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**Program, Strategy and/ or System Enhancement**

**FUNDING REQUEST FORM**

Please complete and submit your completed requests to [ceobudget@ocgov.com](mailto:ceobudget@ocgov.com).

<b>Program Name:</b>	Kinship Center		
<b>Total Funding Requested:</b>	\$225,000	<b>Fiscal Year(s) Covered:</b>	2025 12 month budget Provided

**Requesting Entity:** Project Kinship

**Contact Name:** Aaron Reyes      **Phone:** 562-728-3337

**Contact Email:** aaron@projectkinship.org

**Provide the Program Description and Structure.**

*Include the region, area of focus, and involved partners/stakeholders in the description.*

**Introduction:**

Project Kinship (PK) is a cutting-edge, award-winning, community-based agency primarily focused on gang intervention, re-entry services, and restorative practices. Project Kinship staff were among the first in Orange County to be trained in facilitating Restorative Community Conferencing (RCC) by the International Institute of Restorative Practices (IIRP). Project Kinship is deeply committed to fighting for systemic change through dedication and commitment to work in policy and advocacy and has been recognized for both effective and compassionate support for the resocialization of system-involved youth and adults. Since 2014, Project Kinship has experienced rapid growth and earned an excellent reputation for high-quality programming that supports re-entry to schools, the workforce, and the community.

In collaboration with key partners throughout Orange County, Project Kinship has successfully flipped the paradigm of the school-to-prison pipeline and effectively implemented the prison-to-career pipeline. It accomplishes these goals by strengthening families impacted by gangs and incarceration; providing access to supportive and rehabilitative services; offering prevention, intervention, and treatment programming; advocating for system solutions; and training service providers on evidence-based practices and trauma-informed care.

This proven track record of commitment and effectiveness will greatly support and benefit the proposed ***Kinship Center for the JJCPA Program, Strategy and/or System Enhancement funding request.*** Project Kinship will









































































































































































































**JJCPA FY 2022-23 and FY 2023-24 Intervention/Treatment  
Youth City of Residence**

Current City of Residence			Current City of Residence		
	FY 2022 - 23	FY 2023 - 24		FY 2022 - 23	FY 2023 - 24
Aliso Viejo	<12	**	Newport Beach		
Anaheim	171*	176*	North Tustin		
Anaheim Island			Olive		
Big Canyon			Orange	219	54*
Brea	<12	**	Orange Hills		
Buena Park	27	13*	Orange Park Acres		
Costa Mesa	31*	43*	Out of County	<12	12
Coto de Caza			Out of State		
Country Club Island			Placentia	13	**
Covenant Hills			Portola Hills		
Cypress	<12*	**	Rancho Mission Viejo		
Dana Point	<12	**	Rancho Santa Margarita	<12*	**
Dove Canyon			Robinson Ranch		
East Irvine			Rossmoor		
El Modena			San Clemente	<12	12*
Emerald Bay			San Juan Capistrano	<12	**
Fountain Valley	<12	13*	San Juan Hot Springs		
Fullerton	28	16*	Santa Ana	184*	253*
Garden Grove	32*	79*	Santa Ana Heights		
Huntington Beach	23	13*	Santiago Canyon		
Irvine	<12	12*	Seal Beach		
La Habra	13*	<12*	Shady Canyon		
La Palma		**	Silverado		
Ladera Ranch		<12	Stanton	<12	**
Laguna Beach		<12	Stonecliffe		
Laguna Hills		**	Tonner Canyon		
Laguna Niguel	<12	**	Trabuco Highlands	<12	<12
Laguna Woods			Tustin	19*	12*
Lake Forest	<12	12*	Tustin Foothills		
Las Flores			Unknown City	<12	
Los Alamitos	<12		Villa Park	<12	12*
Midway City			Wagon Wheel		
Mission Viejo	<12*	**	Westminster	14	**
Modjeska Canyon			Yorba Linda		**

\* The total reported may be slightly higher because entries marked as "less than 12" were not included in the calculations. This means that numbers below 12 have been omitted, potentially increasing the overall total when considered.

\*\* The total amount is not displayed because there are multiple entries labeled as "less than 12." This means that several entries fall below this threshold, which prevents the total from being accurately calculated and displayed. Without these entries, the sum might not reflect the actual overall count.

## Intervention/Treatment Program Details & Achievements

### Substance Use Programming

**Program Goal**

The main objective of the Substance Use Program is to address underlying substance use issues. By doing this, the program aims to lower the chances of offenders reoffending, thereby preventing further delinquency and the development of adult criminal behavior. Additionally, the program aims to connect youth with ongoing community resources upon their exit from the Youth Guidance Center (YGC).

**Lead Agency and Partners**

**Probation** – Manages integrated case assessment and planning involving unit staff, education staff and collateral resources, assesses academic skills and development of an individualized plan to address skill deficits by a school counselor, and holds monthly case conferences with the youth and treatment team to discuss youth's progress in the program and transition plan for release back into the community.

**Health Care Agency (HCA)** – Provides a range of mental health services including case management, therapy, psychological assessments, and medication support to children and adolescents in Orange County.

