

# COUNTYWIDE CRIMINAL JUSTICE COORDINATION COMMITTEE

adolf Gonzales



October 18, 2022

TO: Supervisor Holly J. Mitchell, Chair

Supervisor Hilda L. Solis Supervisor Sheila Kuehl Supervisor Janice Hahn

Supervisor Kathryn Barger

FROM: Adolfo Gonzales, Chief Probation Officer

Chair, Public Safety Realignment Team

SUBJECT: Public Safety Realignment Implementation – October 2022 Update

### Introduction

The Public Safety Realignment Team (PSRT) was established by the Board of Supervisors to coordinate the County's implementation of Public Safety Realignment (AB 109) and advise the Board on AB 109 related matters. Chaired by the Chief Probation Officer and comprised of multiple agencies and stakeholders, PSRT meets monthly to enhance realignment implementation in Los Angeles County.

This update provides an overview of two of the primary focus areas of the PSRT this year: (1) The development of an AB 109 Evaluation Plan in accordance with a motion from the Board of Supervisors; and (2) The submission from the PSRT of AB 109 funding recommendations to the Chief Executive Office (CEO).

In addition, the PSRT is requesting that the Board of Supervisors formally approve the attached 2022 Community Corrections Partnership (CCP) Plan. This plan will be submitted to the Board of State and Community Corrections (BSCC) in December as a requested component of the state's annual CCP survey. The attached plan does not provide newly developed material. Rather, it packages items that have been previously provided to and approved by this Board to better align with annual BSCC survey requirements.

# **AB 109 Evaluation Efforts**

On January 25, 2022, the Board of Supervisors passed a motion outlining a process for AB 109 program evaluation. The Board directed the PSRT, in coordination with the Countywide Criminal Justice Coordination Committee (CCJCC), Chief Information Officer (CIO), and the CEO, to develop a plan to evaluate county and community programs that receive AB 109 funding. The motion requested deliverables in two phases: (1) The development of a plan for evaluating AB 109-funded programs; and (2) the execution of the plan to conduct the analysis.

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The PSRT created an Ad Hoc Evaluation Work Group to lead the development of the framework. This work group developed the primary components of the Phase 1 plan, including the proposed AB 109 programs suitable for inclusion in the evaluation scope and potential outcome measures.

The evaluation effort, coordinated by the CIO and CCJCC, will be primarily carried out by external researchers. As such, many of the evaluation design details will ultimately be determined by the County's scope of work, solicitation, and the corresponding proposals by responding evaluators. However, the framework helps to outline the scope of AB 109 evaluation and to inform the contracting process and contract guidelines that ultimately will comprise the evaluation project.

Rather than a one-time evaluation project of all programs simultaneously, the evaluation will be conducted in a series of studies. This approach will enable the overall effort to progress more efficiently and for analyses to build off of each other.

To initiate and structure the series of analysis, an assessment of departmental data availability on programs to be evaluated has been conducted. The assessment results and the CIO's existing familiarity with data available through the Information Hub will help guide the sequencing and/or consolidation of evaluation steps and will inform the solicitation documents prepared to contract with external research entities.

In addition, CCJCC and the CIO are launching a "Phase 0" study that will serve as a foundational baseline for subsequent components of the evaluation. This Phase 0 work will establish data foundations that are critical to supporting the overall effort. It will also provide the PSRT a high-level overview of justice outcomes among individuals subject to supervision or custody under AB 109.

This Phase 0 analysis will be conducted by CIO staff and will leverage and update the work from the CIO's prior work in the justice arena, such as the 2020 *Justice Metrics Framework Baseline Report* and the 2020 *Public Safety Realignment Evaluation Study*, which provided a high-level analysis of individuals involved in the County's justice system and their outcomes.

The Phase 0 analysis will provide the following baseline information:

- Justice outcomes for the Post-Release Community Supervision (PRCS) population and the AB 109 straight sentenced and split sentenced populations
- One-year outcomes for the 2011-2020 cohorts
- Three-year outcomes for the 2011-2018 cohorts

Phase 0 will launch in September with initial results available in the early Fall.

# **Public Safety Realignment Funding Recommendations**

Per the Board's direction, PSRT provides the CEO with AB 109 funding recommendations that reflect the Board's priorities.

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The PSRT established an Ad Hoc Funding Work Group in March 2022 to develop this year's funding recommendations. Over the course of several meetings, the work group partnered with departments to develop recommendations that enhance services, complement current operations, and fill service gaps identified in the implementation plan.

The Work Group ultimately agreed upon three funding recommendations that aim to support County priorities, enhance realignment operations, and are consistent with applicable statues and the implementation plan approved by the Board of Supervisors in 2021.

The three funding recommendations include:

- Transportation services for AB 109 clients \$500,000 to the Office of Diversion and Reentry's (ODR's) Reentry Intensive Case Management Services (RICMS) program to implement transportation services for AB 109 and other reentry clients (and support for ODR's planned overall RICMS funding request to the CEO).
- Workforce development support \$10,500,000 to the Department of Economic Opportunity (DEO) to develop linkages and provide specialized workforce development services to individuals released from prison and jail, including employment and training services, transitional subsidized employment opportunities, supportive services, stipends, incentives, and peer mentorship.
- AB-109 funded Psychiatric Social Workers \$939,666 to the Public Defender's Office (\$626,444) and Alternate Public Defender's Office (\$313,222) to fund a total of six Psychiatric Social Worker II positions to develop social history reports and support alternative dispositions in cases facing potential custody sentences.

The PSRT approved the Funding Ad Hoc Work Group's AB 109 funding recommendations on July 14, 2022. These were subsequently submitted to the CEO for consideration in this year's supplemental budget process, and the CEO recommended all of them for your Board's approval.

## **2022 Community Corrections Partnership Plan**

On August 10, 2021, the Board of Supervisors approved the PSRT's proposed 2021 CCP Plan. This was subsequently submitted to the Board of State and Community Corrections (BSCC) in December 2021 as one of the required components of the 2021 CCP Survey.

On September 15, 2022, the PSRT approved an updated CCP Plan for submission to the BSCC. Prior to submitting this to the BSCC in the December 2022 survey response, the Board's approval is requested.

As previously noted, this updated plan for 2022 does not provide newly developed material. Rather, it packages items that have been previously approved by or presented to your Board to better align with the BSCC survey requirements. The updated CCP Plan includes:

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- CCP Plan approved by the PSRT in June 2021 and approved by the Board of Supervisors in August 2021. This remains the core, guiding framework for AB 109 implementation.
- 2. FY 2021-2022 AB 109 Budget approved by the Board of Supervisors on October 5, 2021.
- 3. FY 2021-2022 Goals, Objectives, and Outcome Measures (Goals) developed by the PSRT and submitted to the BSCC in December 2021. These goals were also submitted to the Board of Supervisors in January 2022 as part of the Public Safety Realignment Team update.
- 4. List of PSRT Members and Designated Alternates.

