

SUMMARY ACTION MINUTES

SPECIAL MEETING ORANGE COUNTY COMMUNITY CORRECTIONS PARTNERSHIP

Thursday, December 19, 2013, 2:00 P.M.

PROBATION DEPARTMENT
Training Room 5
1001 S. Grand Ave.
Santa Ana, California

STEVE SENTMAN, Chair
Chief Probation Officer

MARY HALE
Health Care Agency

SANDRA HUTCHENS
Sheriff-Coroner

FRANK OSPINO
Public Defender

TONY RACKAUCKAS
District Attorney

KEVIN RANEY
Chief of Police, Garden Grove

ATTENDANCE: Members Hale, Hutchens, Ospino, Raney, Sentman and Yonemura (Alternate for Rackauckas)

EXCUSED: Member Rackauckas

COUNTY COUNSEL: Wendy Phillips, Deputy

CLERK OF THE PARTNERSHIP: Jamie Ross & Dora Guillen, Deputy Clerks

ADMINISTRATIVE MATTERS: (Items 1 - 7)

1. Welcome and Introductions

PRESENTED

2. Discussion of survey submitted to Board of State and Community Corrections (BSCC) in order to satisfy report requirement and to allocate funds as outlined in the Budget Act of 2013

DISCUSSED

3. Discussion and approval of 2013 Public Safety Realignment Update Report

2513467 **APPROVED AS RECOMMENDED TO INCLUDE AMENDMENTS DISTRIBUTED AT**
x **MEETING**

4. Approve sending a delegation of Orange County Representatives to the California Forward Convening occurring on January 23, 2014

1723456 **APPROVED AS RECOMMENDED**
x

SUMMARY ACTION MINUTES

5. Discussion and approval of canceling or rescheduling 1/23/14, Regular Meeting
5712346 **APPROVED CANCELATION OF 1/23/14, REGULAR MEETING. NEXT MEETING TO**
x **BE HELD 2/27/14, 2:00 P.M.**
6. Discussion of a Spring “Realignment” Summit
DISCUSSED; SUBCOMMITTEE TO BE FORMED TO ORGANIZE SUMMIT AND FIND
LOCATION; ITEM TO BE AGENDIZED FOR NEXT MEETING FOR FURTHER
DISCUSSION
7. Realignment Updates:
- Probation
 - Sheriff
 - District Attorney
 - Public Defender
 - Courts
 - Health Care/Mental Health
 - Local Law Enforcement
 - Board of Supervisors
 - Social Services
 - OC Community Resources
 - OC Department of Education
 - Community-Based Organization (Representative)
 - CSP (Victims Representative)
- DISCUSSED; SUPERVISOR SPITZER REQUESTED TO ADD TO TOPICS OF SPRING**
REALIGNMENT SUMMIT: MEASURING IMPACTS OF AB 109, CHANGES
NECESSARY TO COMMUNICATE TO LEGISLATURE FOR REFORM, AND
POSSIBILITY FOR POTENTIAL LITIGATION

PUBLIC & PARTNERSHIP COMMENTS:

PUBLIC COMMENTS: None

PARTNERSHIP COMMENTS:

Member Sentman – Oral Re.: Attended Statewide Probation Chiefs’ meeting; extension given to State by three judge panel; and wished everyone a Merry Christmas and Happy Holidays.

ADJOURNED: 2:44 P.M.

SUMMARY ACTION MINUTES

*** KEY ***

Left Margin Notes

1 Mary Hale	A = Abstained
2 Sandra Hutchens	X = Excused
3 Frank Ospino	N = No
4 Tony Rackauckas	P.O. = Partnership Order
5 Kevin Raney	
6 Steve Sentman	
7 Steve Yonemura	

(1st number = Moved by; 2nd number = Seconded by)

/s/ _____
STEVE SENTMAN
Chair

/s/ _____
Jamie Ross, Deputy
Clerk of the Partnership



Orange County Public Safety Realignment and Postrelease Community Supervision:

2013 Update Report

**Prepared by:
Orange County Community Corrections Partnership**

ACKNOWLEDGEMENTS

The Orange County Community Corrections Partnership Executive Committee contributed to the content of this Public Safety Realignment 2013 Update report prepared by the OC Probation Research Division. Special thanks goes to the following Orange County agencies: Probation Department, Sheriff's Department, District Attorney's Office, Public Defender's Office, Superior Court, Health Care Agency and the Garden Grove Police Department. Thanks goes to County Counsel, OC Probation Public Information Officer and Postrelease Community Supervision Division Director and Assistant Director for their review of the content in this report. Thanks also go to Behavior Incorporated, a GEO Group Company (BI Inc.) for their contributions to the section on the Day Reporting Center.



Community Corrections Partnership Executive Committee

Steven J. Sentman, Chief Probation Officer (Chair)

Sandra Hutchens, Sheriff

Tony Rackauckas, District Attorney

Frank Ospino, Public Defender

Mary Hale, Health Care Agency

Kevin Raney, Chief, Garden Grove Police Department

As approved by the Executive Committee of the Community Corrections Partnership



Table of Contents

Orange County Public Safety Realignment Report: 2013 Update

I.	Executive Summary	4
II.	Realignment Key Elements	5
III.	Realignment in Orange County	6-7
IV.	OC Realignment Funding.....	8-10
V.	Sheriff's Department	11-15
VI.	Local Law Enforcement	16
VII.	Superior Court.....	16
VIII.	District Attorney (OCDA)	17-19
IX.	Probation (OC Probation)	20-32
X.	Public Defender (OCPD)	33-35
XI.	Health Care Agency (HCA)	36-49
XII.	Recidivism: New Crime Convictions.....	50-52
XIII.	Glossary	53
XIV.	Realignment-Related Links.....	54
XV.	Appendix: Realignment-Related Documents	55-59



I. Executive Summary

INTRODUCTION:

In an effort to address overcrowding in California's prisons and assist in alleviating the state's financial crisis, the Public Safety Realignment Act (Realignment), pursuant to AB 109, was signed into law on April 4, 2011 and took effect October 1, 2011. Realignment made some of the largest and pivotal changes to the criminal justice system in California. Generally speaking, Realignment transferred the responsibility of supervision to the 58 counties for felons (excluding high risk sex offenders) released from prison whose commitment offenses are statutorily defined as non-serious and non-violent. Offenders convicted after October 1, 2011 who have no current or prior statutorily defined serious, violent, or sex-offending convictions are to serve time locally (regardless of length of sentence) with the possibility of community supervision in place of time spent in custody.

Realignment established the Postrelease Community Supervision (PCS) classification of supervision, altered the parole revocation process with more responsibility in local jurisdictions, gave local law enforcement the freedom to manage offenders in a more cost-effective manner and charged the Community Corrections Partnerships (CCPs) with planning and implementing Realignment in their community as of October 1, 2011. Effective July 1, 2013, parole violations are housed, prosecuted and tried locally. This legislation created an unprecedented opportunity for all 58 California counties to determine an appropriate level of supervision and services to address both the needs and risks of individuals released from prison and local jails into the community. With the passage of Proposition 30 in 2012, Realignment is ensured a continuous source of funding. For fiscal year 2013-14 Orange County has been allocated 6.7 percent of the total appropriated by the legislature for Realignment.

As of September 30, 2013, there have been 3,240 individuals released to PCS and 1,633 sentenced to Mandatory Supervision (MS) in Orange County. Nearly all departments in the CCP had to increase staff to address the needs and legal mandates of the PCS, MS and Parole Violation offender populations. Collaborations between departmental agencies have fostered successes in treating all aspects of an offender's needs to reduce the likelihood of reoffending. Realignment data for Orange County demonstrate the vast majority of the three offender groups supervised by the Orange County Probation Department (OC Probation) have not had convictions for new crimes within one year of release from custody or adjudication of their case: 76% of Probationers, 73% of PCS, and 69% of MS have no convictions for new crimes within one year.

OC Probation, Health Care Agency (HCA) and community-based organizations work closely with each other to link offenders to necessary resources including treatment and employment services. With the implementation of the Sheriff's Department's Transition from Jail to Community (TJC) program, assessments are used to identify offenders likely to recidivate and resources are targeted to meet their needs in a community setting that serves as a cost-effective alternative to incarceration. The CCP will continue to collaborate and incorporate best practices across agencies in order to address the needs of the Realignment population and protect the community.



II. Realignment Key Elements

➤ **Redefined Felony Sentencing:** Individuals convicted of certain felonies on or after October 1, 2011 may be sentenced to Orange County Jail for more than 12 months. Individuals sentenced under PC § 1170(h) can receive a sentence that falls within a low, middle or upper term of incarceration based on their specific offense. Some felony offenses- serious, violent and sex offenses- are excluded from sentencing under 1170(h) and such offenders will serve their sentences in state prisons. Pursuant to 1170(h) an individual convicted of a non-serious, non-violent, non-sex offense may be sentenced to serve that entire time in county jail, or may be sentenced to serve that time split between county jail and mandatory supervision. Offenders sentenced to MS are also the responsibility of the OC Probation.

➤ **Postrelease Community Supervision:** Those released from state prison on or after October 1, 2011 who had been incarcerated for a non-serious offense, pursuant to Penal Code (PC) § 1192.7(c), a non-violent offense, pursuant to PC § 667.5(c), or a sex offender deemed not high-risk, as defined by California Department of Corrections and Rehabilitation (CDCR), were released to a local jurisdiction based on their county of residence for supervision under PCS. These individuals may have prior violent or serious offenses, or be registered sex offenders. Supervision of these offenders is not to exceed three years.

➤ **Custody Credits:** With the enactment of Realignment, PC § 4019 was amended to allow for those sentenced to county jail to receive pre and post-sentence conduct credit of two days for every four days actually spent in custody; resulting in sentences being served more quickly if the inmate receives the maximum conduct credits. This is the same conduct credit offenders receive when serving time in state prison.

➤ **Alternative Custody Program:** SB 1266 allows for non-serious, non-violent and non-sex offenders to serve part of their sentence in a non-custodial facility such as a residential home, non-profit drug-treatment program or transitional-care facility. Alternative custody is an integral part in reintegrating these individuals back into their community.



III. Realignment in Orange County

Community Corrections Partnership

Senate Bill 678 required each county to establish a “Community Corrections Partnership” (CCP). This collaborative group chaired by the Chief of Probation is charged with advising on the implementation of SB 678 funded initiatives and now Realignment programs. Realignment tasked the CCP to develop and recommend a realignment plan for consideration and adoption by the Board of Supervisors (the Board). The OCCCP original plan required by Realignment was adopted by the Board in December of 2011.

Chaired by the Chief Probation Officer, the OCCCP oversees the realignment process and advises the Orange County Board of Supervisors in determining funding and programming for the various components of the plan. The OCCCP includes an executive committee which pursuant to bylaws adopted by the OCCCP consists of the following voting members: the Chief Probation Officer; the County Sheriff; the District Attorney (OCDA); a Chief of Police; the Public Defender (OCPD); and the Director of County Social Services or Mental Health or Alcohol and Drug Services (as determined by the Orange County Board of Supervisors). The original Public Safety Realignment Plan, along with the update, was developed by OCCCP members, their designees, and other key partners.

For more information on Community Corrections Partnership Plans throughout California, please visit the Board of State and Community Corrections website (<http://www.bscc.ca.gov/board/realignment-resources/community-corrections-partnership-plans>).

2013 Public Safety Realignment Update

This document is intended to serve as an update to the initial implementation plan and the 2012 update previously released. Whenever possible, figures that are noted in this report will cover the one-year period between September 2012 and September 2013. An overview of the practices and programs utilized to improve services and outcomes for postrelease individuals and the community is also included in this report. Previous years’ reports can be found on the Postrelease Community Supervision page of the OC Probation website (<http://ocgov.com/gov/probation/prcs>). The OCCCP presents this 2013 update on the progress of Realignment efforts in the County of Orange.



Public Information on Realignment

Public Information and Education Efforts

In an effort to keep residents of Orange County informed on Public Safety Realignment in their community, OC Probation provides monthly and cumulative statistics relevant to the PCS population in Orange County. This information may be found on the OC Probation website under “Postrelease Community Supervision” (<http://ocgov.com/gov/probation/prcs>).

To date, there have been approximately 120 presentations to local law enforcement, community groups and colleges within Orange County. Check the OC Probation website (<http://ocgov.com/gov/probation/prcs>) for more information.

Topics discussed at these educational forums have included:

Topic
What Public Safety Realignment Is/Isn't
Impact of Public Safety Realignment on Orange County
The “Community Corrections Partnership and Its Purpose
Enforcement, Supervision Program, Rehabilitative Strategies
Realignment Challenges/Needs/Gaps
What Works in OC Re-Entry Management
Building Sustainable Collaboration and Community Partnerships
Overall Reduction in Recidivism Action Plan



IV. OC Realignment Funding

Fiscal Year (FY) 2012-13 Funding

The funding formula adopted by the state for the first year of Realignment (FY 2011-12) was a unique formula that was intended to fund counties' Realignment costs for the period of October 1, 2011 through June 30, 2012. For FYs 2012-13 and 2013-14, the funding formula applied by the state for purposes of allocating funds to the 58 counties was developed by a committee comprised of members from the California State Association of Counties (CSAC), the County Administrative Officers (CAO) and the Department of Finance. This committee reviewed the existing funding formula and made a proposal to the Governor for funding Realignment. The Governor adopted the allocation framework recommended by CSAC/CAO for FYs 2012-13 and 2013-14.

According to CSAC/CAO, the adopted funding framework is designed to yield the "best result" for each county among several options considered, including the current allocation formula, an allocation adjusted based on a county's share of California adults ages 18 to 64, or an allocation adjusted based on a weighted average of the daily Realignment population. CSAC/CAO plans to revisit the funding methodology for FY 2014-15 and beyond.

Based on the current funding methodology, Orange County is allocated 6.6797% of the total state appropriation of Realignment funding. For FY 2012-13 this resulted in \$56.3M in Realignment funds for Orange County and approximately \$66.7M for FY 2013-14.

In addition, for FY 2012-13, the state allocated \$200,000 in one-time monies to the Orange County Community Corrections Partnership (OCCCP) for planning purposes. The OCCCP and Board of Supervisors (the Board) have authorized the use of this one-time money to fund research and training related to Realignment.