**Program Staffing**

	Full Time Equivalent (FTEs)		
	FY 2022-23	FY 2023-24	
	Actuals	Requested	Actuals
Probation	41.2	49.6	28.9
HCA	4.0	4.0	4.0
Total	45.2	53.6	329

**Financial Input**

	Funding Allocation			
	FY 2022-23	FY 2023-24		
	Actuals	Approved Budget	Adjusted Budget	Actuals
Probation	\$ 6,800,442	\$ 6,506,829	\$ 6,491,154	\$ 5,523,849
HCA	527,216	578,920	578,920	549,551
Total	\$ 7,327,658	\$ 7,085,749	\$ 7,070,074	\$ 6,073,400

## Objective & Program Details

Substance Use Programs provide intensive drug and alcohol use intervention for male and female youthful offenders who have custody commitments and a history of drug and/or alcohol use. Treatment is offered through YGC, where individualized treatment plans are geared towards a youth’s specific needs. Programs include Sobriety Through Education and Prevention (STEP) for female youth and Substance Abuse Education and Recognition Treatment (ASERT) for males.

HCA staff at the YGC provide co-occurring mental health treatment and substance use prevention to reduce mental health symptoms, increase coping skills and/or decrease substance use. An important component of these co-occurring services is to link youth to on-going community resources when they exit the YGC.

## Program Achievements

### Program Output

#### **Probation**

While youth are typically referred to YGC by a court order, youth can be referred by other means such as a DPO referral or a recommendation while in custody. Due to the varying referral pathways, it remains difficult to capture a true number of youth referred. While referral information is not captured, the Substance Use Program has remained consistent in program entries and participants compared to the previous year.

### **Youth Enrollment**

	FY 2022 - 23	FY 2023 - 24	Difference
Youth Referred			
Program Entries	99	98	<b>-1</b>
Program Participants	118	117	<b>-1</b>

### **Exiting Youth**

	FY 2022 - 23	FY 2023 - 24	Difference
Exits	98	103	<b>5</b>
Completions	60	41	<b>-19</b>
Not Successful	38	62	<b>24</b>
Partial			
No Progress	<12	15	
Left Program	34	47	<b>13</b>
Avg. Stay (Days)	123	110	<b>-13</b>
Avg. Stay (Months)	4	4	<b>0</b>



Though the total number of completions fell compared to the previous year, this number is dependent upon a youth's time in custody. Youth that were considered "Not Successful" were not in custody long enough to be able to complete the program, however youth participated in the program an average of 42 days.

### Health Care Agency

Oftentimes, youth are discharged prior to completion of treatment with HCA and therefore the exit reason was defined as unrelated to program in FY 2022-23. However, in FY 2023-24, when youth exited, HCA defines successful completion as meeting treatment goals, transitioning to a lower level of care, no longer requiring services, or linkage to other community mental health or substance use providers.

### Youth Enrollment

	FY 2022 - 23	FY 2023 - 24	Difference
Youth Referred	114	74	-40
Program Entries	200	188	-12
Program Participants	137	103	-34

### Exiting Youth

	FY 2022 - 23	FY 2023 - 24	Difference
Exits	126	90	-36
Completions	<12	59	
Not Successful	125	31	-94
Partial			
No Progress			
Left Program	125	31	-94
Avg. Stay (Days)	176	169	-7
Avg. Stay (Months)	6	6	0

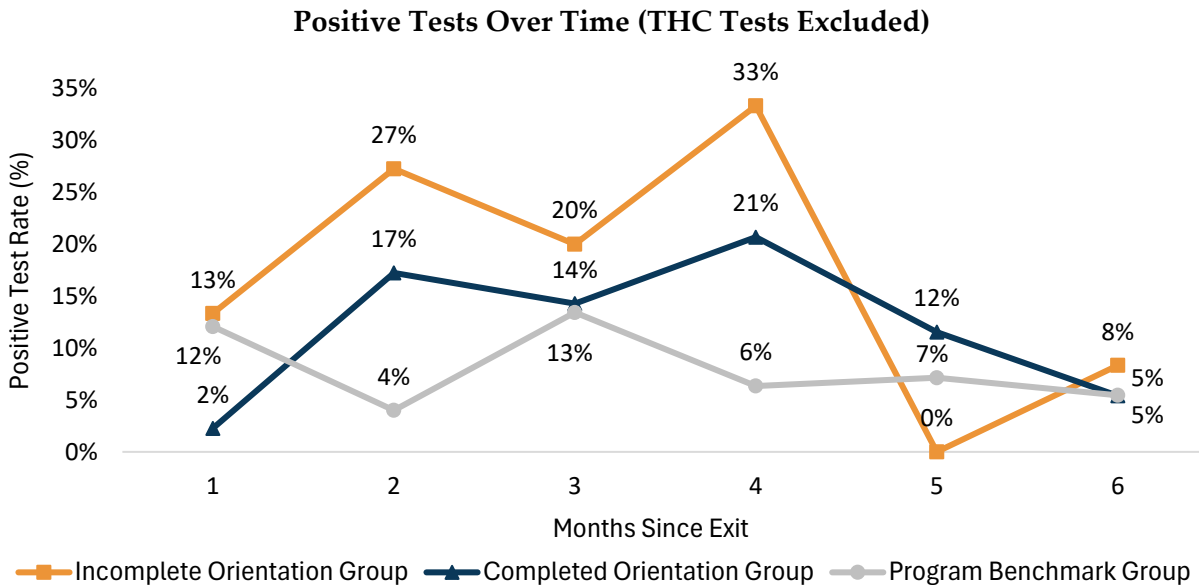
### Program Outcomes

#### Probation

Probation investigated the post-release Drug Testing Results of participants who exited the ASERT/STEP program with a six-month follow up time. 47 participants in ASERT/STEP were released between July 2023 and February 2024. These 47 participants had a total of 607 drugs tests in the six-month follow up period (an average of approximately 13 tests per youth) and were categorized into three groups:

- **Program Benchmark Group:** males who stayed 90 days or more and females who stayed 72 days or more