### Conclusion

The PSRT continues to meet regularly to review public safety realignment implementation in the County of Los Angeles and follow through with the direction provided from this Board. In addition, regular updates to your Board and the state will continue to inform on the progress of public safety realignment in this County.

The next report to your Board is scheduled for January 2023. The PSRT plans to present an updated 2023 CCP plan to your Board at that time and, henceforth, will present subsequent annual CCP Plan updates in the beginning of the calendar year.

If you have any questions about this update or need additional information, please contact me or Howard Wong, Deputy Director, Adult Services at (562) 334-4221.

AG:KLF:HW:DP:alj

c: Fesia Davenport, Chief Executive Officer
Celia Zavala, Executive Officer, Board of Supervisors
Dawyn R. Harrison, County Counsel
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Mark Delgado, Countywide Criminal Justice Coordination Committee
Justice Deputies

# PUBLIC SAFETY REALIGNMENT TEAM

Realignment Implementation Plan - 2022

# Part I: CCP Plan Framework (Approved June 2021)

# I. BACKGROUND AND INTRODUCTION

### **PUBLIC SAFETY REALIGNMENT**

In October of 2011, the State of California enacted Public Safety Realignment, a major criminal justice reform effort to reduce state prison overcrowding as ordered by a Federal Court. Outlined in Assembly Bill 109 and Assembly Bill 117, Public Safety Realignment transferred various responsibilities from the State to counties. Though more specific criteria apply, the primary components of realignment were as follows:

- Local Custody Custody responsibility was transferred from the State to counties for individuals convicted and sentenced for non-violent, non-serious, non-sex (N3) felony offenses.
- **Post-Release Community Supervision** Community supervision of eligible individuals released from state prison was transferred from state parole to a new, county-implemented Post-Release Community Supervision (PRCS) program.
- Local Revocation Process Revocation processes for state parole (and for the newly created PRCS) were transferred to the counties and a local Court process. In addition, custody terms that result from parole (or PRCS) revocations were shifted to local county jail.

### LOS ANGELES COUNTY'S PUBLIC SAFETY REALIGNMENT TEAM

Following its adoption of the County's Community Corrections Partnership (CCP) realignment implementation plan in 2011, the Board of Supervisors established the Public Safety Realignment Team (PSRT) to ensure the ongoing coordination of realignment implementation among departments, stakeholder agencies, and community partners. Initially established with a composition and structure mirroring a county's CCP, the PSRT is chaired by the Chief Probation Officer and provides ongoing realignment updates to the Board of Supervisors and the California Board of State and Community Corrections.

In December 2020, the Board approved a motion expanding the membership of the PSRT and directing the newly constituted body to update the county's implementation plan. Specifically, the Board approved an updated PSRT membership structure by adding:

- 1. The department head or high-level executive from:
  - a. Office of Diversion and Reentry
  - b. Alternatives to Incarceration Initiative
  - c. Anti-Racism, Diversity, and Inclusion Initiative
  - d. Department of Health Services

2. Five representatives from community-based or advocacy organizations that work with the AB 109 reentry population with one appointee to be appointed by each supervisor for two-year terms; at least one representative should have lived experience.

Further, the Board directed the updated PSRT to:

- 1. Revise the AB 109 Community Corrections Partnership (CCP) implementation plan to reflect the Board's priorities on alternatives to incarceration, including, but not limited to, diversion programs, substance abuse programs, mental health treatment, housing, restorative justice programs, and community-based services.
- 2. Within 90 days of the new AB 109 CCP implementation plan being approved, provide recommendations for AB 109 funding that reflect the Board's priorities listed above.

The PSRT member roster and full motion approved by the Board are attached.

### **IMPLEMENTATION PLAN FORMAT**

The goal of the PSRT implementation update is to provide a framework for how the County can address the responsibilities transferred to the County through realignment and incorporate the County's justice reform priorities. To that end, PSRT members developed an implementation plan format that identifies principles and corresponding programmatic/strategic recommendations in the following subject matter areas:

- Diversion / Alternatives to Incarceration
- Custody and Reentry
- Post-Release Community Supervision

The overall intent was to develop an integrated set of recommendations that promotes community-based services to reduce the number of individuals in custody or on supervision and to ensure that those who are in custody or on supervision are connected with services that support reentry, improve outcomes, and reduce recidivism. The set of documents that were approved by the committee are provided in Section II.

As directed by the Board, the PSRT is continuing its work to provide funding recommendations. Per the Chief Executive Office, the PSRT's funding recommendations will offer valuable input and guidance that will inform the CEO's development of the recommended AB 109 budget.

# II. ITEMS APPROVED BY THE PUBLIC SAFETY REALIGNMENT TEAM

# **Overarching Principles**

### Diversion / Alternatives to Incarceration

- I. Implementation of Public Safety Realignment in Los Angeles County is guided by the County's Care First, Jails Last priorities.
- II. Los Angeles County's justice system operates with a racial and gender equity lens and aims to reduce racial and gender disparities.
- III. The provision of services that meet the needs of individuals in contact with the justice system, including survivors of harm, are provided by community-based service providers, outside the custody or supervision environments when possible.
- IV. Recovery is not a linear process. As individuals engage in this journey, strategies to assist in recovery should not penalize them and should afford individual agency and a spectrum of services utilizing a harm reduction approach.
- V. Alternative to incarceration efforts must focus on serving communities that are most vulnerable, including BIPOC and individuals with behavioral health needs, transition age youth, women particularly Black Women TGI and LGBQ+ people.
- VI. Services and interventions are designed and delivered based on an individual's needs and strengths.
- VII. Strategies must be implemented to ensure safe and equitable access to services, resources, and obligations, including transportation, geographic proximity, childcare, etc.
- VIII. Strategies must be data-driven, evidence based best practices, with metrics of success to include the impact of strategies on individual and community health, reducing the jail population, improving racial equity, and enhancing public safety.
- IX. Strategies must prioritize addressing the root-causes of economic, racial and gender inequity; poverty and houselessness; criminalization and incarceration; and other forms of interpersonal and systemic harm.
- X. Implementation of Public Safety Realignment in Los Angeles County is in alignment with the 2011 Public Safety Realignment mandates and other relevant statutes and interpreted in the broadest manner to effectuate the overarching principles recognized herein.

