both through informational documents with a point of contact for program-related questions, continued provider meetings, leveraging the newly formed Local Advisory Committee (LAC), and by communicating with leadership and line staff of the partner agencies to ensure individuals who need and qualify for Prop 47-funded services are referred, enrolled, and supported in their efforts to complete these programs.

51 Due to the COVID-19 pandemic, the LAC is scheduled to have its first meeting in September 2021.
Appendix A. Logic Model

PURPOSE: To prevent recidivism of individuals with substance use disorders and/or co-occurring disorders involved in the SCC Criminal Justice Systems through supportive treatment and linkage to fundamental resources.

OBJECTIVE: To increase access to outpatient treatment and transitional housing for justice-involved individual with moderate-severe or persistent mental illness and co-occurring disorders, which would result in the reduction of recidivism of people convicted of less serious crimes that have substance use and/or mental health conditions and improved clinical and functioning outcomes for adults with behavioral health diagnoses.

<table>
<thead>
<tr>
<th>INPUTS</th>
<th>ACTIVITIES</th>
<th>OUTPUTS</th>
<th>OUTCOMES</th>
<th>IMPACTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources Needed to Operate Program</td>
<td>Activities Needed to Accomplish Program Goals</td>
<td>Delivery of Evidence-Based Services</td>
<td>Evidence-Based Measures</td>
<td>Long Term Impact to the County</td>
</tr>
</tbody>
</table>

**Training & EBPs**
- Trauma-Informed, CBT, DBT, Motivational Interviewing, Interactive Journaling, Multisystemic Therapy, Brief Family, Family Wellness, Resilience Prevention, Seeking Safety, WRAP, Moral Reconciliation Therapy, Harm Reduction, Housing First

**Leadership, Oversight, and Staffing**
- Behavioral Health Services Department (BHSD)
  - Criminal Justice Systems Division (CJSD)
  - Collaborative Treatment Court (CTC)
  - BHSD Re-Entry Resource Center
  - Substance Use Treatment Services (SUTS)
- Community Based Organization/Funded Providers (CBO)
  - Community Solutions
  - Pathway Society, Inc.
  - Momentum for Mental Health
  - FCS – Caminar
  - Abope Services
  - Goodwill Employment Services
- Probation Department
- Office of Reentry Services
- Department of Correction
- Office of Supportive Housing
- Superior Court of the County of Santa Clara
- Local Advisory Committee (LAC)

**Funding**
- BSCC Prop 47 Grant Funding
- AB 109 Leveraged Funds
- Medi-Cal Leveraged Funds

**Mental Health (MH)**
- Screen and refer MH and co-occurring diagnosis clients
- Administer and analyze intake assessments
- Refer to treatment providers
- Participate in Capacity and discharge planning.
- Submit Client Status Reports
- Develop protocols for referrals

**Mental Health & Substance Use Services**
- Increased timely access to outpatient substance use treatment, mental illness and co-occurring disorders treatments and services to avoid lapses in treatment
- Decreased incarceration and Justice System involvement
- Increased number of Staff trained in Trauma-Informed Care.
- Improved ability of client to function in family/social/community settings.
- Increased number of Clients from Dept. 61 and Probation referred for BHSD screening.
- Decreased days from referral to assessment.
- Decreased days from referral to linkage to treatment.
- Readily available totals of how many served and service dosage provided

**Community-Based Organizations**
- Assertive Outreach
- Facilitate referrals to employment support, education, family reunification services, Faith Based Resource Centers (FBBs), vocational training, education assistance, and transitional employment services.

**Housing Support Services**
- Provide structured and safe living environment.
- Provide housing assessment, navigation, and case management.

**Substance Use Treatment Services (SUTS)**
- Screen and refer SUTS and co-occurring diagnosis clients
- Link to outpatient SUTS care
- Provide recovery residences

**Probation Department**
- Conduct risk assessments and provide referrals to the BHSD Office of Supportive Housing
- Assist with housing assessment and community housing placement for individuals experiencing homelessness

**Office of Supportive Housing**
- Conduct employment/education assessments and connect clients with employment/education services.

**Criminal Justice System**
- Individuals receiving Prop 47 MH, SUTS, and/or housing services will not recommit within three years of release or placement on supervision
- Over the course of the grant project, target population recidivism rate will decrease from 45% to 40%.

**Increased Collaborative System**
- Improved effectiveness of the collaborative court system by improving timely access to treatment services.
- Formalization of direct referrals to the BHSD

**Increased Community Collaboration**
- Reduced recidivism and improved clinical function for individuals on probation as the result of community partnerships and collaboration between Probation, Community-Based Organizations, Housing, and Mental Health and Substance Use Treatment Services.
- Decreased disparities in the criminal justice system

**Increased Access to Treatment**
- Increased access to mental health and/or substance abuse treatment for criminal justice involved individuals.