FISCAL YEAR 2012-2013 FUNDS

PCS/Local Incarceration	\$56,302,998
Realignment Planning Grant (one-time funds)	\$200,000
OCDA/OCPD (PCS representation)	\$954,166
Total	\$57,457,164



Fiscal Year 12-13 Funding, a Closer Look

The \$56.3M in funding allocations approved by the CCP and Board of Supervisors are consistent with the methodology for allocation of the funds used in FY 2011-12, with two exceptions: 1) Although OC Probation was allocated the same net amount (\$14M) as the previous fiscal year, the allocation was only 25% of the \$56.3M, as compared to 29% of the total allocation in the prior fiscal year. The \$14M enabled the Department to phase-in increased staffing and new evidence-based programming; 2) The total amount allocated to local law enforcement in FY 2012-13 was \$1,689,090, which included \$701,943 of unspent carryover monies from FY 2011-12.

The net changes in the allocation percentages noted above resulted in an unallocated balance of \$2.6M for FY 2012-13, which was allocated on a one-time basis and is detailed below.

Department	FY 12-13 Allocation	FY 12-13 Revenue	FY 12-13 Year-End Expenditures	Variance/ Expenditure to Revenue	Funds Available for Reallocation	Allocation of Unspent Funds	Year-End Shortfall
Postrelease Community Supervision (PCS)/ Local Incarceration							
Sheriff	27,040,078	27,042,423	44,128,426	(17,086,003)	-	6,314,923	(10,771,080)
Probation	14,346,340	14,346,053	9,346,163	4,999,890	4,999,890	-	N/A
HCA (In-Custody)	6,178,691	6,176,460	9,045,279	(2,868,819)	-	1,741,832	(1,126,987)
HCA (Post-Custody) [2]	5,067,270	5,067,287	3,314,370	1,752,917	1,741,832	-	N/A
Local Law Enforcement [1]	1,730,741	1,732,292	1,314,648	417,644	417,644	-	N/A
Total PCS/Local Incarceration	54,363,120	54,364,515	67,148,886	(12,784,371)	7,159,366	8,056,755	(11,898,067)
One-time Funds							
Sheriff	841,821	844,548	-	844,548	844,548	N/A	N/A
Health Care Agency (Risk Pool/Stop Gap)	1,300,000	1,300,604	20,000	1,280,604	N/A	N/A	N/A
District Attorney [1]	332,020	329,754	329,754	-	-	N/A	N/A
Public Defender	250,000	247,734	194,893	52,841	52,841	N/A	N/A
Community Corrections Partnership	200,000	200,000	853	199,147	N/A	N/A	N/A
Total One-time Funds	2,923,841	2,922,640	545,500	2,377,140	897,389	N/A	N/A
Subtotal Allocations/ Expenditures	57,286,961	57,287,155	67,694,386	(10,407,231)	8,056,755	8,056,755	(11,898,067)
District Attorney/ Public Defender PCS Representation [1]							
District Attorney	851,183	851,183	303,285	547,898	N/A	N/A	N/A
Public Defender	772,680	772,440	351,471	420,969	N/A	N/A	N/A
Total DA/PD PCS	1,623,863	1,623,623	654,756	968,867	N/A	N/A	N/A
Total Allocations/ Expenditures	58,910,824	58,910,778	68,349,142	(9,438,364)	8,056,755	8,056,755	(11,898,067)

NOTE:

[1] FY 12-13 Allocation, Revenue and Expenditure amounts include FY 11-12 carryover

[2] At year end there was a difference of \$11,085 between the accrued expense claim and the actual expense claim. The due to timing the remaining \$11,085 was not redistributed to cover shortfall and will carryover to FY 13-14.



FY 2013-2014 Funding Plan

As discussed, the funding formula adopted by the state in FY 2012-13 remained the same for FY 2013-14. Although the percentage allocated to Orange County remained constant (6.7%) the total appropriation from the state for Realignment was increased such that Orange County's share is \$66,723,523. OCCCP's proposed allocation of the FY 2013-14 amount, which was also approved by the Board, remained consistent with the methodology previously used by the OCCCP, with three exceptions: 1) 26% was allocated to the Probation Department resulting in \$17,300,913 in funding, which was approximately \$3 million more than OC Probation received in FY 2012-13; 2) The Sheriff received a slightly enhanced allocation of 49% compared with 48% in the previous fiscal year; 3) The total percentage allocated to local law enforcement is approximately 1% of Orange County's total funding, which is equivalent to \$565,048. This is a reduction from the 3% allocated in FY 2012-13; however, changes in funding directly to the Cities from the State to cover expenses related to this population should offset this reduction.

The net changes in the allocation percentages noted above resulted in an unallocated balance of \$2,686,664, which is allocated on a one-time basis, and is detailed below.

The FY 2013-14 funding allocations may be adjusted as needed, to ensure adequate funding for each county department. Any changes to the allocations will be presented to the OCCCP and the Board for approval.

FY 2013-14 PCS/Local Incarceration Allocation	
Orange County Sheriff's Department	\$32,608,876
Probation Department	\$17,300,913
Health Care Agency (HCA) (in-custody treatment)	\$7,451,168
Health Care Agency-(HCA) (post-custody treatment)	\$6,110,854
Local Law Enforcement	\$565,048
Total PCS/ Local Incarceration Allocation	\$64,036,859
FY 2013-14 One-time Allocation	
Sheriff's Department Additional In-custody costs)	\$936,664
HCA(Risk Pool/Stop Gap Insurance)	\$250,000
District Attorney (Realignment Services)	\$750,000
Public Defender (Realignment Services)	\$750,000
Total One-time Allocation	\$2,686,664
OC TOTAL ALLOCATION	\$66,723,523
District Attorney/Public Defender (PCS representation)	\$1,116,989
Community Corrections Partnership (one time funds)	\$200,000
Total FY 2013-14 Allocation	\$68,040,512



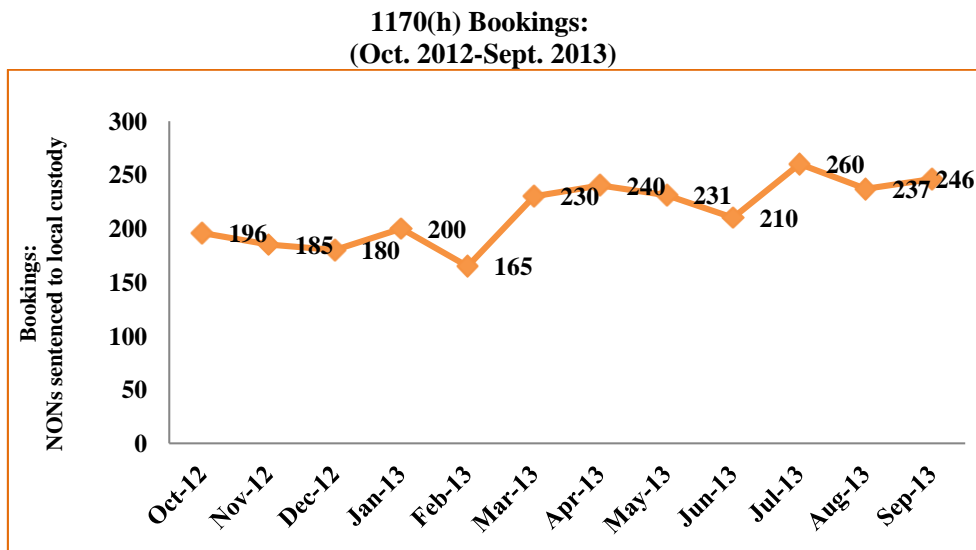
V. Sheriff's Department (OCSD)

OCSD Custody Population

OCSD's Realignment inmate population as discussed in this report is comprised of several categories which include 1) individuals convicted of a felony 2) individuals with PCS violations serving up to 180 days 3) individuals with violations of state parole serving up to 180 days and 4) PCS individuals that have been sanctioned with a flash incarceration up to 10 days for each violation. The figures discussed below cover the period of October 2012 through September 2013.

Local Custody: 1170(h) Population

The OCSD must meet the needs of a growing local jail population due to a continued increase in offenders being booked through OC jail facilities. The chart below shows the monthly bookings of 1170(h) offenders sentenced to local custody in Orange County.



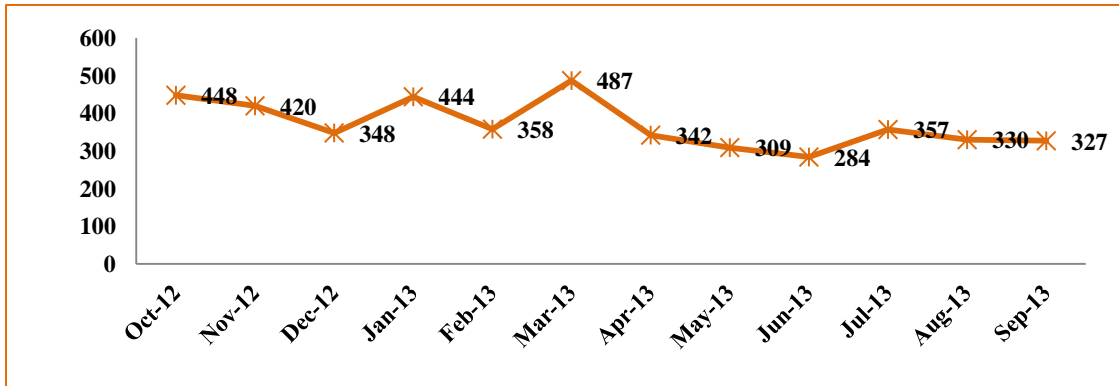


One-Year Trends: PCS and Parole

Bookings

The constant churn of Realignment inmates booked and released into the system translated into an average daily population (ADP) increase of just under 1,000 inmates for the period of October 2012 through September 30, 2013; this is a 29 percent increase from the previous year's ADP average of 777 Realignment inmates. The chart below covers one year of the PCS population's bookings on flash incarcerations, new charges and PCS revocations.

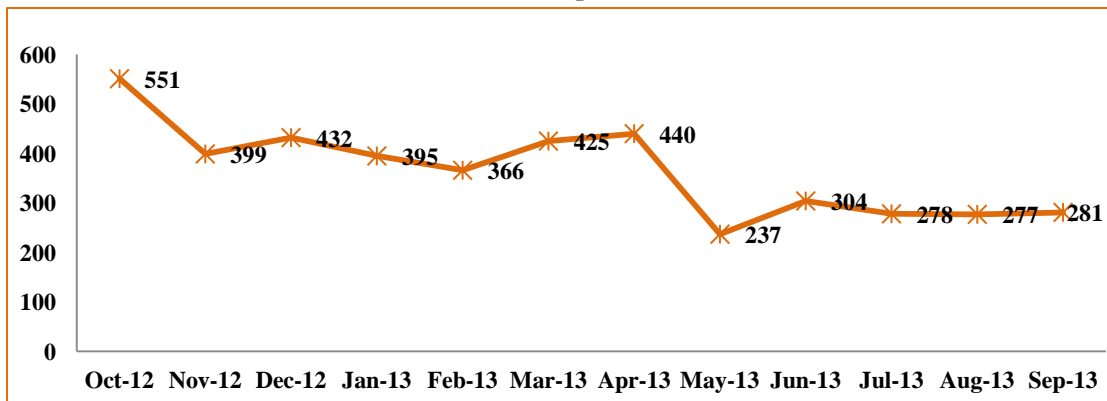
PCS Jail Bookings
(Oct. 2012 - Sept. 2013)



Parole Violation Trends

The sentencing protocols for parole violators changed mid-2013, and local jurisdictions now have a greater say in the length of time parole violators are sentenced to the county jail. Effective July 1, 2013 the Superior Court took responsibility for conducting parole violation hearings. In the first three months, since July of this year, parole violations decreased by roughly 45 percent. It is premature to make a determination as to the lasting effects, if any, that this change has as it relates to the average length of stay, however, the reduction in number of bookings thus far has been an unanticipated phenomenon. In the future, there may also be certain portions of the Realignment population that may level off as newly sentenced inmates come into the system and concurrent numbers are released.

Parole Violation Bookings
(Oct. 2012 - Sept. 2013)





OC Jail Facilities

Existing County Jails

The OCSD currently operates five jails: the Intake Release Center (IRC) and four additional housing jails (IRC; 903 bed-capacity, Theo Lacy Facility; 3,442 bed-capacity, Central Men's Jail; 1,433 bed-capacity, Central Women's Jail; 388 bed-capacity, and James A. Musick Facility; 1,322 bed-capacity). The Central Women's Jail, a portion of the Men's Jail, and the north compound of the James A. Musick Facility were previously closed due to a low jail census; however, the increase in the Realignment inmate population required the OCSD to open both housing areas to accommodate the myriad of housing and classification challenges that followed. The overall jail population varies from day to day and spikes on weekends/holidays. OCSD jails, on average, are at 92 percent capacity. Considering separation issues and jail beds unavailable due to renovation or remodeling, the number of available usable beds are often less than three percent.

OC Facilities (92% average capacity)	Existing Bed- Capacity
Intake Release Center	903
Theo Lacy	3,442
Central Men's Jail	1,433
Central Women's Jail	388
James A. Musick Facility	1,322 (+824 beds future expansion) = 2,146

Jail Expansion

As part of its effort to mitigate the impact of the Realignment inmate population increase on California counties, the State, by way of AB 900, created a competitive grant source for expansion and/or construction of new jail facilities. The OCSD entered into the grant application process, and on March 8, 2012, the Corrections Standards Authority (CSA) recommended that Orange County receive a conditional grant award of \$100 million for expansion of the Musick Facility in Irvine. CSA required the county to provide a 10 percent match; however, they allowed the value of the land to mitigate that requirement. OCSD was awarded the \$100 million grant via AB 900 and is currently in the design phase of a 512 bed expansion project at the James A. Musick Facility. OCSD recently applied for another \$80 million grant via SB 1022 for an additional expansion to the Musick Facility as part of a rehabilitation program which would add an additional 312 beds.

Financial Resources

With the opening of the Central Women's Jail, all areas of the Central Men's Jail, and the north compound at the James A. Musick Facility, as well as the human resources dedicated to serving the needs of the Realignment population, the OCSD has dedicated a significant portion of its resources to maintaining public safety. Medical services, education and treatment programs, post-custody programs, and alternative to custody programs are still evolving and will take several years to take hold. Additionally, the construction of new facilities has not yet broken ground and it is anticipated that the earliest inmates will be able to occupy them is 2018. Governor Brown took steps to ensure a dedicated funding source would be developed and funding was secured in 2012 with the passage of Proposition 30; however inmate program and treatment costs may exceed that funding.