# **Custody and Reentry**

- I. Reentry planning and preparation starts as soon as someone is in custody.
- II. Individuals are removed from custody as soon as possible with appropriate supports.
- III. Community-based organizations play a primary role in within- and post-custody reentry preparation and support.

### Post-Release Community Supervision

- I. Pre-release planning, including identification of individualized service needs and establishment of benefits, is a critical component of the PRCS program.
- II. The PRCS model prioritizes an integrated care plan that includes evidence-based supervision practices, treatment, and wrap-around supportive services.
- III. The PRCS model addresses individualized needs in order to support reentry and community reintegration and enhance public safety.
- IV. Individuals should continue to be provided needed treatment and services beyond their supervision period.
- V. Prerelease planning, service delivery, and release should prioritize self- and community-determination.
- VI. Consistent, accessible, publicly transparent, robust, and funded data collection and reporting should be conducted to establish a baseline, track outcomes, improve outcomes, and determine if there are any unintended outcomes, and should be reviewed on a regularly established basis (e.g., monthly/annually). Data tracking metrics should include reductions in the jail population and in racial, gender, and geographic disparities.
- VII. Consistent with the overall PRCS supervision model, responses to violations -- including the revocation process -- prioritize a client's connection or re-connection to treatment services.
- VIII. To ensure long-term community stability, develop multiple opportunities throughout the revocation path to provide access to support and services.

# Diversion / Alternatives to Incarceration Intercept Model

ATI Office Intercept Model, 2021

Intercept 00
Healthy Community
Supports &
Infrastructure

Intercept 0 Community Response & Intervention Intercept 1 Law Enforcement Contact Up To Arrest Intercept 2 Initial Detention & Filing Decision Intercept 3 Jail Custody & Court Process Intercept 4 Reentry Planning & Release Intercept 5 Supervision in the Community

# **Diversion / Alternatives to Incarceration**

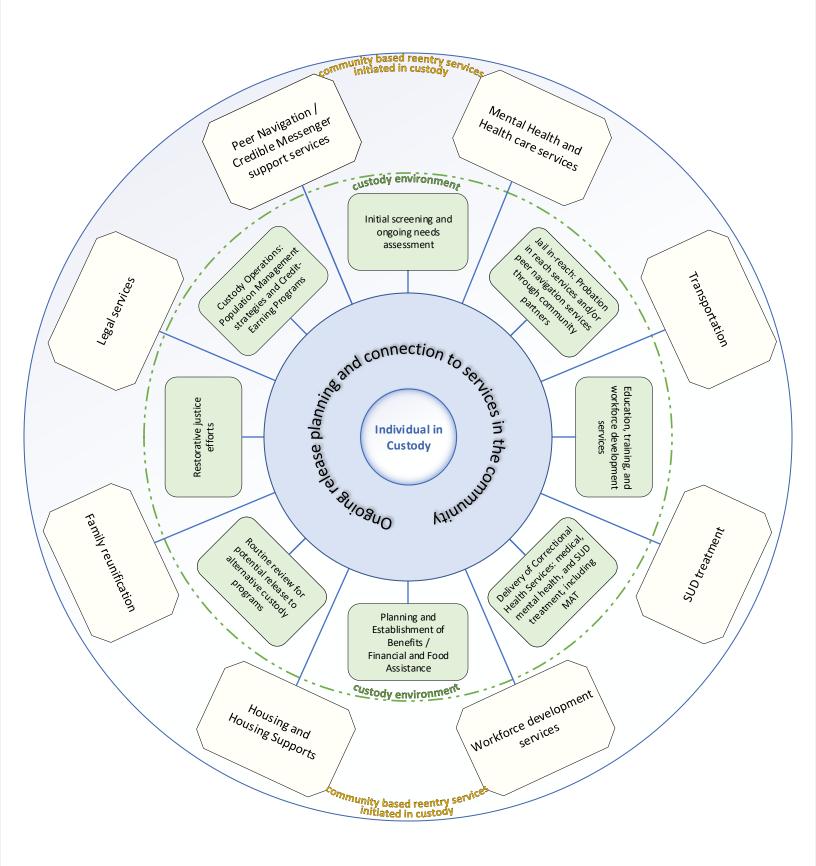
**Principles and Recommendations** 

	Intercept 00 - Healthy Commu		
	ective: To build a robust community-based network of behavioral health suvent people from entering or reentering jails	ppc	
	Principle		Programmatic/Strategic Recommendation
L.	Resource and support communities to meet their own needs so that they can grow and thrive, without law enforcement or criminal legal system intervention	a.	Community-based Service and Resource Hubs - e.g. DOORS Reentry Center (ODR); Restorative Care Villages (BOS/DHS/DMH)
2.	Youth Development Resources	a.	(Youth Justice Reimagined)
3.	Safe transportation, housing, safe child care, access to all medical care, free and appropriate public education, diagnosis and support, access to green space and healthy food, employment		
1.	Services in the community are delivered by individuals with lived experience that represent the intersections and identities of those impacted in a culturally humble way.	a.	Fund and expand community peace-keeper programs that utilize a peer-based model and employ impacted individuals outside of law enforcement; Trans-led gender-affirming education and family support
	Intercept 0 - Community		
	ective: Consistent with community safety, reduce the number of people have		
we	llness and development of strengths and responding to the needs of individu	ıals	
	Principle		Programmatic/Strategic Recommendation
5.	Provide direct hand-off to services for people in lieu of arrest	a.	Law Enforcement Assisted Diversion (ODR)
6.	Create real-time inventory of available services, accessible to individuals, families seeking support, and service providers, and law enforcement where relevant	a.	ATI Assessment and Referral App
7.	Provide robust, community-based, non-law enforcement responses to those in behavioral health crisis, preferably through those with lived experience	a.	Alternative Crisis Response (ATI); community-based emergency response (e.g. Community Alternatives to 911); Multi Disciplinary Team (MDT) and Psychiatric Mobile Response Teams (PMRT)
8.	Provide harm reduction services for those struggling with substance use disorders	a.	Harm Reduction Training/Overdose Education and Naloxone Distribution (ODR)
9.	Youth Development and Diversion Resources	a.	(Youth Justice Reimagined)
	Intercept 1 - Law Enforcer	ner	nt Contact Up to Arrest
	jective: Consistent with community safety, reduce the number of people from		
	Principle		Programmatic/Strategic Recommendation
10.	Provide direct hand-off to services for people in lieu of arrest	a.	Law Enforcement Assisted Diversion (ODR)
11.	In situations where behavioral health crisis situation requires law enforcement, it should be a co-response with a clinical and specially trained law enforcement officer.	a.	Mental Evaluation Team (LASD/DMH)
	Intercept 2 - Initial Dete	nti	ion & Filing Decision
	jective: Presumption of pretrial release to decentralized community-based s bility of the individual, and improved health and wellness outcomes		
Sta	Principle		Programmatic/Strategic Recommendation
12.		а	Prefiling diversion program (ATI)
	vulnerabilities from entering the jail system		
13.	Develop a strengths- and needs-based system of pre-trial release through an independent, cross-functional entity, situated outside of law enforcement, to coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions	a.	community-based pretrial service providers (e.g. CASA); access to legal defense counsel; access to participatory defense in the community
14.	Decriminalize quality of life and survival crimes	a.	Alternative stabilizing housing supports and behavioral health supports, including safe consumption housing; prosecution filing decisions (e.g. prosecutors can reduce or eliminate filing on survival crimes)