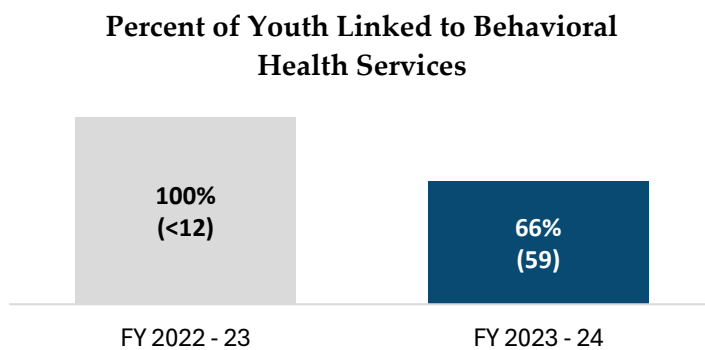
- **Completed Orientation Group:** participants who stayed 30 days or more but didn't reach the benchmark time
- **Incomplete Orientation Group:** participants who stayed less than 30 days



\*This analysis identifies the monthly trend of positive drug test rate after release (excluding THC).

### Health Care Agency

Due to State mandates that resulted in updates being made to HCA's Electronic Health Record (EHR), the full Fiscal Year of data is not currently available and the percentage of linkages is most likely higher than reported given the prior year's trends.



### Success Stories

#### Probation

A youth admitted to the YGC for a third probation violation due to substance abuse embraced the ASERT program, participating in therapy, Narcotics Anonymous, family counseling, and the

Contempo ballet. These experiences provided them with the tools and support needed to confront their addiction and begin their journey toward recovery. The youth completed their high school diploma and a musical theater course, showcasing commitment to personal growth.

### Health Care Agency

A youth at YGC who had a history of complex trauma struggled significantly to get along with peers, follow staff directives and maintain safe behaviors, unfortunately resulting in their receiving additional custody time. After months of consistently participating in behavioral health services, this youth gained perspective and changed their attitude toward recovery. They were assessed for substance use residential treatment and granted an early release from custody on the condition that they remain compliant with behavioral health and substance use disorder treatment services. The youth completed their time in residential treatment, continues to attend outpatient treatment services and is currently employed and taking college courses.

### Challenges and Solutions

#### Probation

- **Shorter Commitments and Unexpected Early Release:** Designed as a 120-day program to help youth with substance abuse issues, early releases limit the effectiveness of the treatment. The first 60 days are crucial for youth to recognize their need for help, making the full duration essential for successful outcomes.
  - A more flexible and intensive model could be a possible solution. This model would prioritize critical components early on, ensuring essential interventions are delivered even in shorter stays. Additionally, advocating for consistent sentencing practices that match the program’s 120-day duration could help maintain its effectiveness.
- **Increased Opioid Addiction:** The rise in youth on Medication Assisted Treatment (MAT) for opioid addiction requires careful coordination with the medical unit to ensure stability before transferring to YGC. However, initiating MAT often causes medical delays, disrupting care continuity and hindering progress in the program.
  - To address this, it’s essential to enhance collaboration with the medical unit. Streamlining the medical clearance process and creating protocols for timely transfers to YGC will help maintain treatment continuity. Additionally, integrating MAT education and support early in the program ensures youth receive necessary care.
- **“Declining” Transfer to YGC:** Despite being assessed by a DPO or requested by the Court to complete the ASERT program, some youth refuse or decline the transfer for several reasons. This reluctance can pose a challenge to their rehabilitation process and the effectiveness of the treatment they need.
  - To encourage youth to transfer, it’s important to increase engagement and education about the ASERT program. This can be done by providing clear information on its benefits, sharing peer testimonials, and involving family members in the decision-

making process. Additionally, offering alternative incentives or support mechanisms could help address their reluctance.

- **Most Serious Charges:** Youth with serious charges and lengthy commitments face challenges when requested by the Court to complete the ASERT program. Security issues arise if these youth, who may not have stabilized in custody, are sent to an open camp environment.
  - To manage youth, prioritization must be placed on enhanced security measures and individualized risk assessments. Tailoring the ASERT program to their unique needs as well as providing extra training and support for staff to handle these complex cases may ensure the program’s safety and effectiveness.

### Health Care Agency

- **Medication Assisted Treatment (MAT):** Youth prescribed MAT for opioid use while in custody experience challenges staying compliant with MAT services, including substance use disorder treatment services, and when released from custody, they often reporting not feeling ready to stop using drugs.
  - Health Care Agency (HCA) clinicians, medical staff with Juvenile Health Services, and probation staff meet regularly to discuss ways to keep youth engaged in substance use disorder (SUD) treatment services while in and out of custody. This support includes communication with youth and their families about scheduled SUD appointments, transportation to SUD appointments, consultation with treatment providers to support continued linkage, psychoeducation and access to Naloxone.
- **Electronic Health Record (EHR) Update:** A state mandate required HCA to update their EHR, which led to a backlog of service data needing to be entered after the fiscal year ended. Therefore HCA was unable to track all linkages as this update impacted all County and contracted programs that youth would transition into upon exiting YGC.
  - This is currently in the process of being resolved

## Youth Reporting Centers

### Program Goal

The Youth Reporting Centers (YRCs) aim to minimize the reliance on secure detention by offering a well-structured, community-based alternative confinement option. Its goal is to encourage lawful and productive lifestyles among students and to link youth to on-going community resources when they exit the YRC.

### Lead Agency and Partners

**Probation** – Regular monitoring of youthful offenders' compliance and success utilizing incentives as included in the Probation Juvenile Incentives program approved by the Board of Supervisors and collaborates between county partners and the OC Department of Education.