Alternatives to Incarceration

During the first two years of Realignment, the focus of the OCSD was on adapting personnel and resources to the new paradigm, creating systems of inter-agency operability, developing record-keeping systems, and managing an increasingly complicated and diverse inmate population. As a member of the OCCCP and the Orange County Re-entry Partnership (OCREP), the OCSD was committed to finding alternative solutions to the incarceration and recidivism of inmates.

Community Work Program (CWP)

Over the past two years, the OCSD has used a combination of methods to manage the increase in inmate population. The most notable change is the expansion of inmates assigned to the Community Work Program (CWP). The CWP is an alternative to incarceration that allows sentenced offenders to serve their time by working on municipal work crews often providing janitorial or landscaping services at county buildings and parks. The offender is allowed to live at home but must report to a predetermined worksite location as part of a crew. Every workday completed is considered a day of service towards the offender's sentence. Failure to follow the stringent rules (curfew, avoiding substance abuse etc.) will result in a return to custody where he/she will serve the remainder of his/her sentence. OCSD screens inmates for suitability and has the discretion to add or remove the offender from the program at any time. To manage the increased number of inmates assigned to CWP, OCSD dedicated resources to expanding a CWP Compliance Team comprised of deputies who conduct welfare and compliance checks on inmates serving time in the CWP. This includes work site and home inspection checks.

Electronic Monitoring Program (EMP)

In addition to the CWP, the OCSD has worked to establish an Electronic Monitoring Program (EMP) as authorized by Penal Code Section 1203.017. The EMP is an alternative to incarceration where carefully screened misdemeanor offenders are placed on home confinement in lieu of serving time in jail. Offenders are monitored 24 hours a day, seven days a week by an ankle bracelet GPS system and must agree to unannounced home inspections. Offenders are credited time served in the same manner as inmates who serve their time in the County Jail. Offenders who violate the terms of the program are subject to arrest without warrant and returned to custody to serve the remainder of their sentence. Offenders who abscond from the program may be prosecuted and face a potential sentence of up to an additional six months in jail. Since the inception of the OCSD EMP in March of 2013, a total of 1,269 inmates have been placed into the program with an average of 160 offenders on EMP at any given time. To help ensure public safety, the CWP Compliance Team conducts EMP compliance checks as well. There is room for growth in the EMP, and the OCSD will continue to maximize its use, while also observing our stated mission priority of maintaining public safety.

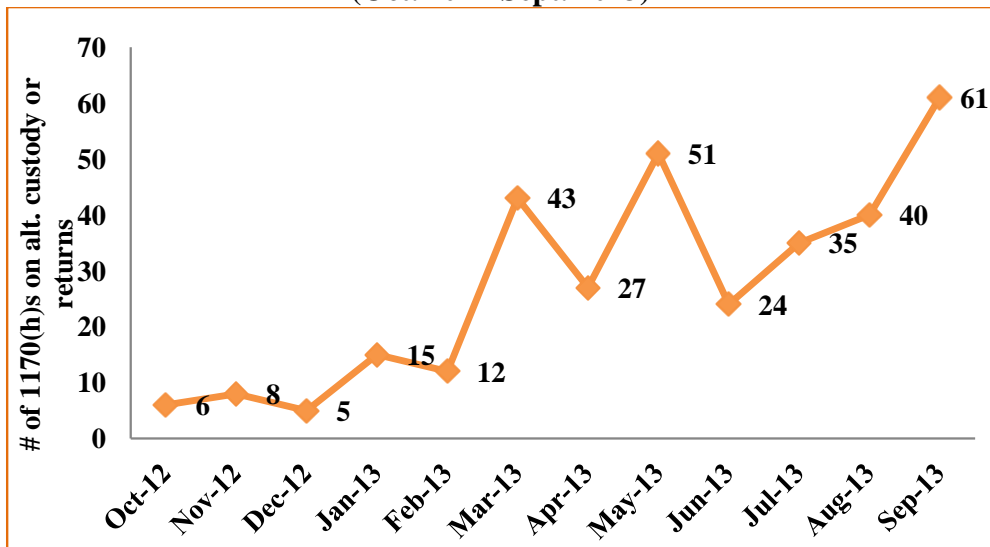


Alternatives to Incarceration Cont'd

OCSD Transition from Jail to Community (TJC)

One example of an alternative to incarceration that has been implemented is the OCSD-Transition from Jail to Community (TJC) pilot program. Inmates are screened at intake and those who are highly likely to recidivate are identified. If they agree to take part in the TJC program they are evaluated through the risk/needs assessment through which their criminogenic needs¹ are identified and a treatment protocol is developed. Inmates in the TJC are housed together in a “therapeutic community” and attend classes and therapy in group and individual settings. Towards the end of the program inmates begin discharge planning where counselors make available employment, housing, education, and treatment opportunities. Inmates are linked with those resources upon release. The program is still in its infancy but early results are positive (first 60 days, no re-offenders). The chart below illustrates the one-year trend of those placed on alternative custody or have returned to custody.

**Alternative Custody Placements
(EMP, GPS, Work Furlough, etc.) and Returns to Custody
(Oct. 2012-Sept. 2013)**



¹Latessa, E., Lowenkamp, C. (2005). What are Criminogenic Needs and Why are they Important? *Community Corrections: Research and Best Practices*. 1-2. http://ojj.la.gov/ojj/files/What_Are_Criminogenic_Needs.pdf



VI. Local Law Enforcement

Public Safety Realignment is having an impact on local law enforcement. The number of offenders released back into communities for county supervision is higher than initially projected by the state. As all service providers attempt to implement programs and supervision services to this population, local law enforcement is having increased contacts with the population that reoffends. Additionally, new sentencing guidelines are now causing convicted offenders to be released into communities for county supervision and services rather than being sent to state prison. Funds were allocated by the Orange County Community Corrections Partnership and the Board of Supervisors to each local law enforcement agency based on their active postrelease community supervision (PCS) population. Local law enforcement may access these funds by performing functions and duties as described in the Memorandum of Understanding adopted by the Board of Supervisors.

Local law enforcement will continue to collaborate with and support the OC Probation Department. Local law enforcement will participate in probation compliance checks and those agencies housing probation officers will provide office space and resources to assist the probation department in supervising this population. Representatives from local law enforcement will participate in regularly scheduled meetings involving all stakeholders in the county Realignment plan in order to facilitate ideas and implement the most effective methods in achieving the best outcomes to ensure public safety.



VII. Superior Court

Revocation of Community Supervision, Mandatory Supervision and Parole

The Court has assumed responsibility for post release community supervision, mandatory supervision and parole revocation hearings consistent with Realignment. Pursuant to California Rules of Court 4.541 and upon receipt of a petition for revocation of supervision from the supervising agency, or a request for warrant, the Court will accept and file the matter for action. The Court will prescribe the date and time of the revocation hearing within a reasonable time from the filing of the petition unless time is waived or the Court finds good cause to continue the matter. The Court will provide a hearing officer, courtroom facility, interpreter services and the means to produce a record. The Court will comply with reporting requirements to local and state agencies as defined.



VIII. District Attorney (OCDA)

Beginning with the implementation of Realignment on October 1, 2011, the Orange County District Attorney (OCDA) has prosecuted Postrelease Community Supervision (PCS) violators as well as Mandatory Supervision (MS) violators. On July 1, 2013, that responsibility expanded to include parole violators. In addition to staff time to prepare for and support the overall program implementation, the District Attorney's Office designated multiple Deputy District Attorneys (DAs) with specific responsibilities to prosecute these cases. The number of individuals subject to Realignment continues to grow. This growth is coupled with changes to the law resulting in additional workload challenges to the District Attorney's Office.

On July 1, 2012, SB 1023 became law and amended AB 109. This new law was intended to promote uniform revocation procedures relating to MS and PCS. The new law revised PC Sections 1170, 1202.2, 3455, and 3000.08 by extending the probation revocation procedures found in PC 1203.2 to MS, under Section 1170(h)(5)(B) and PCS, under Section 3455. This legislation was also intended to provide procedural due process protections held to apply in probation revocations to MS and PCS violators.

District Attorney Realignment Workload

With an increase in PCS/MS violators and the new duty of prosecuting parole violation hearings, the District Attorney's Office has met the mandate of representing the People by creating a team of four Deputy DAs, one investigator and one clerical staff support person. These four Deputy DAs are designated to prosecute these cases and with the assistance of their support team, they investigate, prepare, and try unresolved revocation hearings. These new duties have resulted in a significant growth in workload demands on Deputy DAs, investigators, and clerical staff.

Since 2012, there has been sustained growth in the workload for the District Attorney's Office. One of the most time-consuming mandates became effective July 1, 2013, when parole revocation hearings became the responsibility of the OCDA. Until this point in time, the California Department of Corrections and Rehabilitation (CDCR) handled these proceedings. These offenders include parolees who have previously been convicted of violent felonies; serious felonies; high-risk sex offenses; discharged mentally disordered sex offenders, and repeat offenders that fall under the three-strikes statute.¹

¹California Three Strikes Law, Cal. Penal Code § 667, Retrieved from California Legislative Information http://leginfo.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN§ionNum=667

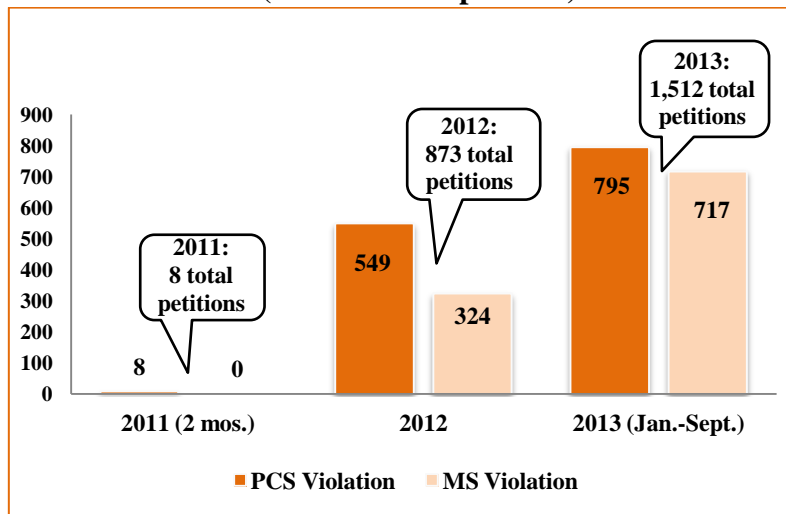


PCS/MS Petitions and Proceedings

PCS and MS Petitions

The OCDA has faced a significant growth in its caseload as a direct result of Realignment. When Realignment went into effect on October 1, 2011, the OCDA prosecuted only eight petitions of PCS violations for the two months remaining in the year. In 2012, 873 petitions for PCS and MS violations were filed. In the first nine months of 2013, there were over 1,500 petitions prosecuted between PCS and MS violators. Specifically, the OCDA filed 795 PCS Petitions and 717 MS Petitions (PCS-53%, MS-47%). As of October 1, 2013, 175 MS violators are on warrant.

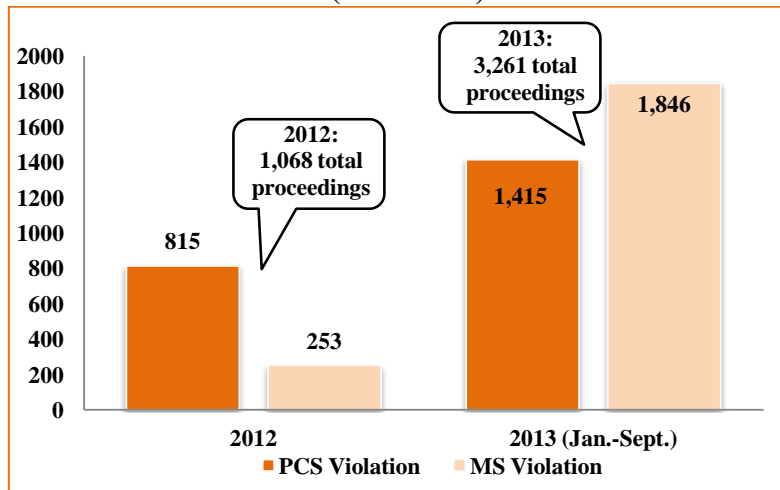
**District Attorney Realignment-Related Petitions
(Oct. 2011 - Sept. 2013)**



PCS and MS Court Proceedings

In addition to the increased number of petitions, the number of court proceedings has increased dramatically. These court proceedings are handled not only by the OCDA team created for Realignment, but additional prosecutors at court locations throughout Orange County are required to attend PCS and MS violator proceedings. In 2012 the District Attorney's Office attended 253 MS violator proceedings and 815 PCS violator proceedings. In the first 9 months of 2013, prosecutors have attended 1,846 MS violator proceedings and 1,415 PCS proceedings (MS— 57%, PCS-43%).

**District Attorney Realignment-Related Proceedings
(2012-2013)**





Recent Developments

Parole Violator Workload

The July 1, 2013 shifting of this responsibility from the CDCR to the OCDA's office added a significant workload and further strained already limited prosecution resources. The District Attorney's Office has responded to over 462 new court and/or administrative proceedings that have taken place July 1, 2013 through September 30, 2013.

OCDA PAROLE-RELATED WORKLOAD (JULY 1, 2013- SEPTEMBER 30, 2013)	
Parole Petitions	441
Parole Petitions Calendared in Court	304
Contested Evidentiary Parole Violation Hearings (first 3 months)	27

The OCDA will continue to monitor the prosecution workload required to implement Realignment and participate in the Orange County Community Corrections Partnership, to ensure the People are adequately represented in these matters. If the volume persists, additional prosecution resources will be required.



IX. Probation (OC Probation)

Types of Supervision

With the implementation of Realignment, the Orange County Probation Department (OC Probation) became responsible for supervising two additional categories of offenders beyond those under formal probation: 1) Postrelease Community Supervision (PCS) and 2) Mandatory Supervision (MS). Offenders granted probation by the Court are those individuals with a prison sentence that is suspended as long as the offender consistently follows the terms and conditions for the duration of time under supervision. As of September 30th, 2013, there are approximately 12,100 adults under active formal probation supervision.