15. Create a safe landing space directly across from custody release points to provide DOORS Reentry Center (ODR); Expanded transitional model with housing supports shelter and services upon exit; decentralized and accessible for folks returning to (JPRC); Build a system / platform to coordinate transportation for people their home of origin reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release **Intercept 3 - Jail Custody & Court Process** Objective: Establish up-front strength, needs, and behavioral health assessments and robust diversion and release capacity to community-based systems of care, for people whose justice system involvement is driven by unmet behavioral health, physical health, and other clinical needs, and other particularly vulnerable populations Principle Programmatic/Strategic Recommendation Assess and identify as early as possible, those with behavioral health needs who a. AB1810 Pretrial Mental Health Diversion (ODR & ATI); Misdemeanor Incompetent are eligible for diversion and release, and divert to community-based services and to Stand Trial (ODR); Felony Incompetent to Stand Trial (ODR); Department of supports, as early as possible State Hospitals Diversion (ODR) Assess and identify as early as possible, those who may be eligible for diversion Community-based pretrial services (ATI/ODR); Rapid Diversion (ATI); Reentry and release, and divert to community-based services and supports, as early as Intensive Case Management System (ODR) possible Develop a strengths- and needs-based system of pre-trial release through an Community-based pretrial service providers (e.g. CASA); access to legal defense independent, cross-functional entity, situated outside of law enforcement, to counsel; access to participatory defense in the community coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions 19. Create a safe landing space directly across from custody release points to provide DOORS Reentry Center (ODR); Expanded transitional model with housing supports shelter and services upon exit; decentralized and accessible for folks returning to (JPRC); Build a system / platform to coordinate transportation for people their home of origin reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release Intercept 4 - Reentry & Release Objective: Ensure early release planning for all people coming out of jails and prisons to LA County, and continuity of support and peer navigation to services and supports to ensure stability and success for individuals returning to their communities Principle Programmatic/Strategic Recommendation 20. Begin release planning upon entry into jail, and improve care coordination for a. Care Transitions (DHS-CHS)/Reentry Intensive Case Management System (ODR) release, to support the success of individuals upon release 21. Create a safe landing space directly across from custody release points to provide DOORS Reentry Center (ODR); Expanded transitional model with housing supports shelter and services upon exit; decentralized and accessible for folks returning to (JPRC); Build a system / platform to coordinate transportation for people their home of origin reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release Support employment development and supports, especially for those with SECTOR (ODR); community-based workforce development behavioral health needs, TGI, and other marginalized individuals Allow people to finish serving the last few years of their realignment sentence in a. Returning Home Well LA the community

24.	Provide opportunities for community-based reentry sites; Split sentencing with an opportunity to serve the end of sentences in a community-based setting				
25.	Provide safe transportation to everyone leaving custody	a.	Platform to connect the individual to the service provider that provides transportation		
	Intercept 5 - Supervis	ion	in the Community		
Obj	ective: Reduce the demands and length of supervision, and improve access	to	supportive services by connection to peer navigators to improve health and		
safe	ety outcomes				
	Principle		Programmatic/Strategic Recommendation		
26.	check-ins, reduce and potentially eliminate technical violations, and reduce and potentially eliminate the issuance of bench warrants for people who incur technical violations on community supervision; Reduce the role of Probation and increase the transitioning of individuals to community-based supports and		(Probation)		
	• •				