**Health Care Agency** – Provides services to youth with severe emotional disturbances and transitional-age youth with serious mental illness which includes case management, therapy, psychological testing, and medication support to children and adolescents, aiming to improve their skills for community functioning and manage the impact of disabilities.

### Program Staffing

Full Time Equivalent  
(FTEs)

	FY 2022-23	FY 2023-24	
	Actuals	Requested	Actuals
Probation	18.7	23.4	13.9
HCA	7.0	7.0	7.0
<b>Total</b>	<b>25.7</b>	<b>30.4</b>	<b>20.9</b>

### Financial Input

Funding Allocation

	FY 2022-23	FY 2023-24		
	Actuals	Approved Budget	Adjusted Budget	Actuals
Probation	\$ 3,206,535	\$ 3,557,866	\$ 3,557,866	\$ 3,317,379
HCA	601,379	659,449	659,449	716,278
<b>Total</b>	<b>\$ 3,807,914</b>	<b>\$ 4,217,315</b>	<b>\$ 4,217,315</b>	<b>\$ 4,033,657</b>

### Objective & Program Details

Youth at the YRC attend a full academic program and participate in afternoon group counseling, individual counseling, and drug testing with an emphasis on obtaining and maintaining sobriety. On-site job coaches assist youth in seeking, obtaining, and maintaining employment and vocational training access.

Additionally, for those YRC youth serving a commitment, the Accountability Commitment Program which runs an average of 40 days in FY 2023-24, offers an alternative to traditional incarceration, allowing youth to complete custodial commitments while participating in educational and support services and being supervised via electronic monitoring.

HCA staff at the YRCs provide mental health and substance use services to reduce mental health symptoms, increase coping skills and/or decrease substance use. An important component of these time-limited services is to link youth to on-going community resources when they exit the YRC. Linking them to this on-going treatment supports their recovery.

### Program Achievements

#### Program Output

##### Probation

The number of youth referred, program entries and program participants rose compared to the previous year and the proportion of those youth successfully completing the program also increased from 59% (161/271) to 68% (222/327).

#### Youth Enrollment

	FY 2022 - 23	FY 2023 - 24	Difference
Youth Referred	301	318	17
Program Entries	290	321	31
Program Participants	314	363	49

#### Exiting Youth

	FY 2022 - 23	FY 2023 - 24	Difference
Exits	271	327	56
Completions	161	222	61
Not Successful	110	105	-5
Partial			
No Progress	99	105*	6
Left Program	<12		
Avg. Stay (Days)	47	45	-2
Avg. Stay (Months)	2	2	0

\* This number was combined with the “Left Program” total due to the value being less than 12

### Health Care Agency

The number of youth referred, program entries and program participants rose compared to the previous year and the proportion of those youth successfully completing the program also increased from 32% (54/171) to 51% (136/267). While these numbers rose, data systems continue to be updated and may not properly represent FY 2023-24 totals.

### Youth Enrollment

	FY 2022 - 23	FY 2023 - 24	Difference
Youth Referred	191	248	57
Program Entries	251	309	58
Program Participants	201	282	81

### Exiting Youth

	FY 2022 - 23	FY 2023 - 24	Difference
Exits	171	267	96
Completions	54	136	82
Not Successful	117	131	14
Partial			
No Progress			
Left Program	117	131	14
Avg. Stay (Days)	63	71	8
Avg. Stay (Months)	2	2	0

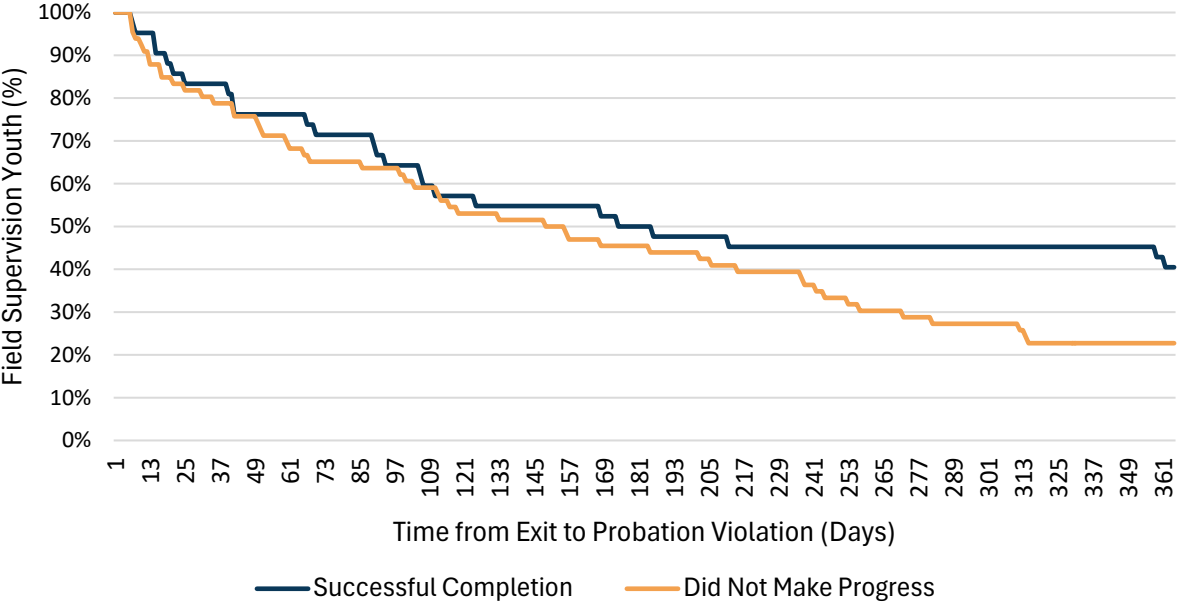
HCA staff at the YRCs offer mental health and substance use services to all youth at the centers, aiming to alleviate mental health symptoms, enhance coping skills, and reduce substance use. A key aspect of these short-term services is connecting youth with ongoing community resources when they leave the YRC and therefore the definition for “Completions” and “Not Successful” may differ compared to Probation.