Postrelease Community Supervision (PCS)

In order to manage this historic change in the criminal justice system, OC Probation created a specialized division with responsibility for intensive supervision of the PCS population. A total of 3,240 people have been released from prison with a PCS status. As of September 30, 2013, 1,692 are under active supervision. An additional 1,109 have been discharged from PCS supervision and 439 individuals are out on active warrant status. OC Probation gives PCS clients a guide that provides information on how to successfully complete community supervision (See, “*Guidelines to Successful Completion of Postrelease Community Supervision*” in appendix).

OC Probation's PCS Population (Oct. 1, 2011- Sept 30, 2013)	
Released to PCS	3,240
Actively Supervised (as of Sept. 30, 2013)	1,692
Discharges	1,109
Active Warrants	439

OC Probation's MS Population (Oct. 1, 2011- Sept 30, 2013)	
Sentenced to MS	1,633
Actively Supervised (as of Sept. 30, 2013)	747
Termed or Discharged	341
Still in Custody	364
Active Warrants	181

Mandatory Supervision (MS)

Since the implementation of Realignment, 1,633 individuals have been sentenced to Mandatory Supervision. Prior to Realignment, this population would have been sentenced to state prison commitments but instead completes a period of local incarceration and a period of community supervision. These clients receive supervision services that closely resemble those clients placed on formal probation. Using their risk scores, the appropriate level of supervision is determined, appropriate referrals are dispensed, and supervision starts for a defined period of time, based on their MS sentence. Violations of MS are handled like probation violations, in that they are returned to court for a formal hearing and disposition. As of September 30, 2013, 747 are actively supervised (excluding 181 offenders who are out on warrants) and 364 are still in custody. The remaining 341 have been terminated or discharged from supervision.



Projections vs. Actual Releases

Projected Additional Number of Individuals on Local Supervision

The California Department of Corrections and Rehabilitation (CDCR) provided revised estimates that nearly 3,000 inmates would be released to PCS in Orange County from the beginning or Realignment through September 30, 2013. These estimates include inmates released from state prison who would have otherwise been placed on state parole and parole violators/return to custody releases. The actual release data available to date (through September 30th, 2013) underestimates the overall total number of releases with an estimated 2,954 inmates to be released when the actual releases amounted to 3,240 inmates. The table below shows the CDCR projections, and the actual number of inmates released from prison through September 2013. Orange County experienced an overall of 9.7 percent more actual releases than estimated by CDCR estimates since the implementation of Realignment.

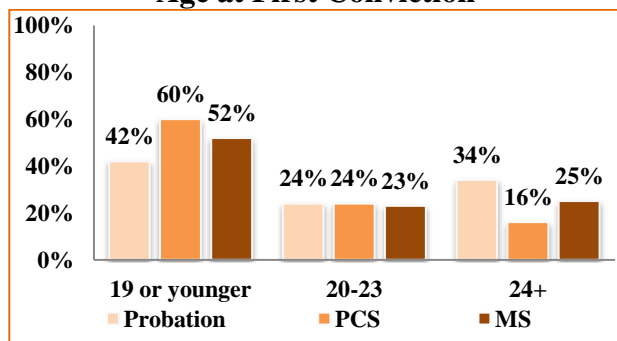
CDCR Projected Releases of PCS, Orange County			
Month/Year	CDCR Revised Projections	Actual Releases	% Gain/Loss from CDCR Projections
Oct-11	208	214	2.9%
Nov-11	280	320	14.3%
Dec-11	264	312	18.2%
Jan-12	202	274	35.6%
Feb-12	155	205	32.3%
Mar-12	145	186	28.3%
Apr-12	139	164	18.0%
May-12	136	137	0.7%
Jun-12	132	131	-0.8%
Jul-12	117	123	5.1%
Aug-12	98	104	6.1%
Sept-12	103	111	7.8%
Oct-12	102	99	-2.9%
Nov-12	85	93	9.4%
Dec-12	86	97	12.8%
Jan-13	100	90	-10.0%
Feb-13	86	79	-8.1%
Mar-13	63	69	9.5%
Apr-13	65	69	6.2%
May-13	112	76	-32.1%
Jun-13	67	76	13.4%
Jul-13	69	70	1.4%
Aug-13	80	73	-8.8%
Sep-13	60	68	13.3%
Total	2,954	3,240	9.7%



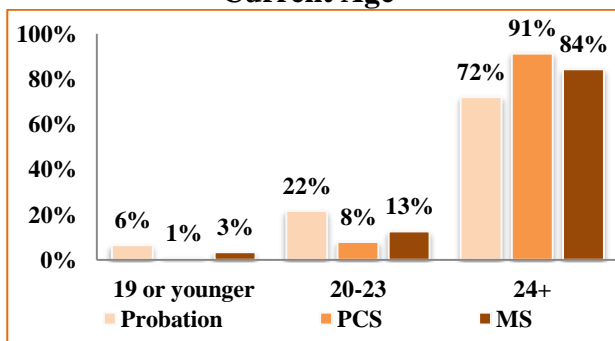
OC Probation Client Demographics

OC Probation actively serves individuals on Probation, PCS and MS. Among offenders in these categories, there are differences and commonalities worth noting. Within all three categories of actively supervised clients, the average age is the early to mid-thirties (32-37 years old) and 60 percent of PCS, 52 percent of MS and 42 percent of non-realignment offenders on Probation were age 19 or younger at the age of their first conviction.

Age at First Conviction

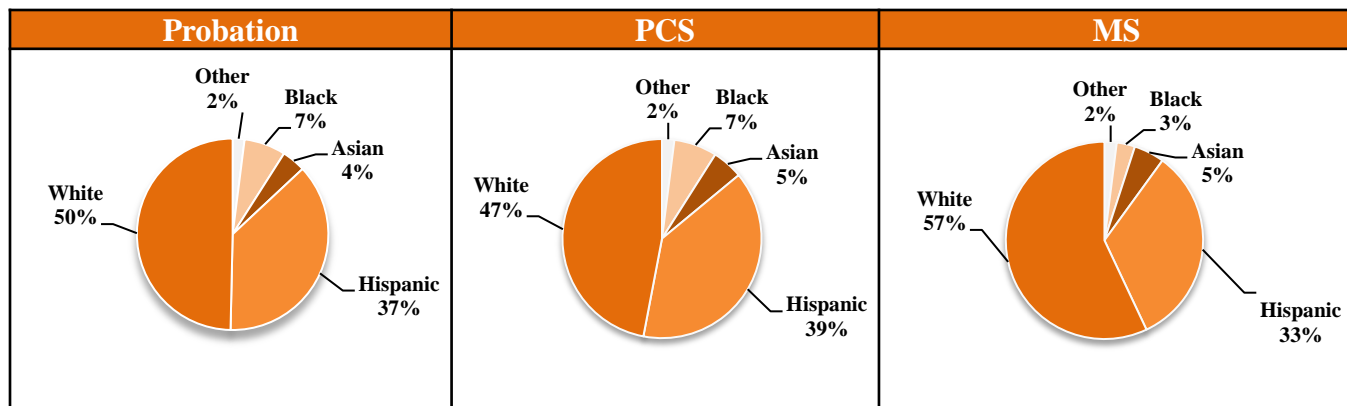


Current Age*



*Current Age is the age of the person at the time their initial risk assessment was completed.

Over two-thirds in each supervision category (Probation; 76%, PCS; 89%, MS; 78%) are male. Nearly nine in ten actively supervised individuals are identified as either White or Hispanic and in each group, clients that are White make up the majority (between 47 and 57 percent).





OC Probation Risk/Needs Assessment

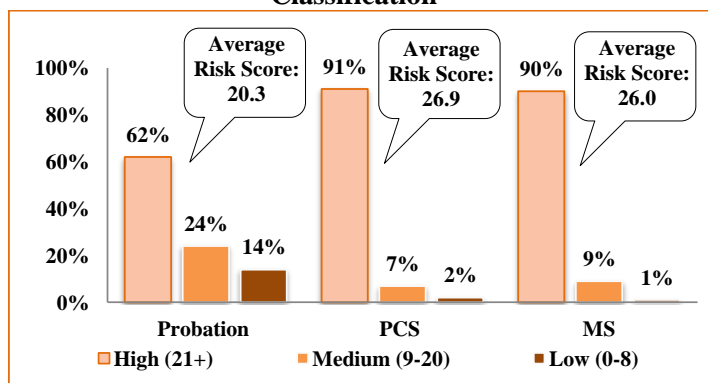
Assessments

OC Probation has utilized a validated risk/needs assessment instrument since the mid-1980s. This instrument has been the foundation for implementing evidence-based practices known to reduce recidivism. The tool enables OC Probation to allocate resources effectively and efficiently by dividing the population into groups by their probability of reoffending.

In the fall of 2011, the Council of State Governments (CSG), based in Austin, Texas, completed a revalidation of the Orange County, California Probation Department's Adult Risk/Needs Initial Risk Assessment Instrument.¹ CSG recommended modifications to the risk items (deletions, additions, and re-weighting), to improve the predictive ability (of recidivism) of the instrument. In December 2012, OC Probation implemented the changes recommended by CSG.

In practice, the DPO completes a risk/needs assessment on every client on their caseload and develops a case plan addressing “criminogenic needs”—dynamic factors that are strongly correlated with crime risk.² The risk/needs assessment determines the level of supervision that is necessary and identifies the type of evidence-based treatment and services that are needed to be successful on supervision (reducing the risk of reoffending and increasing pro-social functioning and self-sufficiency). Typically, the DPO conducts a reassessment every six months and updates the supervisory case plan based on any changes in risk level and in needs for services.

Active Supervision: Probation, PCS, MS Risk Classification



As of September 30, 2013, between Probation, PCS and MS, the majority of individuals are classified as high risk. While 62 percent of individuals on Probation are assessed as “high” risk, over 90 percent of PCS and MS offenders are determined to be high risk. The DPOs make resource referrals to services in the community including housing, education and employment based on information gathered during this assessment and meetings with the individual. Many offenders are referred to the OC Health Care Agency (HCA) for drug/alcohol or mental health assessments and treatment.

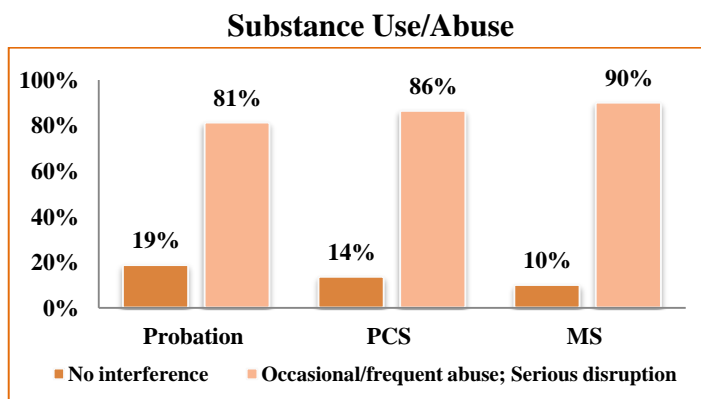
¹Eisenberg, M., Fabelo, T. & Tyler, J. (2011). Validation of the Orange County California Probation Department Risk Assessment Instrument: Final Report. The Council of State Governments Justice Center (Full report: <http://csgjusticecenter.org/wp-content/uploads/2013/03/orange-county-final-report-111811.pdf>)

²Latessa, E., Lowenkamp, C. (2005). What are Criminogenic Needs and Why are they Important? *Community Corrections: Research and Best Practices*. 1-2. http://ojj.la.gov/oji/files/What_Are_Criminogenic_Needs.pdf

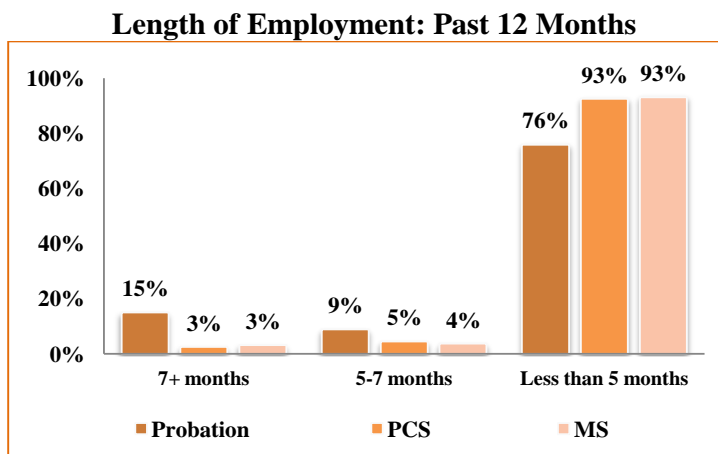


Risk/Needs Assessment Cont'd

One of the risk factors that contributes to calculating an offender's future risk is their substance use behavior. A large majority (MS; 90%, PCS; 86%, Probation; 81%) of actively supervised individuals engage in drug use that is considered to be occasional or frequent abuse that causes some or a serious disruption in their functioning. For this reason, OC Probation works closely with HCA to link individuals to drug treatment services whether residential or outpatient treatment.



Employment is another factor that most researchers agree reduces the likelihood to reoffend and not only does employment provide a legitimate source of income, but it offers structure and responsibility.^{3,4} Among PCS and MS clients, over nine in ten have only held employment for five months or less over the past year at the time of their assessment. It is not surprising that when taking all other assessment factors into consideration, over ninety percent of the PCS and MS groups are deemed high risk.



³Visher, C., Debus, S. & Yahner, J. (2008). Employment after Prison: A Longitudinal Study of Releasees in Three States. *Urban Institute: Justice Policy Center*. 1-9.

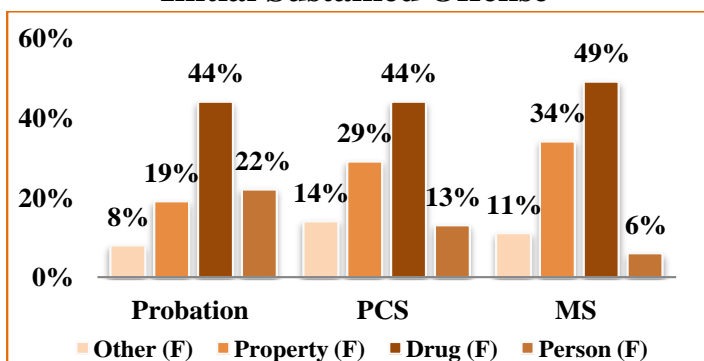
⁴Kurlychek, M., Brame, R. & Bushway, S. (2006). Scarlet Letters and Recidivism: Does an Old Criminal Record Predict Future Offending? *Criminology & Public Policy*, 5, 483-504



Prior Record and Supervision

The two factors that carry the highest correlation with risk of subsequent new law violations in the risk assessment tool used by OC Probation are 1) prior probation violations—adult or juvenile and 2) drug usage problems in the past 12 months.⁵ All PCS offenders are currently under supervision for a felony offense and the vast majority have previously been under supervision and violated terms of that supervision. Of the felony offenses that result in probation supervision, drug-related offenses make up over 40 percent of those on active supervision.