# **Custody and Reentry Model**

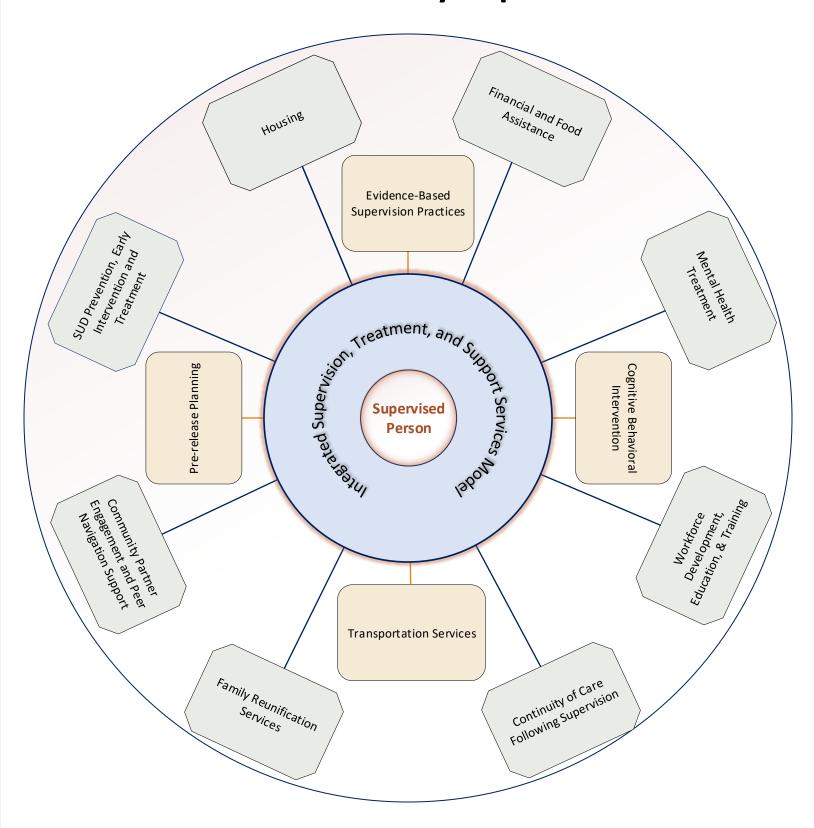


# Custody and Reentry Principles and Recommendations

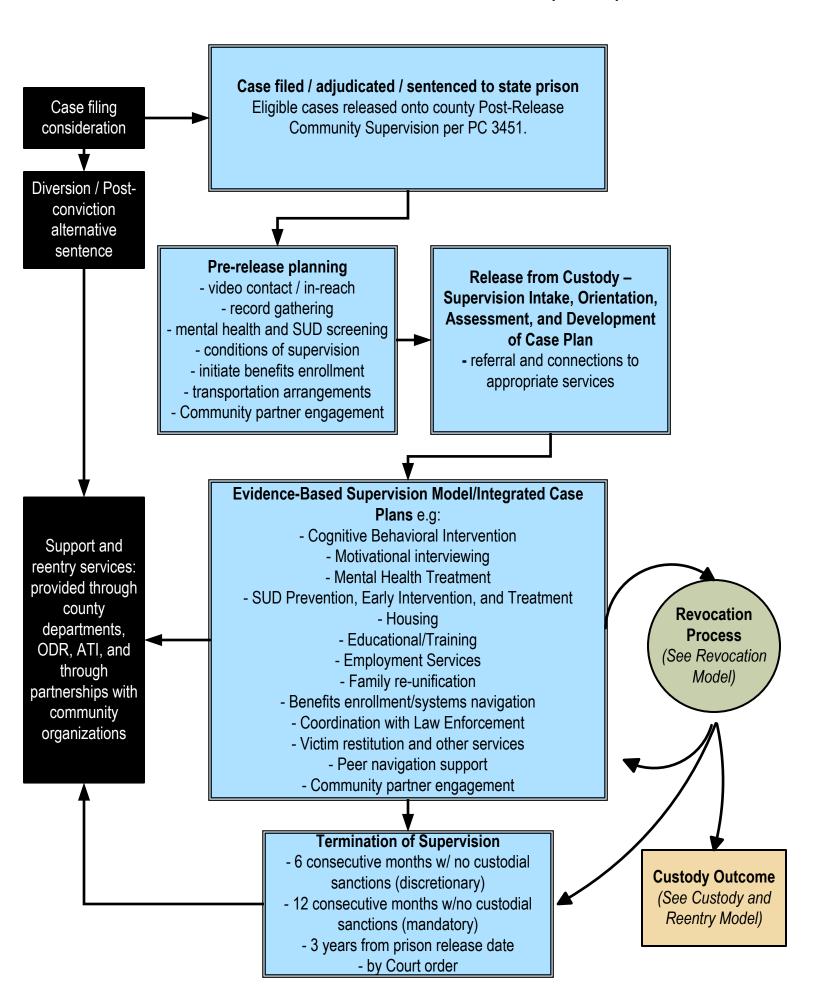
	Custody					
1	Principle  County jail facilities provide a safe and secure housing environment for		Programmatic/Strategic Recommendation			
1.	incarcerated individuals.					
2.	Incarcerated individuals have the opportunity to participate in meaningful programming leading to credits.	a.	LASD to provide programming including fire camp, Education Based Incarceration (EBI), conservation credit, inmate worker credits, Life Skills and Career Technical Education			
3.	Gender-responsive services are available to individuals in custody who identify as female.	a.	Trauma-informed programming, visitation room (ABC room) for mothers and children, and expansion of services for pregnant and parenting women including prenatal education, doula services and lactation support			
4.	Healthcare services in jail are delivered in a manner which is inclusive, compassionate, excellent, innovative, and accountable to individuals in the county jail and facilitates continuity of their care upon release.	a.	Correctional Health Services to provide high quality physical health, mental health, substance use treatment, and dental care, meeting or exceeding community-level standards of care			
5.	Evidence-based substance use disorder treatment programming should be available to individuals during their time in custody.	a.	Medication for Addiction Treatment (MAT) and START program should be implemented to scale.			
6.	Incorporate restorative justice programming into custody setting that is led by community-based organizations					
7.	Prioritize in-custody workforce development efforts that focus on high road training and employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency and support individuals in a responsive, holistic way	a.	Support and expand efforts like the Career Center at the Century Regional Detention Facility where incarcerated individuals receive certification training in Construction, Hospitality and Technology both as pre-release and post-release training			
	Ree	ntr	У			
	Principle		Programmatic/Strategic Recommendation			
8.	Release planning and connection to reentry and community supports should begin as early as possible in custody.	a.	Assessment provided soon after arrival that includes strengths, needs, trauma history, family/community supports, and current/prior providers, ideally by a person of the same community with lived experience			
9.	Involve family member(s), current/prior treatment provider(s) in the community, Probation and defense attorney in reentry planning, as appropriate and with consent of the client	a.	Provide opportunities for in-person or virtual in-reach, including assessment interviews or engagement in custody by the identified community treatment provider and/or Probation, if pending release to supervision			
10.	County and community partners work to identify individuals who may be diverted from jail to alternative to custody programs and/or community-based care.	a.	ODR to provide community-based restoration for misdemeanor and felony defendants found incompetent to stand trial (MIST and FIST)			
		b.	Court-ordered releases to SUD or MH treatment			
		c.	Rapid Diversion Program			
		d.	Returning Home Well LA			
		e.	ODR Housing Program			
11.	Maximize direct warm handoffs directly from jail to receiving community-based providers	a.	Arrange conditional and coordinated releases directly to providers			
		b.	Provide assistance with transportation to destination upon release			
12.	All incarcerated individuals should have a safe place to stay upon release.	a.	Provide interim housing through Probation-contracted services, DHS Housing for Health, LAHSA or other housing providers			
13.	Ensuring continuity of care with medical, mental health and SUD treatment upon release is essential to health and well-being	a.	Schedule appointments with primary care provider, mental health and/or SUD provider in community prior to release			
		b.	Provide assistance in applying for or reinstating Medi-Cal benefits			
		c.	Provide 30-day supply of essential medications at release			
14.	Efforts to provide individuals with vital documents and enroll in eligible public services are critical to support reentry.	a.	Provide assistance in obtaining CA ID, birth certificate, Social Security card, and/or other needed documents			