### Program Outcomes

#### Probation

Outcome data examined youth who exited YRC in FY 2022-23 to allow for up to one-year of follow-up. At the time of reporting, there were 276 exits from YRC in FY 2022-23. Of those 276 exits, 108 were under field supervision. Youth who successfully completed YRC were consistently less likely to get a formal probation violation. At the end of one year, 40.5% of participants that successfully completed YRC did not have a probation violation, compared to 22.7% of participants that did not make progress in the program.

### Field Supervision YRC Youth and Probation Violations



For the 168 youth exiting in FY 2023-24 to the Accountability Commitment Program, they were enrolled for an average of 40 days resulting in a total of 6,735 days not served in secure detention. This enrollment supports the efforts of the YRCs to reduce the use of secure detention of youth and provide greater impact from services including counseling, education and skill building, and relational interventions.

#### Health Care Agency

Due to State mandates that resulted in updates being made to HCA’s EHR, the full fiscal year of data is not currently available and the percentage of linkages is most likely higher than reported given the prior year’s trends.

#### Percent of Youth Linked to Behavioral Health Services





## Success Stories

### Probation

A youth was referred to the YRC by their Probation Officer as an informal sanction instead of a formal court violation. This youth initially experienced issues with curfew, gang association, school attendance, and marijuana use. However, during their time at YRC, school attendance improved, they tested negative for marijuana, and eventually earned their high school diploma. At graduation, the youth thanked their support system for their daily presence.

### Health Care Agency

A youth at the YRC with a history of multiple incarcerations struggled with services and often violated probation, leading to custody. HCA and Probation staff collaborated to support the youth and their family, referring them to a Full-Service Partnership (FSP) program. There they learned healthy coping skills, reduced gang activity, attended school daily, and participated in substance use disorder services. The youth remains engaged with the FSP program and has successfully completed the YRC program.

## Challenges and Solutions

### Probation

- **Staffing Challenges:** There are staffing challenges within the Deputy Probation Correction Officer classification which can impact the day-to-day activities at the YRCs
  - Probation has increased recruitment efforts and implemented a Deputy Probation Correction Officer Pre-Academy.
- **Temporary Site:** The Central YRC is temporarily housed in Anaheim as the new Central YRC site in Santa Ana is under renovation. Since the YRCs provide transportation for youth to and from school, there have been challenges related to picking youth up in South Orange County and driving them to Anaheim.

Probation has implemented work arounds, including starting a transportation route out of the Probation's South County office and temporarily adjusting Deputy Probation Correction Officer's schedules. The new Central YRC site in Santa Ana is scheduled to open in November 2024.

### Health Care Agency

- **Parent Engagement and Involvement:** Families struggle to follow through with initial appointments, to stay engaged in services and report difficulty finding the time to attend follow up meetings with HCA.
  - HCA is considering collaborating with a Community Based Organization to provide additional parent support groups for parents of youth in the YRC program. Additionally, HCA will involve a parent partner in the intake session to emphasize the importance of treatment services and discuss available resources to support the family's needs during their involvement with this program.

- **Electronic Health Record (EHR) Update:** A state mandate required HCA to update their EHR, which led to a backlog of service data needing to be entered after the fiscal year ended. Therefore HCA was unable to track all linkages as this update impacted all County and contracted programs that youth would transition into upon exiting YRC.
  - This is currently in the process of being resolved.

**Juvenile Recovery Court**

**Program Goal**

Juvenile Recovery Court (JRC) is a court-based intervention program for youth with substance use issues who need specialized assistance and treatment services. The primary goals are to increase sobriety and reduce recidivism while reducing the reliance on incarceration.

**Lead Agency and Partners**

**Probation** – Collaborates between county partners reporting to the Probation Officer for progress checks and monitors youthful offenders' success utilizing incentives as included in the Probation Juvenile Incentives program approved by the Orange County Board of Supervisors.

**Health Care Agency (HCA)** – Provides various mental health services, including therapy, assessments, and medication support to children and adolescents, focusing on improving their community functioning and managing their disabilities.

**Public Defender (PD)** – Represents juveniles in the justice system who opt in to participate in this intensive supervision program and ensures that the juvenile’s needs are being met by collaborating with HCA, community partners, OCDA, Probation and the Juvenile Court to help the juvenile attain sobriety, stability, and support in the community and ultimately terminate wardship after successfully completing the program.

**District Attorney (OCDA)** – Manages caseloads and participates in the the JRC.

**Waymakers** – Waymakers Collaborative Courts Full Service Parntership (CCFSP) receives no funding from JJCPA but rather is funded by the Mental Health Services Act in collaboration with HCA. CCFSP provides culturally competent in-home and community based services for youth ages 0-25 struggling with mental illness, truancy and substance abuse issues.