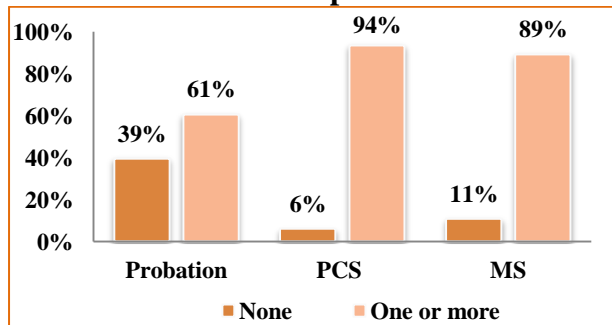
Initial Sustained Offense



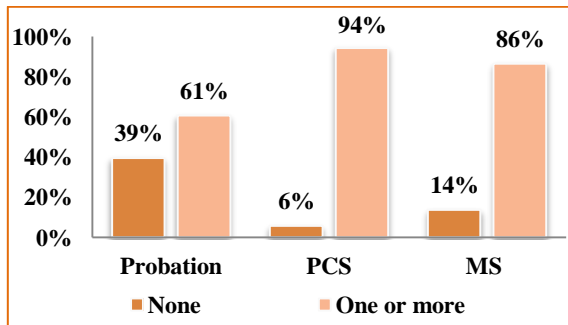
Of those under active supervision, PCS and MS clients have the lowest percentage of person-related Realignment offenses such as assault or robbery, with 13 percent and six percent respectively, however, both groups have a greater percentage of property offenses (such as burglary or theft; PCS—29%, MS—33%).

Over nine in 10 PCS and MS individuals have had one or more prior periods of probation supervision. A similar percentage in both of these groups had one or more prior Probation violations (PCS; 94%, MS; 89%) as compared to those under active supervision that are not part of Realignment.

Prior Probation Supervision Periods



Prior Probation Violations



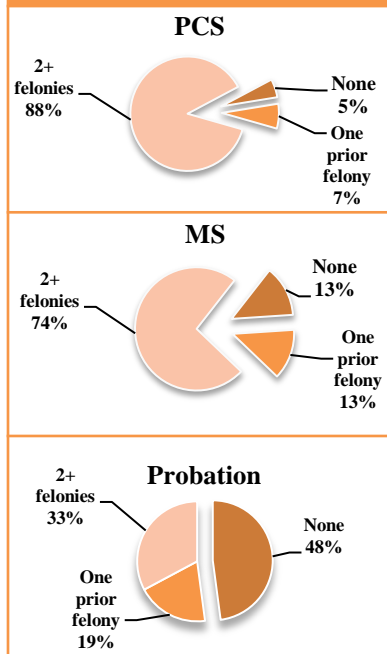
⁵Eisenberg, M., Fabelo, T. & Tyler, J. (2011). Validation of the Orange County California Probation Department Risk Assessment Instrument: Final Report. *The Council of State Governments Justice Center* (Full report: <http://csgjusticecenter.org/wp-content/uploads/2013/03/orange-county-final-report-111811.pdf>)



Prior Record and Victim Restitution

Not only have most of the PCS and MS offenders had prior probation violations, but most have had prior felony convictions and many have two or more prior felonies on their record.

PRIOR FELONY CONVICTIONS



Both the PCS and MS offenders make up a far greater percentage of those under active supervision that have had two or more prior felonies (PCS 88%, MS 74% and Probation 32%) than individuals on traditional probation.

Taking into account those that have one or more prior felony convictions, 95 percent of PCS offenders have had at least one prior felony. This number is lower for MS offenders (87%) and just over half (51%) for those on traditional probation.

Since criminal history is commonly used as part of a validated and reliable risk/needs assessment tool to predict future criminal behaviors, the inclusion of this information in OC Probation's risk assessment is key in the prediction of offenders' overall risk of reoffending.

Victim Restitution

Senate Bill 1210, which became effective in January 2013, addresses a previous concern related to victim restitution by collecting fines that support the victim restitution fund for the Realignment offender population. This bill authorizes a local Board of Supervisors to designate an agency for collection of these obligations. It also authorizes the deduction of a percentage of money from inmate accounts as part of this process. The Orange County Board of Supervisors is moving forward with the designation of this agency. The collection of prior financial obligations owed by the PCS offenders remains with the State of California.



Revocations, Incentives, Law Enforcement Contact

Revocations

A key component of successfully implementing Public Safety Realignment relies on an effective revocation process combined with consistent imposition of graduated sanctions, in response to violations of supervision conditions. A continuum of interventions allows the DPO to consider individual risk, the severity of the violation, and the behavior of the individual to link the consequence to the case plan objectives. DPOs have made 62,768 face-to-face office contacts with clients, administered 12,099 drug tests, and conducted 14,330 search and seizures on the PCS population. In holding the PCS offenders accountable, the DPOs have used revocations more than 1,965 times since the implementation of Realignment (October 2011 – September 2013).

OC Probation collaborated with the Public Defender and District Attorney's Offices, to create a *Postrelease Community Supervision Advisement of Rights, Waiver of Rights and Admission Form*. This form is part of the process where either the DPO or the attorney of record discusses the allegations with the supervised person, who may choose to waive his/her rights for a formal revocation hearing.

Incentives

The most common incentives for compliant individuals under supervision are bus passes for those with transportation barriers and funding for sober living up to four months for offenders actively participating in substance abuse treatment or attending the Adult Day Reporting Center. There is also the potential for a reduction in duration or type of supervision for those offenders making positive progress. When an individual reaches a certain milestone in supervision, (e.g., successfully completed substance abuse treatment, completed all phases of the Adult Day Reporting Center, demonstrated positive progress for six consecutive months of supervision with no custodial sanction), the DPO will identify and reassess their overall risk and transfer the case to the appropriate reduced level of supervision. This may include an evaluation for a Field Monitored (FM) caseload. The PCS Division currently has over 125 offenders that have met the criteria for this reduced level of supervision.

Law Enforcement Contact

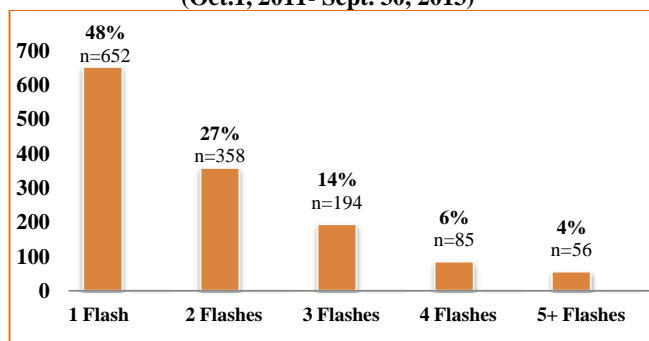
It has been OC Probation's goal from the onset of Realignment to work together with local law enforcement, in a partnership with regard to the supervision of the PCS clients. Because of this, 17 DPOs have been out-stationed in both municipal law enforcement agencies and the OCSD North and South Operations Divisions. As a "regional" approach to the supervision of PCS clients, each city in Orange County has at least one liaison officer assigned to supervise the PCS cases in that specific city. It is expected that DPOs will remain in contact with officers or staff from their assigned city, in order to ensure a smooth and effective line of communication. A MOU was created with cities for enhanced law enforcement services and other authorized expenditures, as part of Public Safety Realignment. The scope of the MOU was expanded beyond just overtime services to include the services of dedicated personnel and operating expenses directly related to services under Realignment.



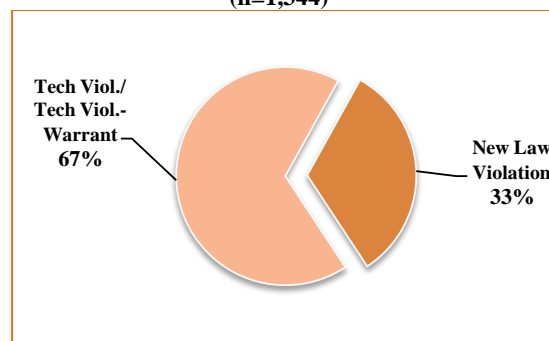
Flash Incarcerations and Re-entry

Flash Incarcerations are a tool unique to the Realignment PCS population. Flash incarceration allows a DPO to arrest a PCS offender for a violation of supervision terms and place him/her in jail. The amount of time to be served (a maximum of 10 days) is determined by the DPO. When flash incarceration is deemed an appropriate sanction, the DPO notifies the Supervising Probation Officer (SPO) with an arrest detainer requesting approval of flash incarceration through the Integrated Case Management System (ICMS). The detention period is intended to deliver a sanction that minimizes impact on the client's success in the community related to employment or family dynamics. From the inception of Realignment through September 30, 2013, there have been 1,344 people on PCS supervision that have received at least one flash incarceration and some individuals with two or more flash incarcerations totaling 2,614 flash incarcerations in Orange County.

Distribution of Flash Incarcerations
(Oct.1, 2011- Sept. 30, 2013)



Flash Incarceration Reasons by Individual
(n=1,344)



Re-entry Team

OC Probation's re-entry team is comprised of a DPO and a collaborative HCA caseworker who work together to identify offenders recently placed on probation or MS as well as those serving custody commitments due to violations of supervision under any of the supervision categories: Probation, Mandatory Supervision, and/or Postrelease Community Supervision. Together, the DPO and HCA caseworker identify and meet with PCS and MS offenders individually and refer them to residential and outpatient treatment, Adult Day Reporting Center (DRC), or mental health services and facilitate the process to connect offenders to necessary services. These services prepare the offender for successful community re-entry and increase offender accountability, rehabilitation and public safety. The Re-entry Unit team routinely coordinates with OCSD Inmate Services and Sheriff Deputies' re-entry services directly to reach inmates currently in jail serving custody commitments. One example of the team's outreach efforts is the "[Probation 101](#)" class where offenders, while in custody, are given an overview of types of supervision and what they can expect while under supervision upon their release. The class covers treatment and program options as well as how to succeed while under supervision. Inmates are also given an opportunity to ask questions. The goal of the class is to provide information that may help alleviate fear, tension, and frustration prior to release and before the first meeting with their assigned DPO.



C.O.R.E.: Re-entry and Education

Center for Opportunity Re-entry and Education (CORE)

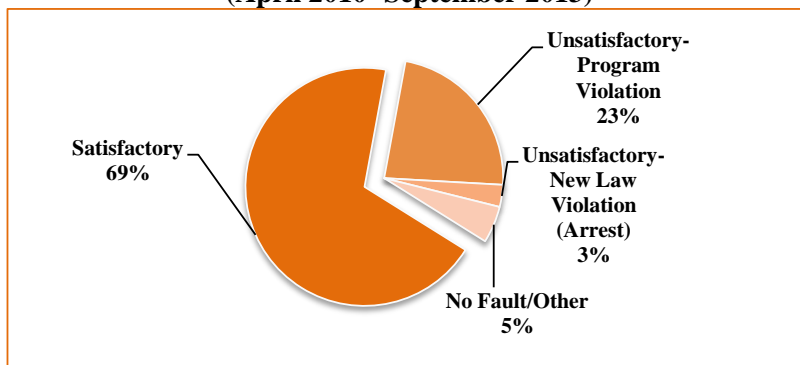
OC Probation in collaboration with the Orange County Department of Education (OCDE) established a highly structured non-custodial day reporting center to safely reduce recidivism and reliance on incarceration. This program is located at 2823 S. Bristol Street in Santa Ana and is administered by OCDE using educational funding streams based on Average Daily Attendance (ADA).

OC Probation provides support in the way of assigned DPOs and clerical staff. In addition to teaching staff, DPO's assigned to the program provide on-site offender supervision and casework services. CORE includes additional collaborative partners such as the Public Defender and other community based organizations. The program primarily targets adult offenders under formal probation supervision. In addition, Realignment offenders (MS and PCS) who meet program criteria are also eligible to attend.

CORE is an education-based model set in a traditional classroom setting. Offenders are required to attend Monday through Friday and are afforded the opportunity to earn a high school diploma or General Education Development (GED) certificate. In addition, attendees participate in cognitive behavioral programming ("Thinking for a Change") and life skills. Employment preparation and search skills and substance abuse education and counseling are also offered for targeted offenders.

Average daily population ranges from 25-30 participants. CORE has processed over 396 referrals since April 2010. The overall success rate is 68.9% which includes offenders attending CORE short-term as a graduated sanction for 30 days as well as offenders who continue in the program long-term and obtain either a GED or High School Diploma.

**CORE Program Exits
(April 2010- September 2013)**





Adult Day Reporting Center (DRC)

The Adult Day Reporting Center (DRC) is administered by OC Probation. Located at 901 W. Civic Center Drive, Suite 100 Santa Ana, CA, the DRC is a statutorily- and research-supported alternative to custody that relieves pressure on the Orange County Jail population by providing services to offenders that are under community supervision. The goal of the DRC is to protect the public by providing offenders with a combination of intensive treatment and programming, on-site supervision, and immediate reporting of behavior to assigned DPOs. The DRC works solely with Realignment offenders (both PCS and MS) and is paid for by State and County Realignment funds. A majority of these individuals have lengthy criminal arrest records including prior prison terms and are identified and assessed as “high” risk to reoffend. Orange County currently contracts with BI Incorporated, a GEO Group Company (“BI Inc.” <http://bi.com/>) to operate the DRC, which opened at the end of July in 2012 as part of the overall Orange County Public Safety Realignment and Postrelease Community Supervision Implementation Plan. The current contract for the DRC expires June 2014. A formal Request for Proposal was released on September 19, 2013 seeking qualified vendors to provide DRC services.