	(continued from #14 above)	b.	Provide assistance in applying for or reinstating GR, CalFresh food benefits, SSI/SSDI, Medi-Cal and/or other applicable benefits
15.	Prioritize workforce development efforts that focus on high road training and employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency and support individuals in a responsive, holistic way	a.	Identify opportunities to support re-entry job seekers through training stipends, intensive case management, system integration like the INVEST program (between WDACS and Probation), and other housing/work financial supports
16.	Engage and educate employers on the value of hiring justice-involved individuals, concentrating on high growth industries	а.	Support and enhance the County's Fair Chance campaign that educates employers on the State's Fair Chance law, but also encourages employers to sign on to the Fair Chance pledge and hire from the reentry population
17.	Ensure reentry needs and strengths in all domains are considered in the comprehensive release plan	a.	Develop comprehensive reentry plans in collaboration with individual in jail, to include (as needed) housing, medical care, mental health treatment, SUD treatment, family/community/social support (including family reunification if applicable), transportation, Medi-Cal, financial and food support, and needed documents
18.	Ongoing case management, navigation or peer support from a credible messenger in the community with lived experience	a.	Provide linkage upon release to a community health worker, peer support, or other reentry provider with lived experience of prior incarceration

# **Post-Release Community Supervision Model**



# POST-RELEASE COMMUNITY SUPERVISION (PRCS) - PC 3451



# **Post-Release Community Supervision**

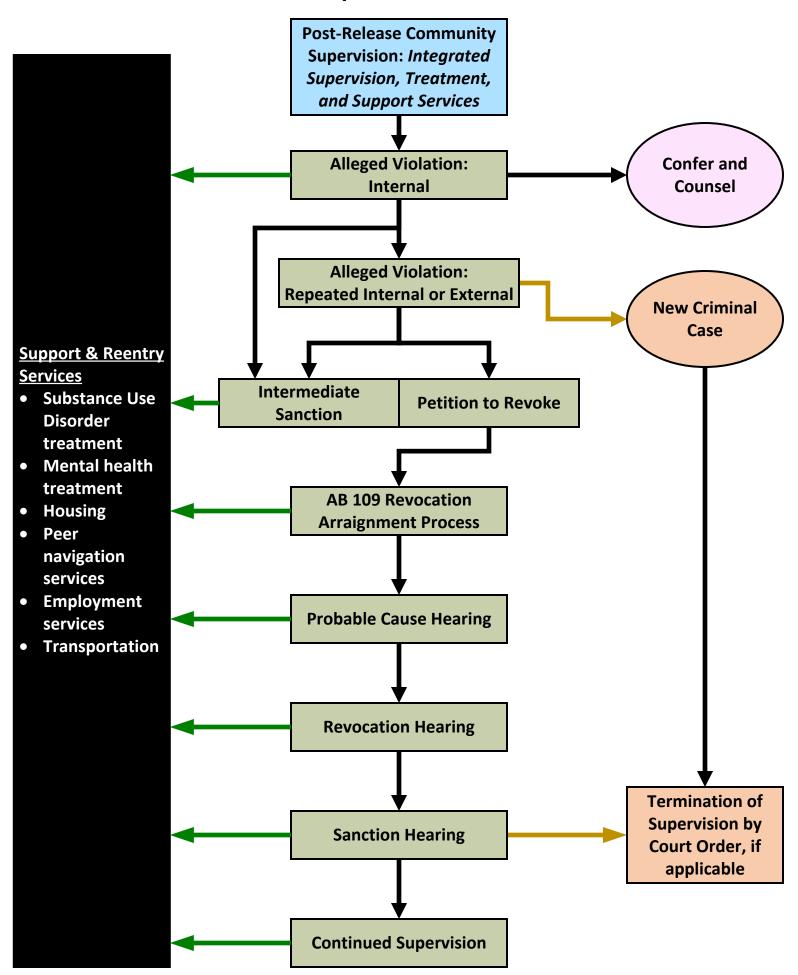
**Principles and Recommendations** 

	Pre-Release and Earl	y Tra	nsition Planning
	Principle		Programmatic/Strategic Recommendation
1.	Pre-release planning and community transition support are critical elements of PRCS and community-based service support.		The County's Pre-Release Center (PRC), in partnership with independent community-based organizations, screens the incoming PRCS case for mental health, substance use disorder, physical health, housing, and other responsivity needs to ensure appropriate services are rendered.
			Pre-release benefits enrollment processes support the timely delivery of needed services and shall include independent community-based partners.
			Strategies to address transportation needs should prioritize independent community-based service providers.
	Evidence-Based Su	perv	
2.	Principle  PRCS and community-based service provision goals of promoting the successful	2	Programmatic/Strategic Recommendation  Holistic and innovative evidence-based approaches
۷.	reentry of clients and enhancing public safety are accomplished through the incorporation of evidence-based practices and strategies that are rooted in		Validated assessment tools are utilized to identify needs and strengths and develop
	community-based holistic approaches.		case plans, including: harm reduction strategies to address in order to reduce recidivism, mental health treatment needs, SUD treatment needs, and other support service needs.
3.	Individualized Interventions		The level of case management and supervision service correspond to an individual's identified needs and strengths in collaboration with independent community-based organizations. Supervision case plans are developed at the beginning of the supervision period with community-based partners that identifies support that correspond to the client's needs and strengths.  Supervision services are prioritized for clients that are at high need. Per statute,
			clients that make significant progress towards the completion of their case plan goals and have no custodial sanctions are considered for an early earned discharge.
			The County currently contracts with community-based organizations for the following services: substance use disorder, mental health treatment, employment, housing, and system navigation. The County should contract directly with community-based organizations independently of law enforcement body.
	Public	Safe	
4.	Principle  Addressing client accountability when necessary can promote positive long-term	a.	Programmatic/Strategic Recommendation  Probation coordinates with independent community-based organizations and
4.	behavior change and support public safety, in collaboration with independent community-based organizations.	a.	collaborates with local law enforcement and participates in co-located teams in order to address unmet needs that present public safety concerns
	Substance Use Disorder ( Principle	SUD	) Treatment Services Programmatic/Strategic Recommendation
5.	Substance use disorder (SUD) services are accessible and connect individuals to the right services, at the right time, in the right setting, for the right duration.	a.	Ensure that justice involved individuals have access to SUD services via multiple entryways (SASH, CENS, SBAT, direct treatment provider)
			Collaborate with partners to provide access to SUD services at Probation Offices and court locations
		c.	Monitor efficiency and efficacy of entryways to SUD services
6.	SUD services are comprehensive across the lifespan and on a continuum of improved health, wellness, and recovery.		Evidence-based SUD prevention, early intervention, treatment, and recovery support services are available to justice-involved individuals, both during and after supervision.
		b.	The pathway to recovery is not a linear process and may include one or more service components and episodes between and/or within the following: withdrawal management, outpatient, residential, recovery bridge housing, medication assisted treatment, harm reduction, and recovery support services.
			SUD services are client-entered and personalized to ensure the right level and duration of treatment and are based on an individual's continual growth to improve the quality of their life.
			Leverage existing resources (e.g., AB 109, other local, state, and federal funds) to support SUD services that are not reimbursable by Drug MediCal, but necessary to ensure continuity of SUD services to justice-involved individuals
7.	SUD services are culturally humble and influenced and responsive to personal belief systems.	a.	SUD services are provided by a culturally, racially, and gender diverse workforce of SUD registered and certified counselors, and licensed professions, including peer support services by individuals with a diversity of lived experience.