**Program Staffing**

	Full Time Equivalent (FTEs)		
	FY 2022-23	FY 2023-24	
	Actuals	Requested	Actual
<b>Probation</b>	2.2	3.6	1.2
<b>HCA</b>	1.3	1.8	1.3
<b>PD</b>	0.5	0.5	0.1
<b>OCDA</b>	0.4	.05	0.4
<b>Total</b>	<b>4.4</b>	<b>6.3</b>	<b>2.9</b>

**Financial Input**

	Funding Allocation			
	FY 2022-23	FY 2023-24		
	Actuals	Approved Budget	Adjusted Budget	Actuals
Probation	\$ 330,808	\$ 423,531	\$ 423,531	\$ 226,676
HCA	124,109	216,759	216,759	101,332
PD	54,301	45,801	45,801	26,594
OCDA	47,397	98,787	66,340	47,816
<b>Total</b>	<b>\$ 556,615</b>	<b>\$ 784,878</b>	<b>\$ 752,431</b>	<b>\$ 402,418</b>

**Objective & Program Details**

JRC is a collaborative endeavor between the Juvenile Court, District Attorney's Office, Probation Department, Public Defender's Office (and other defense counsel), Health Care Agency, and Waymakers. The JRC program uses a combination of substance use treatment; therapy (individual, group, and family); sanctions; and incentives to rehabilitate youth; empower their families; and prevent reoffending. Program length is dependent upon youth engagement with their services.

The role of the Deputy Probation Officer (DPO) within the JRC collaboration is to monitor progress of the youth within the program, hold the youth accountable through incentives or informal sanctions as needed using an evidence-based approach, administer the drug testing regularly, and provide supervision of the youth in the community. Due to the rapport built with the youths, the DPO has a good understanding of the needs of the youths and can articulate them to the other collaborative partners to ensure the youth's needs are being met by having the right services in place.

HCA assigns a clinician to the JRC collaborative to coordinate all clinical services for youth during their time at JRC. This clinician attends all court sessions and provides updates on therapeutic services to the Court. The primary role of the HCA liaison is case management, ensuring youth are connected to community-based mental health and substance use treatment.

The Waymakers CCFSP offers in-home and community-based services for youth aged 0-25 facing mental illness, truancy, and substance abuse. The program provides comprehensive support through assessment, care planning, case management, and treatment interventions. CCFSP aims to empower youth and their families by promoting recovery, self-efficacy, and social competence across various life domains, ensuring safety and stability at home, school, work, and in the community.

## Program Achievements

### Program Output

#### Probation

Though program participants increased slightly compared to the previous year, average length of stay decreased significantly by an average of four months.

#### Youth Enrollment

	FY 2022 - 23	FY 2023 - 24	Difference
Youth Referred	25	26	1
Program Entries	15	17	2
Program Participants	25	29	4

#### Exiting Youth

	FY 2022 - 23	FY 2023 - 24	Difference
Exits	13	15	2
Completions	<12	<12	<12
Not Successful	<12	<12	<12
Partial			
No Progress	<12	<12	<12
Left Program	<12	<12	<12
Avg. Stay (Days)	397	279	-118
Avg. Stay (Months)	13	9	-4

#### Health Care Agency

The number of youth referred to and participating in the program increased compared to the previous year, leading to more exits. HCA does not provide direct treatment but focuses on linking youth to appropriate treatment services, with successful linkage being a key measure of success for the program.

**Youth Enrollment**

	<b>FY 2022 - 23</b>	<b>FY 2023 - 24</b>	<b>Difference</b>
Youth Referred	12	23	11
Program Entries	12	27	15
Program Participants	25	40	15

**Exiting Youth**

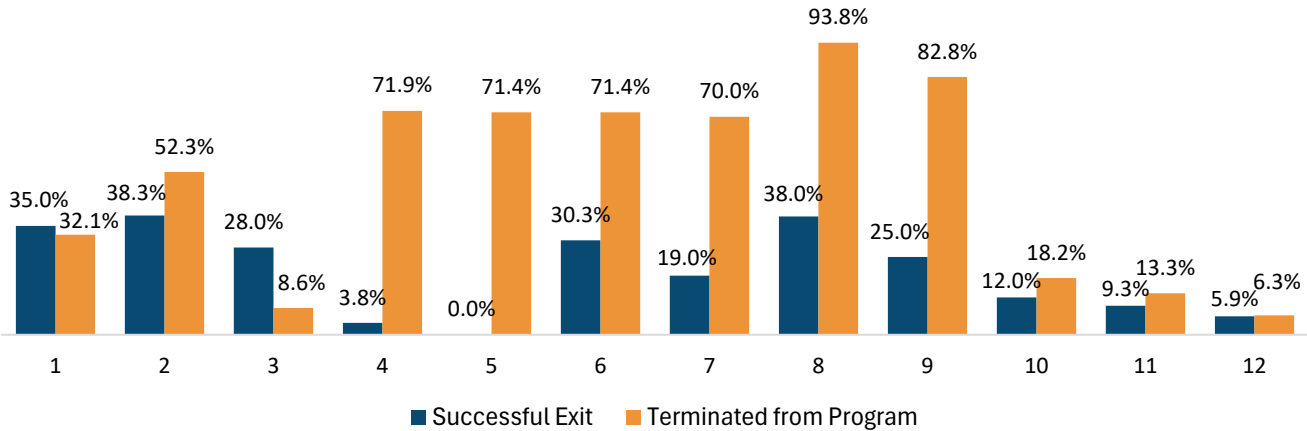
	<b>FY 2022 - 23</b>	<b>FY 2023 - 24</b>	<b>Difference</b>
Exits	<12	31	<12
Completions	0	<12	<12
Not Successful	<12		
Partial			
No Progress			
Left Program	<12	22	<12
Avg. Stay (Days)		371	371
Avg. Stay (Months)		12	12

**Program Outcomes****Probation**

Between July 1, 2022 – June 30, 2024 there were a total of 19 participants that successfully exited or terminated from the program. The sample resulted in a total of 1,329 drug tests. Of the 1,329 drug tests that were administered during JRC participation, 362 were positive and 927 were negative.