**Continuum of Services**
- Establishment of a coordinated, and accessible continuum of services.

**Compilation**
- Stabilization of formerly incarcerated individuals with severe and persistent mental illness or co-occurring disorders that do not reoffend.
- Implementation of Transitional Programs to help individuals reenter into the community.
## Appendix B. Progress towards Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Co-occurring Treatment</th>
<th>Substance Use Treatment (SUTS)</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1: To increase access to outpatient treatment and transitional housing for justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders</td>
<td>• 75% of participants referred to Prop 47 are enrolled in treatment</td>
<td>89 of the 130 (68%) individuals referred enrolled in co-occurring treatment</td>
<td>38 of the 104 individuals (37%) referred enrolled in SUTS treatment</td>
<td>126 unique individuals(^{53}) of the 234 individuals (53%) referred enrolled in Prop 47 treatment</td>
</tr>
<tr>
<td></td>
<td>• 90% of participants will be linked to treatment within 10 days(^{54}) of referral</td>
<td>Of the 89 enrollments, 37 (42%) were connected to co-occurring treatment within 10 business days of referral</td>
<td>Of the 38 enrollments, 3 (8%) were connected to SUTS treatment within 10 business days of referral</td>
<td>Of the 126 total enrollments, 40 (32%) were connected to Prop 47 treatment within 10 business days of referral</td>
</tr>
<tr>
<td></td>
<td>• 75% of Prop 47 participants with an identified need for THUs receive them, in conjunction with outpatient treatment services</td>
<td>76 individuals presented a need for housing and 49 (64%) enrolled at a THU</td>
<td>36 individuals presented a need for housing and 31 (86%) enrolled at a recovery residence (RR)</td>
<td>112 individuals presented a need for housing and 80 (71%) enrolled in housing</td>
</tr>
<tr>
<td></td>
<td>• 90% of program participants will be housed within 14 days from referral</td>
<td>Of the 49 individuals who received transitional housing, 26 (53%) were housed within 14 days or less of the housing referral</td>
<td>Of the 31 individuals who received transitional housing, 6 (19%) were housed within 14 days or less of the housing referral</td>
<td>Of the 80 individuals who received transitional housing, 32 (40%) were housed within 14 days or less of the housing referral</td>
</tr>
</tbody>
</table>

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\(^{52}\) All data from program start through March 31, 2021. Recidivism data are only reported for convictions in Santa Clara County and for individuals who enrolled in the Prop 47 program through December 31, 2020.

\(^{53}\) One individual was referred to and enrolled in both co-occurring and SUTS at different times during the reporting period.

\(^{54}\) BHSD defines days as business days.

\(^{55}\) For individuals in custody, the referral date is the day the individual is either (a) placed on the Jail Assessor Coordinator (JAC) list while in jail or (b) the date of the referral screening form completion if the individual does not get placed on the JAC list. While it is rare that an individual is released prior to being placed on the JAC list, this is happening because of COVID. The JAC List is a list of individuals who are required to complete treatment upon release from custody. A client is ordered to be released by the judge in court and then is added to the JAC list by jail booking staff. For individuals in the jail, the BHSD coordinates with the treatment providers who either pick the client up from jail and take them to their housing of choice or provide them a taxi to a recovery residence. For individuals in the community, the referral date is the date of the referral screening form completion.
<table>
<thead>
<tr>
<th>Goal</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal 2: To stabilize and reduce recidivism of justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders through community-based treatment</strong></td>
<td>• 65% of participants will maintain engagement in BHSD treatment and services or successfully complete treatment</td>
<td>62% of enrolled participants maintained engagement, including four participants who successfully completed and 51 who are still enrolled</td>
<td>57% of enrolled participants maintained engagement, including 11 who successfully completed and 10 who are still enrolled</td>
<td>60% of total enrolled participants maintained engagement, including 15 who successfully completed and 61 who are still enrolled</td>
</tr>
<tr>
<td></td>
<td>• Over the course of the three-year project, decrease the target population recidivism rate from 45% to 40%</td>
<td>Of 43 individuals who enrolled in the program in 2020, two (5%) were convicted of a new felony or misdemeanor offense committed after program enrollment</td>
<td>Of 11 the individuals who enrolled in the program in 2020, none (0%) were convicted of a new felony or misdemeanor offense committed after program enrollment</td>
<td>Of 54 individuals who enrolled in the program in 2020, two (4%) were convicted of a new felony or misdemeanor offense committed after program enrollment</td>
</tr>
<tr>
<td><strong>Goal 3: To stabilize and reduce recidivism of justice-involved individuals with moderate-severe or persistent mental illness and co-occurring disorders through housing supports</strong></td>
<td>• 75% of participants will exit THU to permanent housing</td>
<td>Of the 31 participants that exited a THU, 5 (16%) exited to permanent housing</td>
<td>Of the 27 participants that exited a RR, 16 (59%) exited to permanent housing</td>
<td>Of the 58 participants that enrolled at a THU/RR, 21 (36%) exited to permanent housing</td>
</tr>
<tr>
<td></td>
<td>• Over the course of the three-year project, decrease the target population recidivism rate from 45% to 40%</td>
<td>Of 18 individuals who enrolled in the program in 2020 and received housing, one (6%) was convicted of a new felony or misdemeanor offense committed after program enrollment</td>
<td>Of the eight individuals who enrolled in the program in 2020 and received housing, none (0%) were convicted of a new felony or misdemeanor offense committed after program enrollment</td>
<td>Of 26 individuals who enrolled in the program in 2020 and received housing, one (4%) was convicted of a new felony or misdemeanor offense committed after program enrollment</td>
</tr>
</tbody>
</table>
WHAT DOES ALL THIS MEAN FOR ME?