(continued from #7 above)			b. SUD counselors are trained to work with justice-involved populations, including trained on trauma-informed evidence-based approaches.		
		c.	SUD workforce is trained on SUD trends and other restorative justice and health equity topics and practices.		
		d.			
		e.			
	Mental Health Tr	eat			
	Principle		Programmatic/Strategic Recommendation		
8.	Proactive outreach and engagement of clients	a.	Meeting clients where they feel most comfortable and engaging them, including jail in-reach prior to release and participating in video-conferencing with clients in CDCR		
9.	Access to all levels of care, including mental health and co-occurring services	a.	Mental health assessments, linkage, and specialty mental health services such as intensive outpatient, enriched residential (ERS) and co-occurring substance abuse (COIN) services provided by community-based organizations to help individuals achieve hope, recovery and wellbeing		
10.	Collaboration and integration of care with AB109 partner agencies	а.	Collaboration and communication with all partner agencies and departments to facilitate integrated care for clients, including co-location of staff		
11.	Provide ancillary services and supports	a.	Providing a full continuum of care tailored to meet individual needs, including establishment of benefits and linkage to a broad array of services and supports		
12.	Ensuring providers have the necessary evidence-based training	a.	Offering relevant trainings to providers in order to improve the skill set needed to engage clients		
13.	Assisting client to remain engaged in services following termination of supervision	a.	Working with providers to provide continuity of care for engaged clients		
	Employme	nt S			
1/1	Principle  Prioritize workforce development efforts that focus on high road training and	a.	Programmatic/Strategic Recommendation Support and expand efforts like the Career Center at the Century Regional		
14.	employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency	a.	Detention Facility where incarcerated people receive certification training in construction, hospitality and technology as part of pre-release planning that will continue with post-release training and employment		
15.	Engage and educate employers on the value of hiring justice-involved individuals, concentrating on high growth industries	a.	Support and enhance programming that supports hiring justice-involved individuals by community-based organizations, as well as the County's Fair Chance campaign that educates employers on the State's Fair Chance law, but also encourages employers to sign on to the Fair Chance pledge and hire from the reentry population		
16.	Understanding the complex array of barriers the re-entry population faces, ensure financial and case management supports are responsive to the re-entry population's needs	a.	Identify opportunities to support re-entry job seekers through training stipends, intensive case management, system integration like existing community-based organizations, as well as the INVEST program (between WDACS and Probation), and other housing/work financial supports		
17.	For parenting re-entry adults, engage the family through youth programming to assist in the prevention of continuing justice-involvement	a.	Identify opportunities to serve children of justice-involved through youth work experience and education programs to help break the cycle of justice system involvement		
	Community Partnerships and	l Eq			
18.	Principle  The County and community partners collaborate to provide access to support	a.	Programmatic/Strategic Recommendation  Housing		
	services during supervision and supporting independent community-based services after supervision.	b.	Peer navigation services and credible messenger support		
		c.	Transportation services		
		d.	Family re-unification		
		e.	Financial and food assistance		
	Violations and Re	evo	ocation Process		
	EBP Pri Principle	nci	ples Programmatic/Strategic Recommendation		
1.	Responding to the root causes of harm and unmet needs in a swift, culturally humble and sensitive, and fair way reduces supervision violations and law violations especially when used in conjunction with the use of positive reinforcement to respond to positive behaviors. Responding to needs in an equitable and positive way reinforces the vision of care first in a revocation model.	a.			

	Alternatives to Custody				
	Principle		Programmatic/Strategic Recommendation		
2.	Reliance on custodial sanctions alone is ineffective in reducing recidivism	a.	Probation's Response Grid uses graduated responses based on the client's needs and strengths to determine the response. Responses prioritize reconnection to services, and revocations are only recommended for clients that have needs that could not be met through any other community-based services and should be a last resort.		
	Ensuring Po	ubli	c Safety		
	Principle		Programmatic/Strategic Recommendation		
3.	Ensuring public safety is a critical role of the Probation Department. Public safety prioritizes the needs of the client, their family, and survivor(s).	a.	Addressing client accountability in partnership with independent community-based organizations, when necessary and appropriate, contributes to an increase in public safety.		
	Coordinated Del	live	ry of Services		
	Principle		Programmatic/Strategic Recommendation		
4.	Individuals who face revocation often present with very high and complex needs. As a result, the availability and delivery of services through the revocation process should be specifically designed to address those high needs.	a.	The availability of co-located assessments and service linkages prioritizing community-based providers at the Court is critical for complex needs such as: co-occurring residential treatment, housing and mental health housing, skilled nursing facility placement, and SUD treatment services, including Medication for Addiction Treatment (MAT).		
5.	Strategies and supports delivered by independent community-based providers that	a.	Peer navigation services/credible messengers		
	help individuals meet their supervision obligations can help improve their	b.	Transportation support		
	outcomes and reduce violation incidences.	c.	Use of existing community-led strategies (e.g., PRIT, ATI, MCJ closure report, etc.), as well as the development of strategies and partnerships, prioritizing independent community-based providers, to help individuals meet applicable registration requirements		

# **Violation/Revocation Model**



# Part II: Fiscal Year (FY) 2021-2022 Public Safety Realignment Funding Allocation

# Fiscal Year 2021-2022 Public Safety Realignment Funding Allocation

Where funds were allocated to:	Amount				
Alternate Public Defender	\$4,231,000				
Auditor-Controller	\$230,000				
Board of Supervisors	\$3,357,000				
Chief Executive Office	\$240,000				
District Attorney	\$8,802,000				
Diversion and Re-Entry	\$53,583,000				
Fire District	\$4,582,000				
Health Services	\$47,582,000				
Homeless and Housing Program	\$912,000				
Mental Health	\$44,286,000				
Probation	\$123,200,000				
Public Defender	\$14,490,000				
Public Health	\$10,906,000				
Sheriff	\$240,060,000				
Workforce Development, Aging, and Community Services	\$997,000				
Trial Court Operations	\$49,000				
Total Allocation:	\$557,507,000				