For nearly each month, those participants that successfully exited the program had lower positivity rates when compared to those terminated from the program. Regardless of exit type, however, an overall decrease in positive drug test rates was observed over the 12-month period including testing for the use of cocaine, fentanyl, and methamphetamine. In both groups, there was a steady overall decrease in positivity rates following the eight-month mark.

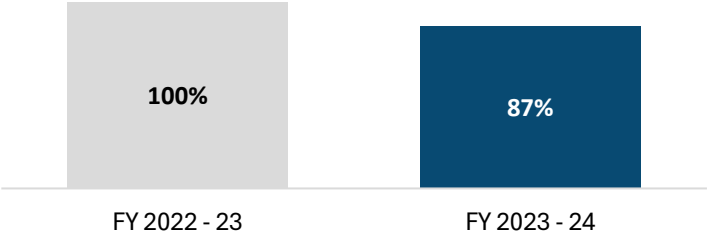
### Positive Drug Test Rates by Month



### Health Care Agency

Due to State mandates that resulted in updates being made to HCA's EHR, the full Fiscal Year of data is not currently available and the percentage of linkages is most likely higher than reported given the prior year's trends.

### Percent of Youth Linked to Behavioral Health Services\*



\*Percentages are only represented in the figure above due to low participant numbers.

### Success Stories

#### Probation

A youth expressed that the services provided by the JRC treatment team taught them not to “sweat the small stuff” and they further reported that their demeanor changed for the better. The youth never denied their struggle with alcohol abuse and understood it was a battle they will deal with daily. The youth graduated from JRC in 2024.

### Health Care Agency

A young participant with a history of complex trauma and limited family support was initially reluctant to accept additional services. The participant struggled with sobriety but eventually accepted behavioral health services both in and out of custody. They actively participated in these services, complied with medication support, attended group activities, and engaged in intensive outpatient treatment. Despite some setbacks, the participant quickly recovered, continued their recovery goals, and is now enrolled in college courses with a consistent support system, having successfully graduated from JRC.

### Challenges and Solutions

#### Probation

- **JRC Referrals:** There continues to be a challenge with referrals for JRC because of the “rigorous” scheduling of the program and the weekly attendance of court proceedings.
  - The team is currently meeting with partners to come up with ideas on how to improve the referrals to the program.
- **Nitrous Oxide (NOS) Use:** There continues to be a concern with NOS use with JRC youth; however, there still hasn't been any testing created to detect the use.
  - The JRC team has continued to build rapport with the youth that has helped the youth to be truthful about the NOS use. The team is still hopeful detection will eventually be available.
- **Lack of Residential Facilities for Youth 17 and Under:** There is an ongoing challenge in finding residential facilities for youth with severe substance abuse issues.
  - To address this, the YGC's ASERT program has been utilized. This program provides a structured environment where youth can focus on their substance abuse issues, learn to identify and manage their triggers, and develop productive plans to address them.

#### Health Care Agency

- **Parent Engagement:** Parent engagement has been a challenge for the JRC program. Very few parents participate in JRC services with the youth, and even fewer are receptive to family resources offered by JRC.
  - HCA supports engagement for parents by calling to remind them of scheduled court proceedings and therapy services. Probation has also added parent interviews to the assessment process to focus on specific family needs and resources.



## Active Recidivism Reduction Initiative via Engagement (ARRIVE)

### Program Goal

The goal of the Waymakers ARRIVE program is to provide restorative justice practices and intervention services that hold youth accountable for their behaviors while encouraging positive change.

### Lead Agency and Partners

**Probation** – Regular reporting and progress checks of youth at risk of reincarceration, attends pro-social activities and offers support for youth and family.

**Waymakers** – Waymakers provides comprehensive support for at-risk youth and their families to reduce recidivism and promote positive development. It offers administrative oversight, therapeutic interventions, and case management services. Refer to Appendix B for additional information on the contract with Waymakers.

### Program Staffing

	Full Time Equivalent (FTEs)		
	FY 2022-23	FY 2023-24	
	Actuals	Requested	Actuals
<b>Probation</b>	0.13	0.7	0.03
<b>Total</b>	<b>0.13</b>	<b>0.7</b>	<b>0.03</b>

### Financial Input

	Funding Allocation			
	FY 2022-23	FY 2023-24		
	Actuals	Approved Budget	Adjusted Budget	Actuals
<b>Probation</b>	312,817	442,551	442,551	448,534
<b>Total</b>	<b>\$ 312,817</b>	<b>\$ 442,551</b>	<b>\$ 442,551</b>	<b>\$ 448,534</b>

### Objective & Program Details

The six-month program aims to support the youth, their families, victims, and the community by addressing criminogenic needs and helping youth complete court-ordered sanctions. By focusing on maximizing strengths, the program seeks to reduce recidivism and promote long-term positive outcomes. The main components of the program include clinical assessment, individual

and family counseling, case management, career and educational support, community service support, and various specialized counseling services.

**Program Achievements**

**Program Output**

This program was only partially operational from in FY 2022-23. Due to its newness, the data for FY 2022-23 is incomplete, and the low number of exits is attributed to the partial year of operation.

**Youth Enrollment**

	<b>FY 2022 - 23</b>	<b>FY 2023 - 24</b>	<b>Difference</b>
Youth Referred	77	128	51
Program Entries	56	84	28
Program Participants	56	117	61

**Exiting Youth**

	<b>FY 2022 - 23</b>	<b>FY 2023 - 24</b>	<b>Difference</b>
Exits	18	84	66
Completions	16	57	41
Not Successful	<12	27	
Partial	<12	<12	<12
No Progress			
Left Program	0	17	17
Avg. Stay (Days)	183	160	-23
Avg. Stay (Months)	6	5	-1

**Program Outcome**

By the end of a the 6-month ARRIVE program, 74% of youth who successfully completed the ARRIVE program in FY 2023-24 showed a decreased risk level or remained low risk to re-offend as measured by the Youth Assessment Screening Instrument (YASI). The YASI was implemented starting on July 1, 2023 and therefore no data exists for FY 2022-23.