The Behavioral Health Services Department (BHSD) Criminal Justice Systems Division (CJS) hopes you find these services to be valuable. As a participant, you have the right to ask questions, the right to refuse treatment, and the right to file grievances. Due to the grant agreement, BHSD is also obligated to share certain information with the BSCC, RDA, and the Probation Department. Your continued enrollment into the program gives BHSD permission to do so.

We wish you the best with your recovery. Below are a few tips that may help you achieve success.

Stay engaged with your SUTS treatment provider or Mental Health Co-Occurring treatment provider.

Ask your treatment provider to refer you to Abode for housing support and Goodwill for employment services.

Provide feedback about your treatment experience to RDA for program improvements.

IF YOU WERE TOLD YOUR REFERRAL TO A PROP 47 TREATMENT PROGRAM WAS LOST OR TOLD YOUR REFERRAL HAS EXPIRED, VISIT RE-ENTRY RESOURCE IN PERSON OR CALL (408) 535-4280 FOR A NEW SCREENING.

Other Behavioral Health Services Resources:

Suicide and Crisis Hotline
(855) 278-4204

Mobile Crisis Response Team
(800) 704-0900, Option 2

Mental Health Urgent Care
(408) 885-7835

BEHAVIORAL HEALTH SERVICES DEPARTMENT

Re-Entry Resource Center
151 W. Mission Street
SAN JOSE, CA 95110
408-535-4280

IF YOU ARE HAVING A PSYCHIATRIC EMERGENCY, PLEASE CALL 911 OR GO TO YOUR NEAREST EMERGENCY ROOM.
WHY SHOULD I READ THIS DOCUMENT?

Congratulations! If you received this document, you were selected as a Prop 47 participant. This short brochure outlines the services you can expect to receive and the partnerships the Behavioral Health Services Department (BHSD) Criminal Justice Systems Division (CJS) has made to bring these grant-funded programs to you.

PARTNERSHIPS

Board of State and Community Corrections (BSCC)
The BSCC awarded BHSD a highly sought-after grant through a competitive bidding process. The grant agreement requires BHSD to provide services to criminal justice-involved individuals residing in Santa Clara County and requires BHSD to provide BSCC with data of the services provided.

Resource Development Associates (RDA)
To ensure that services are provided as intended to the target population, the BSCC also requires BHSD to contract with an external evaluator. RDA was selected to complete this evaluation.

Probation Department
The BSCC wants to ensure that services are effective and assist in reducing recidivism. The Probation Department conducts the recidivism research on individuals enrolled in services.

SERVICES

Mental Health Co-Occurring
BHSD is contracted with Community Solutions to provide this treatment. Services may include, but not limited to, assessment, therapy, medication support, and case management.

Community Solutions – (669) 205-2117

Substance Use Treatment
Momentum for Health, FCS-Caminar, Pathway Society Inc, and the Re-Entry Resource Center to provide this treatment. Your referral should indicate which provider. Services may include, but not limited to, assessment, individual treatment, group treatment, and referrals to community services.

Momentum for Health – (408) 510-6284
FCS – Caminar – (408) 538-0880
Pathway Society, Inc – (408) 782-6300
Re-Entry Resource Center – (408) 535-4280

SERVICES

To receive services with Abode or Goodwill, you must be enrolled in Prop 47 contracted mental health or substance use program – Momentum for Health, FCS-Caminar, Pathway Society Inc, Re-Entry Resource Center, or Community Solutions – for treatment. Speak to your counselor for a referral.

Office of Supportive Housing
The Office of Supportive Housing (OSH) contracted with Abode to provide this service. A housing navigator can assist with your housing management needs.

Abode – (408) 569-6884

Office of Re-Entry Services
The Office of Re-Entry Services (ORS) contracted with Goodwill to provide this service. Goodwill can provide subsidized employment and vocational training.

Goodwill – (408) 590-8093