Used as a graduated response or sanction to overall supervision as well as a general programming option, the DRC is a structured and individually tailored program six months in length. It is a multi-phase program where offenders progress through three levels of treatment and supervision and an “Aftercare” phase based on their individual behavioral improvements as monitored and measured through group attendance and participation, drug and alcohol abstinence, verifiable employment and/or income, stable housing, and compliance with probation terms and conditions. The DRC utilizes a variety of evidence-based practices including Motivational Interviewing and the Moral Reconation Therapy (a type of cognitive behavior therapy) in order to change existing behavior.

In order to help foster success with offenders, the DRC establishes and maintains connections with local employment, housing, drug and mental health treatment agencies and providers. The DRC promotes the use of a computer lab which uses a browser based application that assists offenders in seeking existing community resources. Further, the DRC hosts a Community Connections forum which meets regularly where local providers present information about various services that are available. This also includes a question and answer period and opportunities for offenders to speak with program providers individually. The DRC formally works with collaborative partners that address a range of client’s needs such as the Health Care Agency, Orange County Public Defender’s Office, the Catholic Diocese’s Office of Restorative Justice, and other relevant community-based organizations as part of their program.



DRC Cont'd

All DRC participants receive services based on their assessed risk/needs and are held accountable for their behaviors through specific measures provided by the DRC as noted below:

Services	Testing/Accountability Measures
Development of a Behavior Change Plan	Orientation & Intake Assessment using (LSI Risk Assessment)
Life skills & Cognitive Behavioral Therapy (Moral Reconciliation Therapy, (See Description of MRT: http://www.nrepp.samhsa.gov/Viewintervention.aspx?id=34)	Daily attendance, participation in group sessions, progress reports & communication with assigned DPO
Substance Abuse Counseling	On-site random alcohol & drug testing, individual and group sessions, progress reports & communication with assigned DPO
Anger Management Counseling	Group sessions, attendance, periodic evaluation and communication with assigned DPO
Parenting & Family Skills Training	Group sessions, attendance, periodic evaluation and communication with assigned DPO
Job Readiness & Employment Assistance	Assistance with job preparation and placement monitored by Education & Employment Coordinator
Education Services	Access to educational computer lab, assistance and monitoring by Education & Employment Coordinator
Community Connections	Getting Connected computer application, attendance at Community Connections meetings monitored by case manager & communication with assigned DPO
Restorative Justice Honors Group	Participation and attendance monitored by coordinator & certificate of completion
Reintegration & Aftercare	Aftercare case plan, weekly check-ins and monthly Aftercare group sessions

DRC and OC Probation staff routinely collaborate and communicate regarding overall client progress. Offenders who complete the full program are encouraged to attend “Aftercare.” A case plan is developed to assist them with their reintegration into the community. This includes weekly “check-ins” as needed, Aftercare group sessions held monthly, and participation in a formal graduation ceremony held several times a year. Based on the degree to which a client fails to comply with DRC rules and programming requirements, an individual will receive an increase in supervision that may include additional classes, increased reporting, increased treatment, or possibly a custodial sanction as determined by the assigned DPO.

The Office of Restorative Justice and Detention Ministries (RJ) works with the Probation Department and BI Inc. to provide a Restorative Justice Honors Program for specific offenders attending the DRC. This group meets weekly, in addition to the regular DRC requirements, for 10 weeks. During group sessions, offenders meet with the Restorative Justice Coordinator who covers concepts such as the needs of the offender, victim, and the community and the obligations involved in repairing the harm done by their crime. This group provides and promotes on-going peer support. In addition, OC Probation and RJ in collaboration with the Orange County Human Relations Department are working on implementing formal “mediation” services targeting Realignment offenders. The goal is to identify Realignment offenders and voluntary participants (e.g. victims or family members) who have suffered because of the actions of the offender and have a mediator assist both parties in working to rebuild trust and to trying to make things right for all parties.



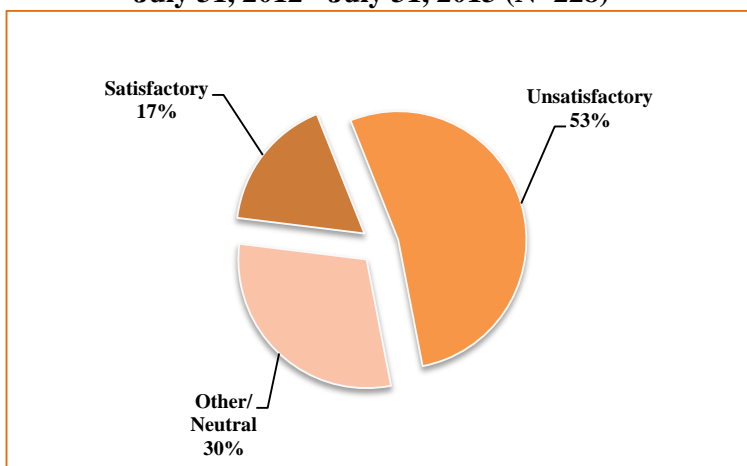
DRC (Foundational Year Preliminary Findings)

The DRC processed a total of 234 referred clients (MS and PCS) since the DRC opened on July 30, 2012 through July 31, 2013. The DRC assists DPO's in managing the population they serve by promoting behavior change, increasing linkages to additional treatment, and holding high-risk clients accountable. Preliminary findings from the first year of the DRC are discussed below.

Of the 234 clients that have exited the DRC between July 31, 2012 and July 31, 2013, 17 percent left with a status of "Satisfactory". This status includes clients who have either completed the full DRC program as prescribed based on their individual needs or have exited under satisfactory conditions such as obtaining full-time employment. Thirty percent of clients exited with an "other/neutral" status during the first year of the program. Clients in this category were discharged due to issues that the DRC was not designed to handle. Some examples include severe substance abuse cases that need additional outpatient or residential treatment services, medical or mental health issues that need to be treated by another agency and language barriers that could not be effectively accommodated to foster satisfactory results. Clients that have exited with an "unsatisfactory" discharge status make up 53 percent of those that exited within the first year of the DRC opening its doors. An "unsatisfactory" status includes individuals that have violated the terms of their probation, clients that have poor attendance or have made poor progress, or are no longer attending the program.

While over half (53%) of DRC participants that exited the program left with an "unsatisfactory" status, 17 percent left as "satisfactory" while receiving treatment and programming services that would have otherwise had great cost implications for Orange County. Arguably, a portion of the additional 30 percent that exited as "other/neutral" potentially served as another cost-savings source as they were not housed in local custody and still received necessary services and treatments.

DRC Discharges by Type
July 31, 2012 - July 31, 2013 (N=228)





X. Public Defender (OCPD)

Realignment brings unique opportunities and challenges to the work of the Public Defender's Office.

Public Defender's Office Workload

Overall, the Public Defender's Office (OCPD) has experienced an increased workload given that previous to Realignment, the offices had not been responsible for persons who violated the terms of their parole, or for the two newly created supervision classifications of Postrelease Community Supervision (PCS) and Mandatory Supervision (MS). In October 2011, the OCPD became responsible for representing those charged with violations of PCS and of MS [per Penal Code section 1170(h)(5)(B)]. On July 1, 2013, the OCPD began representing persons facing revocation of parole, while continuing to represent persons on supervision through PCS and MS. The offices of the Public Defender represent the majority of individuals charged with violations of these offenses.

Staffing

As the workload increased, staffing has also increased. Currently, three attorneys, two resource service paralegals, an attorney clerk and a staff specialist are assigned to Realignment, the last two positions being assigned to the offices' Realignment team only recently. Additionally, other non-dedicated staff assist with investigations, writ and motions work, and when daily caseloads require.

Legal Issues and Challenges to Realignment

Substantive legal issues created by assorted provisions in the law have been and continue to be raised; the immensity and diversity of the Realignment law brought significant statutory changes that present a number of unique legal and constitutional issues of first impression. Several writs of habeas corpus have been brought before the Appellate Court advocating for client rights and seeking clarification of the untested statutes. The introduction of parole, which had historically not been working within the state court system, has added further responsibilities to review, analyze and challenge conditions of supervision and revocation that are inconsistent with due process and constitutional rights. The development and ultimate resolution of these legal issues are expected to be ongoing for some time.

Addressing PCS, MS and Parole Client Needs

Each new client cohort has brought with them some unique challenges while also many similar issues and needs. Certainly, each group has expressed similar need for supportive services and advocacy for those services, such as access to birth certificates, DMV fee waivers, Medical Services Initiative (MSI), SSI, Section 8 Housing, and a plethora of other life stabilization needs. Resource paralegals in the public defender's office have been assisting with these services and linkage to experts in the various need areas as they also expand their knowledge of available and new programs and services. They meet with clients in court, at the jail, at the office and at residential programs to assess their needs and provide linkage. These support staff also regularly attend the day reporting centers opened by OC Probation and more recently by Parole, to meet with clients and providers and to ensure effective collaboration in meeting client needs.



Training and Workload

Staff Training

Training remains a significant area of concentrated effort. In the last year, 496 training hours specific to Realignment and evidence-based practices have been provided over 150 different staff members. Evidence-based practices require regular review and frequent updating to ensure appropriate responses designed to reduce recidivism and promote a safer community. Similarly, knowledge of programs and services must be available to all staff representing persons charged with felony offenses or violations to provide adequate alternative sentencing options consistent with Realignment principles of community-based programming. Additional training is provided to staff on programming available to aid in this continuing obligation.

A staff specialist has recently been added to the team to assist with data tracking and analysis and the specialist is currently finalizing data tracking elements. The goal of tracking client service needs is to identify what helps clients succeed. As that process moves forward, those services that are linked to success can then be expanded and concentrated; current service efforts include expanded jail visits; linkage to critical services including obtaining valid identification, MSI, SSI, birth certificates; follow up phone calls, and additional services the client expresses are needed to help make for successful re-entry. In September of 2013 alone, clients were assisted with or referred approximately 166 times to services and supports, ranging from employment and housing to medical/dental to SSI and food. In October, the number of referrals to services and supports increased to 228. The need for such assistance if the client is to succeed is apparent.

Initial data review reflects the amount of work impacts that Realignment has had on the department. From July 1 to October 31, 2013, for example, some of the typical kinds of tasks and work performed for PCS, MS and Parole clients are reflected below:

PCS cases opened	Parole cases opened	MS cases opened	Client/Program visits	Total Court appearances (includes PCS, MS and parole)	Contested hearings	Client Jail visits	Phone calls to/from clients	Program referrals
477	323	274	125	2,155	58	354	855	88

By way of comparison, the OCPD opened 23 PCS cases in the first three months of Realignment (October through December 2011). In the first six months, the number of PCS cases opened totaled 160 (still a fraction of those opened in a mere three month period from July through September 2013). The number of court appearances at that time (again for six months) was approximately 132, compared to the recent four month number of 2,155.



New Leaf Program



New Leaf Program

The Department's New Leaf Program provides relief for those who have worked past their convictions and seek to "clean up" their records, to avoid the barriers that such convictions present to employment, housing, public benefits and other productive citizenry goals. Clients are encouraged to engage in available programs and advised of record expungement processes early on as additional incentive and hope that their success can be realized. Clients are expressing great interest in this opportunity to enhance their final re-entry and reintegration into the community. This work will start to impact the OCPD in the upcoming year. Prior to new legislation, individuals who had served a state prison commitment were not eligible for this relief until seven years following their release. This placed insurmountable barriers to successful re-entry in employment and housing.

On October 13, 2013, the governor signed AB 651 which provides for the possibility of applying for expungement relief after two years following completion of all supervision for individuals sentenced to the county jail per Penal Code section 1170(h)(5)(A) and after one year of completion of all supervision for those sentenced to mandatory supervision pursuant to section 1170(h)(5)(B). As legislative analysis observed, "A felony conviction on a person's record will often create significant barriers to re-entry. Even one conviction for a felony drug possession may prevent a person from finding a job or securing stable housing... With the prevalence of background checks, even a decades-old conviction can be a barrier to employment and housing. AB 651 affords the possibility of a fresh start for those sentenced under the Realignment law – giving people committed to successful re-entry a chance to clean up their record and receive a meaningful second chance."

The OCPD's service in this arena is the final bookend to successful re-entry efforts.

XI. Health Care Agency (HCA)

Behavioral Health Treatment Services for Offenders under PCS and MS

The Health Care Agency, Behavioral Health Services (HCA) has developed a continuum of treatment services comprised of several programs that are available to offenders who have untreated substance use and/or mental health disorders. These services are provided directly by County staff as well as by community-based providers through contract. Studies show that a majority of offenders released from custody have substance use disorders (SUD) and/or mental health disorders and many of them, commit crimes related to their disorders.¹ The purpose of providing treatment services to offenders released under Realignment, is to reduce recidivism and costly re-incarceration by treating SUDs and mental illness; thus, reducing related crimes. Services are available to all individuals under Orange County Realignment (PCS and MS) supervision. Information noted in this section includes both PCS and MS participants, unless otherwise noted.

Impact of Treatment on Recidivism

Statewide Recidivism Rates

Orange County Community Corrections Partnership (OCCCP) recognizes the need for offenders to access behavioral health care, which includes both mental health and substance use services. Studies have shown that treatment/aftercare reduces the recidivism rates of offenders.² “Treatment/Aftercare” refers to ongoing treatment services such as residential or outpatient treatment which may include sober living with outpatient treatment. The following tables illustrate the importance of treatment/aftercare especially as it relates to recidivism.

Recidivism can be defined in many different ways. The California Department of Corrections and Rehabilitation (CDCR) measures recidivism by arrests, convictions and returns to prison. CDCR uses the latter measure, returns to prison, as its primary measure of recidivism. Using this definition, a study completed by CDCR in the California prison system indicates that inmates released from CDCR in 2006-07 have a 65.1% three-year recidivism rate as seen in Table 1 below.³

Table 1: Three-Year Recidivism Rates

Total Released	One Year		Two Years, Cumulative		Three Years, Cumulative	
115,254	55,167	47.9%	69,692	60.5%	75,019	65.1%

¹Simpson, DD., (Spring 2004) IBR Research Roundup Retrieved from <http://www.ibr.tcu.edu/pubs/newslet/04spring.pdf>

²Grella, C. L. (n.d.). Post-Prison Treatment Reduces Recidivism Among Women With Substance Use Problems. SAMHSA/CSAT. (n.d.). *Substance Abuse Treatment for Adults in the Criminal Justice System*

³Office of Research, r. a. (2011). *2011 Adult Institutions Outcome Evaluation Report*. California Department of Corrections and Rehabilitation.