# Part III: Fiscal Year (FY) 2021-2022 Community Corrections Plan Goals, Objectives, and Outcome Measures

# Goal 1: Deliver high-quality workforce services/training to individuals in custody with linkage to continued workforce services upon release

Objective 1	Provide in-custody basic career readiness training to 100 individuals per year. Basic career readiness training - overseen by Workforce Development, Aging, and Community Services with partnering agencies - is a six-week training program that includes work etiquette, resume preparation and interview skills
Objective 2	Provide in-custody case management to all participants
Objective 3	Provide in-custody industry specific training to at least 25% of basic career readiness training graduates
Objective 4	Provide post-release workforce placement and retention services to all released participants
Outcome Measure 1	Number of participants that complete the basic career readiness training
Outcome Measure 2	Number of participants that complete the industry specific training linked with workforce services post release
Outcome Measure 3	Number of participants employed at 3, 6, and 12 months after release from custody

Goal 2: Enhance the County's Post Release Community Supervision (PRCS) pre-release processes to facilitate case planning, linkages to services, and reentry

Objective 1	Continue and grow the Pre-Release Video Conferencing (PRVC) program for individuals pending release from state prison to PRCS
Objective 2	Expand DMH and DPH-SAPC behavioral health efforts to assess Post- release Supervised Persons (PSPs) in custody on revocation matters in order to facilitate a seamless connection to community-based services upon release
Objective 3	Enhance the Medi-Cal enrollment process based on the implementation of the California Advancing and Innovating Medi-Cal (CalAIM) prerelease initiative
Objective 4	Develop options for providing transportation of PSPs to treatment providers directly from jail or court
Outcome Measure 1	The number of PRVC contacts with individuals being released to Los Angeles County on PRCS in order to support pre-release planning efforts
Outcome Measure 2	The number of clients contacted through jail in-reach efforts and the number of clients successfully linked
Outcome Measure 3	The establishment of agreements with partnering departments and/or CBOs to transport PSPs directly to treatment sites

# Goal 3: Reduce the mental health population in the County jail system

Objective 1	Enhance and support the Office of Diversion and Reentry's (ODR) delivery of housing and intensive case management services to individuals with mental health disorders diverted from the jail
Objective 2	Increase the number of behavioral health assessment providers in custody and at court locations in order to identify individuals with mental health/co-occurring disorders eligible for placement in community treatment
Objective 3	Implement the County's Alternative Crisis Response (ACR) system and expand the number of Psychiatric Mobile Response Teams (PMRTs)
Objective 4	Enhance the continuum of community-based services available so that individuals diverted from custody can be stepped down to high quality care at the appropriate level of service, as needs present
Outcome Measure 1	The number of individuals supported in the ODR housing program
Outcome Measure 2	The number of behavioral health assessment providers available for in custody assessments and the number of individuals being released from jail with behavioral health treatment needs that are placed with mental health and substance use disorder treatment providers
Outcome Measure 3	Status of the ACR program launch and volume of calls served
Outcome Measure 4	The number of PMRT teams deployed and the number of call responses
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# Part IV: PSRT Members and Designated Alternates

## Public Safety Realignment Team Members / Designated Alternates

Members / Designated Attenutes									
Agency	Member	Title	Designated Alternate	Title					
Probation Department (Chair)	Adolfo Gonzales	Chief Probation Officer	Howard Wong	Deputy Director					
Superior Court	The Honorable Sam Ohta	Supervising Judge	The Honorable Jeffrey S. Cohen-Laurie	Site Judge, Central Arraignment Courthouse					
Sheriff's Department	The Honorable Alex Villanueva	Sheriff	Brendan Corbett	Assistant Sheriff					
District Attorney's Office	The Honorable George Gascon	District Attorney	Sharon L. Woo	Chief Deputy					
Public Defender's Office	Ricardo Garcia	Public Defender	Thomas Moore	Assistant Public Defender					
Alternate Public Defender's Office	Erika Anzaotegui	Alternate Public Defender	Cesar Sanchez	Acting Chief Deputy					
Chief Executive Office	Fesia Davenport	Chief Executive Officer	Brian Hoffman	Principal Analyst, CEO					
Department of Mental Health	Dr. Lisa Wong	Director, DMH	Dr. Karen Streich	Mental Health Clinical Program Mgr., III					
Department of Public Health - Substance Abuse Prevention and Control (SAPC)	Dr. Gary Tsai	Director, DPH-SAPC	Yanira Lima	Branch Chief					
Department of Economic Opportunity (DEO)	Kelly LoBianco	Director, DEO	Irene Pelayo	Program Manager, Workforce Development					
Department of Public Social Services	Dr. Jackie Contreras	Acting Director, DPSS	Sherri Cheatham	Chief, Medi-Cal & In-Home Supportive Services Program Division					
Department of Health Services	Dr. Christina Ghaly	Director, DHS	Dr. Tim Belavich	Interim Director, DHS-Correctional Health Services					
Office of Diversion and Reentry	Dr. Clemens Hong	Director, ODR	Michelle Newell	Deputy Director					
Alternatives to Incarceration	The Honorable Songhai Armstead	Executive Director, ATI							
Anti-Racism, Diversity, and Inclusion Initiative	D'Artagnan Scorza	Executive Director	Heather Jue Northover	Principal Analyst					
Los Angeles County Office of Education (LACOE)	Dr. Debra Duardo	Superintendent of Schools	Maricela Ramirez	Chief Education Officer					
Los Angeles Police Department	Michel Moore	Chief, LAPD	Kris Pitcher	Deputy Chief					
County Police Chiefs Association	Chief Eugene Harris	President, County Police Chiefs Association	Chief Scott Fairfield	Vice President, County Police Chiefs Association					
Community Based Organization	Troy Vaughn	Executive Director, Los Angeles Regional Reentry Partnership	Joseph Paul						
Appointee, Supervisorial District 1	Ivette Alé	Senior Policy Lead, Dignity and Power Now	Fabian Garcia						
Appointee, Supervisorial District 2	Bikila Ochoa	Deputy Director, Anti-Recidivism Coalition	Nicole Brown						
Appointee, Supervisorial District 3	Marisa Arrona	Local Safety Solutions Project Director, Californians for Safety and Justice	Jacky Guerrero						
Appointee, Supervisorial District 4	Jose Osuna	Housing Justice Manager, Brilliant Corners	Kyle Blake						
Appointee, Supervisorial District 5	Josh McCurry	Executive Director, Flintridge Center	Gerald Freeny						
Victim Advocacy Organization	Itzel Bonilla	Program Coordinator, Healing Dialogue and Action							