**Success Story**

A youth referred to the Waymakers’ ARRIVE Program completed fifteen individual counseling sessions focused on substance use and decision-making. With support from their case manager, they received career guidance and family resources. Through therapy, they identified triggers for their substance use and learned coping skills and self-care. They made positive changes, maintained employment, and avoided further legal issues, leading to successful program

completion. As of 2024, the youth has reported doing well, securing full-time employment, and having no new violations.

### Challenges and Solutions

- **Waitlist:** In FY 2023-24, ARRIVE received 128 referrals for the 50 slots. 84 of 128 were enrolled into the allowed 50 contracted slots. At times there is a waitlist to enroll in ARRIVE services because the need is greater than the staffing pattern.
  - Hiring an additional Clinician would reduce the waitlist time and allow for more referrals to meet the need. Probation is tracking referrals from the South County, North County, and Santa Ana Offices to ensure all Probation-involved youth have the same opportunities.
- **Adult Participation:** A bulk of youth's parents did not want to participate in services but the youth was willing.
  - The main component for parent participation is the Parent Project (10-week course) and/or family therapy. The program continues to offer all services to the Parents and makes every effort to engage the parents in the treatment plan and positively reinforce progress. Moving forward, data will continue to be collected for parents who participate, but will not be a required outcome for youth to be successful.
- **6-Month Time Limit:** The program could offer additional impact on decreasing the risk level for youth to re-offend
  - Proposal of expanding the program limit from 6 months to 1 year, to build rapport, engage, practice skills and maintain change. Expanding the program timeframe would most likely require an additional Case Manager and Clinician to reduce the waitlist.

## Appendix

### Appendix A – Contracted Services with Pepperdine University

#### Pepperdine University

Programs	Contracted with	Contract # and Term	Annual Amount	FY 2023-24 Actuals	Metrics Included?
Decentralized Intake/Sheriff's Prevention Program (PRYDE)	Sheriff-Coroner	MA-060-21011079 07/01/2021 - 06/30/2025	\$ 394,393	\$ 394,939	Yes

<b>PRYDE Staffing</b>	<b>FTE</b>	<b>Duties</b>
Program Manager & Psychologist (50/50%)	<b>1.00</b>	Program Management, Clinical Training, Clinical Supervision
Psychologist	<b>0.10</b>	Clinical Supervision
Administrative Diversion Specialist	<b>1.50</b>	Administrative support for all PRYDE staff, front desk, phones, filing, scanning, shredding, office management
Senior Diversion Specialist	<b>1.00</b>	Provides supervision and mentoring of Diversion Specialists, assessment and counseling services.

FTE = Full Time Equivalent

## Appendix B – Contracted Services with Waymakers

### Waymakers

Programs	Contracted with	Contract # and Term	Annual Amount	FY 2023-24 Actuals	Metrics Included?
Active Recidivism Reduction Initiative via Engagement (ARRIVE)	Probation	MA-057-22011069 05/01/2022 - 04/30/2025	\$ 329,882	\$ 311,784	Yes

PRYDE Staffing	FTE	Duties
Program Director	0.15	Oversees program operations, direct service staff, interns, and administrative functions, including case management, grant writing, contract monitoring, and community partnerships.
Bilingual Licensed Clinician	1.00	Provides therapeutic interventions for at-risk youth, including individual and family counseling, crisis support, and restorative justice practices, aiming to reduce recidivism and improve family dynamics.
Bilingual Case Manager	2.00	Coordinates services for youth and families, supports goal achievement, and promotes caregiver and youth engagement in the program and community, ensuring that care addresses both cultural and language needs.

FTE = Full Time Equivalent

## Appendix C – Links to Resources

### Council/Subcommittees:

- **Orange County Juvenile Justice Coordinating Council**  
<https://ocprobation.ocgov.com/communications/committees/orange-county-juvenile-justice-coordinating-council>
- **SB 823 Subcommittee of the Orange County Juvenile Justice Coordinating Council**  
<https://ocprobation.ocgov.com/page/sb-823-subcommittee-orange-county-juvenile-justice-coordinating-council>

### SB 823 Juvenile Justice Realignment:

- **Senate Bill 823 - DJJ Realignment Implementation**  
[https://www.bscc.ca.gov/s\\_djjrealignment/](https://www.bscc.ca.gov/s_djjrealignment/)
- **Orange County’s Juvenile Justice Realignment Block Grant County Plan**  
<https://ocprobation.ocgov.com/communications/committees/orange-county-juvenile-justice-coordinating-council>

### Juvenile Justice Crime Prevention Act (JJCPA):

- **Juvenile Justice Crime Prevention Act and the Youthful Offender Block Grant Program**  
[https://www.bscc.ca.gov/s\\_jjcpayobgjuvjuscrimeprevact/](https://www.bscc.ca.gov/s_jjcpayobgjuvjuscrimeprevact/)
- **Board of State and Community Corrections 2023-2024 County JJCPA-YOBG Plans**  
<https://www.bscc.ca.gov/2023-2024-county-jjcpa-yobg-plans/>
- **Orange County’s JJCPA-YOBG Plan**  
<https://ocprobation.ocgov.com/communications/committees/orange-county-juvenile-justice-coordinating-council>