According to this study, recidivism rates decline when individuals receive in-prison Substance Abuse Programs (SAP) and treatment/aftercare. Table 2 outlines three-year recidivism rates when offenders completed a substance abuse treatment program. According to CDCR, “[t]he combination of in-prison Substance Abuse Program (SAP) and aftercare results in the best outcome: a recidivism rate that is much lower than those who did not participate in in-prison SAP (with or without aftercare)”.³

Table 2: Recidivism After Completion of Substance Abuse Treatment Program*

	Aftercare Completed	Some Aftercare	No Aftercare
In-prison SAP Completers	29.3%	62.3%	66.5%
In-prison SAP Non-Completers	29.7%	64.7%	66.6%
No In-Prison SAP Participation	46.2%	78.0%	65.3%

*CDCR statistics from 2011 CDCR Adult Institutions Outcome Evaluation Report – November 2011

Orange County Recidivism Rates

A recidivism study in Orange County was conducted by the University of Arizona for HCA.⁴ For this study, recidivism was measured by counting any rearrest that occurred during the 12 months after release. The study compared rearrest rates among male participants who received in-custody treatment (New Start) at Theo Lacy Jail during each year of its operation to rearrest rates of inmates who applied to the program but did not get in/receive treatment (control group) over a four year period. The program was operational for five years. Results of the first three years of the study indicate that New Start participants at nine-months and 12-months following release from custody fared better than the control groups. Results of the 4th year study at 12 months post-release, indicate that 48.3% of the New Start Group were rearrested versus 61.3% of the control group. Survival analysis indicated that differences in rearrest rates between the two groups during the first 12 months post release were statistically significant ($p < .01$).

Table 3: Re-arrest Rates 12 months Post Release

Re-arrest Rates New Start Group	Re-arrest Rates Control Group
48.3%	61.3%

Both studies clearly illustrate that treatment and aftercare have a significant impact on recidivism rates.

³Office of Research, r. a. (2011). *2011 Adult Institutions Outcome Evaluation Report*. California Department of Corrections and Rehabilitation.

⁴Health Care Agency. (2011). *New Start 4th Year Recidivism Report*. Santa Ana, California: Health Care Agency.

Substance Use Disorders (SUD) and Adult Mental Health Services (AMHS)

Referral Process and HCA Resources

Utilizing standardized assessment tools, the BHS assessment team, which is embedded at the Probation office, determines individual treatment needs and placement in services. The assessment team facilitates the referral and enrollment of the offender into county and contracted treatment providers. Case management services are available, especially for those who have higher need.

HCA has a well-developed behavioral health system of care to meet the various needs of individuals. For individuals with serious and persistent mental illness (SPMI) and co-occurring disorders, assistance includes emergency services, four adult regional outpatient clinics, Assertive Community Treatment teams (a best practices field based model – proven to be effective with difficult to engage chronically mentally ill individuals), transitional housing also known as “shelter beds”, Full Service Partnerships, and Outpatient Recovery Centers along with various Prevention and Intervention Programs. A HCA psychiatrist is out-stationed at OC Probation and provides medication services on site as needed to those who require immediate assistance but may not meet the eligibility criteria for County mental health services. Two mental health care coordinators who have a dedicated caseload of Realignment clients are located in Santa Ana.

Substance use detoxification and treatment is available to all eligible Realignment clients. Detoxification services including medically supervised and social model detoxification (*see Social Model Detox description on page p. 47*) and methadone detoxification services are available to all Realignment clients who are encouraged to enroll in treatment upon detoxification. For individuals with SUDs and co-occurring mental health disorders, services include residential and outpatient treatment provided by community treatment providers. Narcotic Replacement Therapy including methadone maintenance is also available to clients. Housing in a sober environment is critical in helping offenders avoid situations that may lead to using alcohol and/or drugs.

All behavioral health treatment is encouraged to utilize evidence-based treatment models and practices throughout the continuum of services offered to clients. One widely-accepted evidence-based approach is Cognitive Behavioral Therapy (CBT), which teaches offenders that they are not merely victims of their personal circumstances, but that they are responsible for the choices they make within their circumstances. Research has demonstrated the effectiveness of CBT for reducing recidivism among offenders⁵, in that it addresses errors in thinking associated with criminality, such as victim mentality, justification, entitlement, and power orientation.⁶ Treatment is designed to encourage offenders to formulate positive life goals and seek permanent positive change.

⁵ Lipsey et al., 2007; Wilson et al., 2000 & Pearson et al. 2002

⁶ Yochelson, S., Samenow, S. (1976). *The criminal personality. Vol. I: a profile for change.* New York: Jason Aronson, Inc.

Current Services

HCA Assessment Team – Referrals for Treatment

Behavioral health services for Realignment participants started in November 2011. OC Probation and HCA developed a collaborative plan to address behavioral health needs of Realignment clients. This plan included jointly-funded services and ongoing coordination. In October 2013, OC Probation Chief Steve Sentman presented the “Chief’s Award for Collaborative Partners” to the HCA Behavioral Health team for effective collaboration with OC Probation.

During most of the first year of implementation of Realignment, two HCA assessment staff were co-located in OC Probation’s Santa Ana office. In 2013, HCA placed two additional staff at OC Probation’s Westminster office. Based on need, these four staff may be shifted to provide adequate coverage at one site or the other. All PCS offenders with apparent behavioral health issues are first referred by OC Probation to the HCA assessment team. Assessment staff evaluate approximately 45 clients per day and collaborate with DPOs to assess all PCS/MS clients with a history of mental health and/or substance abuse issues. PCS/MS individuals not in need of specialty mental health services or substance abuse treatment are linked to resources in the community to address identified needs. Through September 2013, OC Probation referred 4,898 PCS/MS individuals for assessment. Of these 4,459 or 91% were assessed. Table 4 below captures the referrals and admissions to treatment and other services.

Table 4: HCA Treatment Referrals and Admissions

	Total November 2011- September 2013	Percentage
Total referred by Probation	4,898	
Total Assessed by HCA Assessment	4,459	91%
Referred To BHS Services		
• Outpatient SUD Tx:	752	17%
• Residential SUD Tx:	727	16%
• Referred to AMHS Tx:	167	4%
Total Referred	1,646	37%
Admitted to Treatment		
• Outpatient SUD Tx:	603	37%
• Residential SUD Tx:	695	42%
• Outpatient AMHS:	116	7%
Total Admitted	1,414	86%
Sober Living		
Referred to Sober Living:	91	NA
Admitted to Sober Living	90	99%
Transitional Housing/Shelter Beds		
Admitted	10	NA
Enrolled in Full Service Partnership (FSP) Since March 2012	20	NA
Enrolled in Detox Programs		
• Social Model	106	NA
• Medical	9	NA
• Methadone	9	NA
Enrolled in Methadone Maintenance	6	
Clients seen by Psychiatrist:	137	10%

Case Management

As systems are developed and implemented to address the many needs of Realignment offenders, navigation through these systems may be difficult for the offender. A case manager who facilitates transition between offenders in-custody and community resources is pivotal in the successful transition of the offender. In 2013, a case manager was added to the team. The behavioral health assessment team makes the referrals and links the client with a case manager. The case manager works closely with clients who have a co-occurring diagnosis but do not qualify for County mental health services and with a psychiatrist while also following-up to help the client access medication. Additionally, the case manager works closely with OC Probation in the jails. In conjunction with the re-entry DPO, the case manager provides an orientation in all the County jails and meets with soon-to-be-released Realignment inmates to discuss OC Probation expectations and treatment services available upon release.

The case manager works with clients to assist them in all transition periods. This includes release from prison or jail, detox to treatment and/or treatment to sober living. Currently one staff person is assigned to handle all these duties and cases are becoming increasingly more complex requiring the case manager to spend more time with clients to meet their needs. Depending on the availability of funds, HCA intends to hire an additional case manager.

Substance Use Disorder Residential Services

Residential treatment services for up to 90 days are available. Eligible participants receive a range of treatment and recovery services based on individualized treatment plans .

In 2013, a Request for Proposal (RFP) was released for SUD residential and outpatient treatment services and four residential treatment providers were selected (95 beds total). Currently, HCA contracts with four community-based treatment providers located in north and central Orange County with easy access to public transportation. These providers are: Phoenix House, Woodglen Recovery Junction, Cooper Fellowship, and Unidos. The outpatient services bid resulted in the selection of six SUD outpatient providers. Services include group and individual counseling services. They are Korean Community Services (KC Services), CHCADA operating La Familia, Phoenix House, Associates in Counseling and Mediation (ACM), Mariposa Family Center, and Changes for Recovery.

Evaluation/Assessment of Participant Includes:

- substance abuse assessment
- medical history
- individualized treatment planning,
- program orientation
- provision for required attendance at self-help meetings or other support groups, individual counseling, group counseling
- substance abuse education
- family counseling,
- linkage to vocational and literacy training
- collateral services
- case management
- relapse prevention
- recreational and socialization activities
- food and shelter
- discharge planning

Outpatient Services

Substance Use Disorder Services (SUD)

Outpatient SUD treatment consists of individual and group therapy, which includes criminal justice specific program curricula. As previously noted, combinations of evidence-based approaches are utilized for substance abuse treatment in Orange County. Aspects of the traditional self-help programs such as the 12-step programs are integrated with more clinical approaches to substance abuse treatment.

Narcotic Replacement Therapy (NRT)

NRT is for clients with opioid addiction needing narcotic replacement maintenance therapy (maintenance) or narcotic replacement detoxification (detox). Maintenance includes daily methadone dosing and full scope outpatient counseling services. Services are provided seven days a week, 365 days a year. Dosing is available to pregnant women who are incarcerated and already on methadone, such as those that are flash incarcerated.

Mental Health Services for the Severely and Persistently Mentally Ill (SPMI)

HCA Adult Mental Health Services (AMHS) provides recovery mental health services and episodic treatment services which emphasize individual needs, strengths, choices, and involvement in service planning and implementation. Services include assessment, evaluation, individual family and group therapy, substance abuse treatment, intensive case management, medication management, rehabilitation, linkage and consultation, placement, plan development, crisis intervention and specialized residential services.

Realignment clients are eligible to participate in all levels of mental health care, but have primarily been treated in the four regional outpatient clinics. The criteria for the outpatient programs includes adults who have a serious and persistent mental disorder and also those that have a co-occurring SUD and impairment in their ability to function in the community or who have a history of recurring substantial functional impairment, hospitalization or symptoms.

Full Service Partnership (FSP)

HCA contracts with various agencies to provide Full Service Partnership programs for people living with a serious and persistent mental illness. These programs provide a high intensity level of care to traditionally underserved clients who are homeless or at risk of becoming homeless. During this last year, Realignment services were expanded and included in a contract with College Community Services, Opportunity Knocks, to provide specialty services to the Realignment population. Opportunity Knocks has a long history of addressing the unique needs of participants who have both a history of mental illness and incarceration.

Mental Health Services for the non-SPMI dually diagnosed

Not all individuals who have mental health disorders are able to meet established SPMI criteria to receive services from AMHS. One service that was implemented in July, 2012 was the placement of a part-time HCA psychiatrist, out-stationed at OC Probation along with the Assessment team, to provide short-term psychiatric care for individuals that do not qualify for County mental health services. Most do not qualify for these services. Many have a psychiatric history and have been prescribed psychiatric medications while in prison. The HCA psychiatrist conducts an initial assessment at the Santa Ana Probation office to determine appropriateness for medication and prescribes accordingly. The psychiatrist sees the client one to three times to ensure medication compliance and the HCA case manager works in conjunction with the psychiatrist to ensure the client can obtain the medication. As of September 2013, the psychiatrist has treated 127 non-SPMI clients.

Medication Assistance

The Realignment program has developed two tracks to manage medications. When the individual meets criteria for specialty mental health services, they are linked with the appropriate clinic or level of care, which includes a psychiatrist to assess, prescribe, and monitor medications. When the individual does not meet medical necessity but has been prescribed medications while incarcerated, the HCA psychiatrist provides a brief assessment and medication services until the individual can access a community psychiatrist. The medication assistance is a crucial element in working with the Realignment population and will continue to expand as needed.

In-Custody Health Care Services

From inception of Realignment through September 30, 2013, In-custody Correctional Health Services has received hospital claims in excess of \$1,054,380 for inpatient hospitalization of Realignment inmates. Eighty-nine (89) individual inmates have been hospitalized with the highest single claim for an individual reaching \$115,967.

All primary care physician services are provided within the jail; however, when an Realignment inmate needs specialty services, they are transported to specialty medical clinics off-site (such as, Cardiology, Nephrology, Oncology, OB, Surgery, etc.). There are currently nearly 20 specialty clinic services available with an average of 177 specialty clinic visits conducted for Realignment individuals over each six month period. This equates to approximately 10 percent of specialty clinic services business—which also closely mirrors the percentage of Realignment inmates (13%) in the overall jail population.

In-custody Correctional Health Services triages and screens every Realignment inmate in the jail to determine their medical and mental health needs and subsequent treatment and medication plan. (the volume of patients is reflected in the Sheriff's section of this report, as all in-custody inmates on the Sheriff's census are also managed by in-custody healthcare staff.)

Detoxification Services

Social Model Detox

Many offenders relapse on drugs or alcohol after their release from custody, and express a desire for treatment. In order to start effective treatment, many individuals need to detox from alcohol or their drug of choice. HCA currently contracts with three social model detox providers. Social model detox requires intense supervision and monitoring of individuals as they detox. Social model detox does not administer medication. Individuals requiring medication or medical detox are referred to a “medical detox provider”. HCA plans to purchase, through existing providers, additional non-medical detox beds to be dedicated to the Realignment population. As of September 2013, 97 clients have utilized social model detox services. Social model detox is being provided by Woodglen Recovery Junction, Roque Center, and CHCADA (California Hispanic Commission on Alcohol and Drug Abuse) operating Unidos.

Medical Model Detox

In Orange County, a large number of individuals each year seek detoxification services from alcohol and other drugs. Most of these individuals are referred to residential social model detoxification programs. However, some of these individuals are in need of medical attention and supervision due to acute withdrawal symptoms. Additionally, medically supervised inpatient service is the safest way to provide detoxification from alcohol and/or other drugs in cases which could otherwise be life-threatening. Services include medically monitored inpatient substance abuse detoxification under the direction of a physician. These include a 24-hour “on call” physician and 24-hour nursing care, medication prescriptions, individual and/or group counseling, and discharge planning including linkage to residential treatment. Services are critical for participants who are unable to detox in an unsupervised environment as they run the risk of medical complications and may end up requiring acute emergency care. Medical detoxification serves clients with substance use disorders and individuals that need detoxification from substances including but not limited to alcohol and benzodiazepines. Services are available for up to 10 days. There is currently one provider, Behavioral Health Services, and two locations in Pomona and Long Beach. As of September 2013, nine clients have utilized this service.

Methadone Detoxification

Methadone Detoxification is daily methadone dosing used in decreasing medically determined dosage levels for a period of no more than 21 days to reduce or eliminate opioid addiction. As of September 2013, nine clients have enrolled in detox, and six in maintenance services. All clients are tested for methadone compliance and illegal substances at least once a month. Western Pacific Clinic is the only provider of this service. They have two locations, one in Stanton and one in Fullerton.

Transitional Housing/ Shelter Beds

A large majority of the individuals being released into the Realignment program present with multiple mental health diagnoses, substance abuse diagnoses, trauma history, and medical issues. In addition, the individuals who are being assessed for services have few resources available to them immediately upon release, no housing options or employment, and limited job skills. The housing options that are currently available to the offender outside of family members and/or friends, is temporary community shelters. The Realignment program increased the number of contracted shelter beds with Wysteria House, a community shelter which is supportive of the Realignment clients who have co-occurring mental illness and SUDs. Residents are given assistance and monitoring in taking medication, scheduling treatment appointments, transportation, and performing daily living skills, such as grooming and hygiene. Adult Mental Health Outpatient Services can assist individuals to locate vacancies and access residential care homes and secure more permanent housing. There is currently one provider, California Hispanic Commission on Alcohol on Drug Abuse (CHCADA), operating Wysteria House. HCA plans to continue to identify and develop appropriate structured housing options for the Realignment population in need of behavioral health services.

Sober Living with Outpatient Care

While the behavioral health programs were implemented over the past year, a need was identified for supportive housing, such as sober living. Sober Living homes must meet the Orange County Adult Alcohol and Drug Sober Living Facilities Certification Guidelines, which is overseen by the Sheriff's Department. Research has shown that a sober living environment provides for a safe and supportive interim housing option for offenders during their transition back into the community.⁷ All such homes have house rules and mandatory curfews. Clients may stay in sober living up to four months as long as they are actively engaged in their treatment. Clients have the option to continue to self-pay for sober living after their four months have expired. Almost all of the clients in sober living have graduated from 90 day treatment programs and need additional support to maintain sobriety. All sober living providers require participation in self-help support groups such as 12-step programs that address numerous addictive and dysfunctional behaviors. All residents are subject to random drug tests. As a condition of receiving sober living housing, participants are required to participate in outside care, either through OC Probation's Day Reporting Center (DRC) or County-approved outpatient treatment services.

Research indicates when housing is combined with evidence based programming, there is a higher likelihood of reducing recidivism.⁸ An ongoing Request for Application (RFA) for Sober Living housing released in 2012 resulted in two contracts being awarded to Clean Path Recovery, a men's sober living, and Collettes Children Home, a sober living for women and children. Since the release of the initial RFA, one additional provider, Grandma's House of Hope, a sober living for women, has signed contracts to provide services.

⁷ Douglas L. P. and Henderson, D. Psychoactive Drugs, (2008 June); 40(2): 153–159)

⁸ Hiller, M.L., Knight, K and Simpson, D.D. (Addiction - 1999 June; [94](#), (6), 833–842)

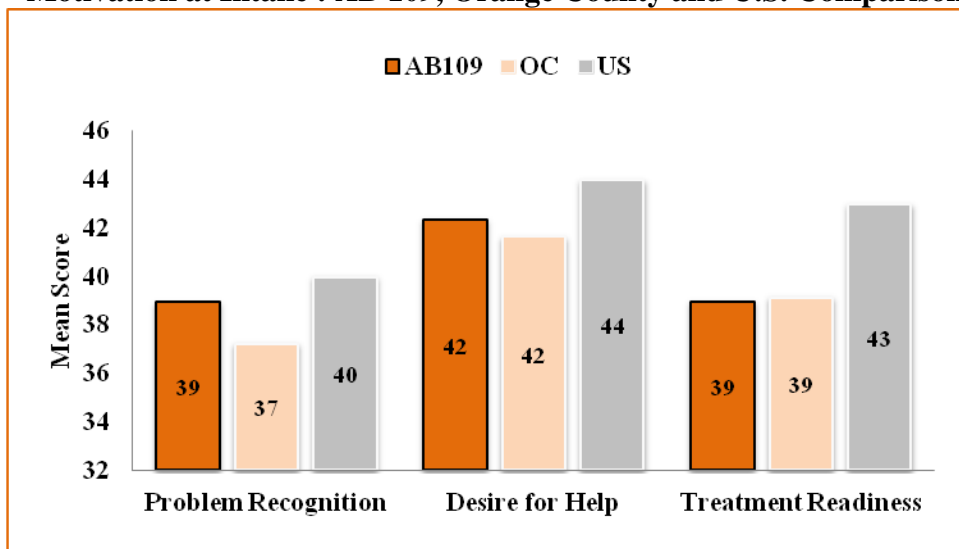
Substance Use Disorder Residential and Outpatient Treatment

Client Psychosocial Functioning: Motivation, Engagement, and Social Support

Two self-administered standardized measures, developed by Texas Christian University Institute for Behavioral Research, are used to assess psychosocial functioning. The Client Evaluation of Self at Intake (CESI) is used to measure clients' level of motivation at intake. The Client Evaluation of Self at Treatment (CEST) is used to measure motivation, as well as client engagement in treatment (i.e., rapport with counselors and participation in treatment), peer support within the program, and social support outside of the program at various time points during treatment, including at discharge. These measures are significant predictors of treatment success. Research shows that increasing the scores on these scales equals to a greater chance of success in recovery.⁹ They also provide a valuable tool to gauge ongoing treatment. Increased scores on the scales indicate specific, positive treatment outcomes.

At intake, Realignment clients had lower motivation than clients seeking substance abuse treatment nationwide, and motivation comparable to (or slightly higher) than the average client entering substance abuse treatment in Orange County.

Motivation at Intake : AB 109, Orange County and U.S. Comparisons*

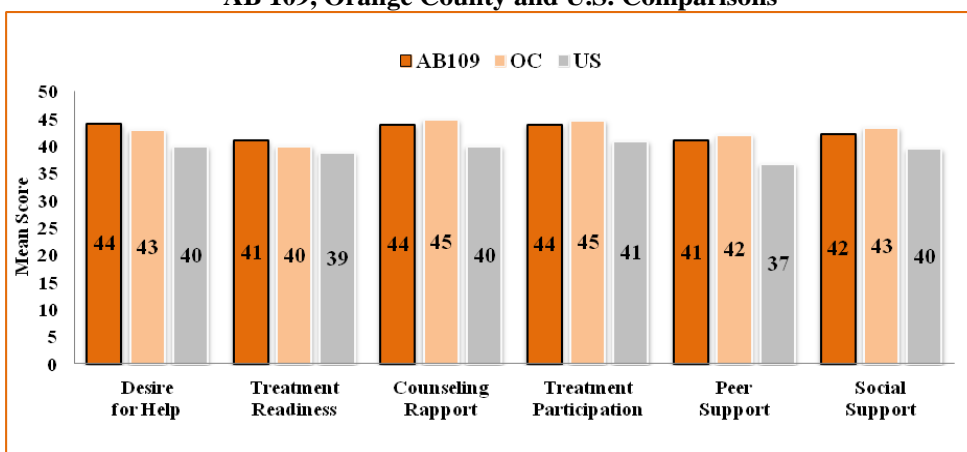


*Based on 871 CESI forms completed by clients on Realignment between Nov. 2011-Sept. 2013. Norms based on FY2012-13 data for all ADAS clients who completed a CESI

⁹Simpson, D.D., (September 2002). Focus on Treatment Process and Outcomes Understanding clinical processes to improve treatment . Retrieved from IBR Web Site: <http://www.ibr.tcu.edu/pubs/newslet/RS-TrtProc-02.pdf>

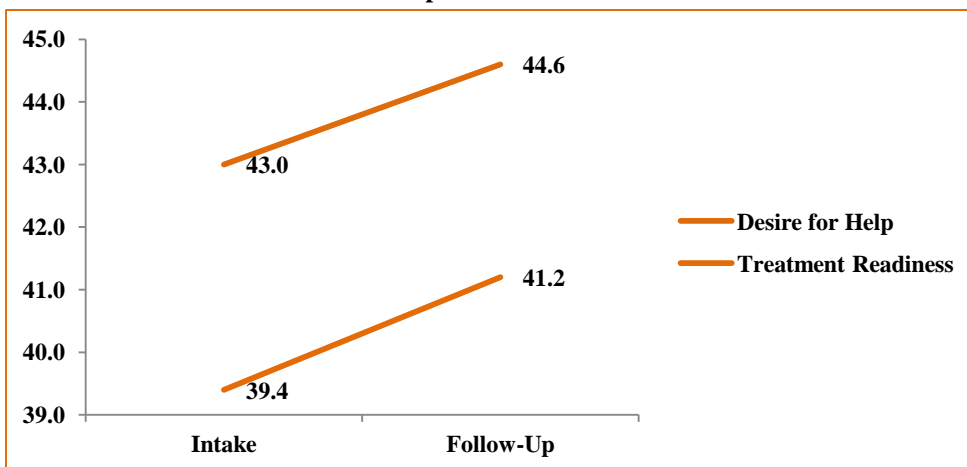
After receiving treatment, Realignment clients had higher motivation than clients in Orange County in general, and higher than clients nationwide. This suggests that Realignment clients fare well in terms of their motivation for recovery when compared to other clients in Orange County and the country. Realignment clients also showed better engagement, peer support in the program, and social support outside of the treatment program after receiving services than clients nationwide. Realignment clients showed similar engagement and support scores to other clients entering substance abuse treatment in Orange County, suggesting that Realignment clients respond to treatment similarly to other substance abuse clients in Orange County.

**Motivation, Engagement and Support Scores After Treatment:
AB 109, Orange County and U.S. Comparisons**



Finally, Realignment clients showed statistically significant improvements in motivation for recovery over the course of treatment. Specifically, the Desire for Help factor was higher at follow-up ($M = 44.64$, $SD = 4.88$) than at intake ($M = 42.99$, $SD = 6.19$), $t(172) = -3.59$, $p < .01$. Additionally, the Treatment Readiness factor was higher at follow-up ($M = 41.21$, $SD = 5.79$) than at intake ($M = 39.36$, $SD = 6.03$), $t(172) = -4.21$, $p < .01$. These data indicates that Behavioral health services had an overall significant positive impact on offender recovery.

**Motivation Over Course of Treatment: Improvements in
Desire for Help and Treatment Readiness**



Adult Mental Health Service (AMHS) Outcomes

From March 2013 through August 2013, 45 individuals received treatment from the AMHS Realignment program. Of these, 100 percent were diagnosed with a co-occurring substance abuse disorder, two percent have thus far, completed their probation obligation, and two percent were re-arrested. Based on the Milestones of Recovery Scale, administered monthly to each participant, 51 percent received a score of five or better which indicates that the participants are actively engaged in the treatment process but not generally coping successfully at this point in time. Historically, this is a population with very poor coping strategies and does not voluntarily participate in treatment. A rating of 51 percent is a positive indication that the participants are actively participating and benefiting from services.

Full Service Partnership Outcomes

Tracking participant outcomes is an integral part of the total program as it provides valuable information enabling Opportunity Knocks to continuously tailor services and support to achieve the best possible success for all participants. Three areas of particular importance of data collection for Opportunity Knocks include reducing incidences with the criminal justice system, increasing employment, and aiding in participants' integration back into society and social activities. Data analysis and outcomes assist the program in many areas, including identifying areas of need, analyzing data in an effort to discover connections within the areas of diagnosis, recidivism, housing, employment and education. The program will continue to utilize outcomes as a guide in an effort to provide services that are coordinated, effective, and comprehensive that focuses on participants' strengths and self-identified goals and objectives. Opportunity Knocks has an average caseload of 15 Realignment clients. To date, 20 clients have enrolled and of these, 91 percent were diagnosed with a co-occurring substance abuse disorder, one percent completed their probation obligation, and one percent were re-arrested.

Table 5: Outcomes through August 2013:

	# of Clients	Percent
Secured Housing	10	50%
Arrested	7	35%

Narcotic Replacement Therapy Program Outcomes

Outcomes for this program are inclusive of all County-funded NRT clients. For FY 2013-14 and FY 2014-15, it is anticipated that the program will show similar or higher outcomes than indicated in FY 2012-13.

Table 6: NRT Program Outcomes

	FY 2011 -12	FY 2012 -13
Methadone Compliance	97%	73%
Abstinence from illegal substances	70%	51%

Medical Detox Program outcomes

Outcomes for medical detoxification are measured by completion rates. For FYs 2013-14 and 2014-15, it is anticipated that the program will have similar or higher completion rate as reflected in FY 2012-13.

Table 7: Medical Detox Outcomes

	FY 2011-12	FY 2012-13
Completion Rate	72%	72%

Sober Living outcomes

Outcomes for sober living services are measured by completion and retention rates. Current sober living data indicates that the average retention rate in sober living is 79 percent.

Table 8: Sober Living Outcomes

Admitted	Completed	Average Completion Rate	Average Retention Rate	Did Not Complete
90	33	58%	79%	24

Client Satisfaction Survey

SUD's client feedback regarding services is collected by HCA staff via client satisfaction surveys administered periodically. See table below for each provider for FY 2012-13¹⁰:

Table 9 : Client Satisfaction by Treatment Provider and Type*

Provider	Type of Treatment	% of Clients Very Satisfied or Satisfied
Cooper Fellowship	Residential	92%
Phoenix House	Residential	66%
Unidos	Residential	85%
Woodglen Recovery	Residential	99%
Associates in Counseling	Outpatient	NA
Changes for Recovery	Outpatient	NA
KC Services	Outpatient	100%
La Familia	Outpatient	NA
Mariposa	Outpatient	99%
Phoenix House Outpatient	Outpatient	84%
Western Pacific	Outpatient Methadone	98%

*Providers without a score did not have contracts in FY 2012-13

¹⁰ Internal HCA document. These surveys are administered by HCA Program Evaluation Specialist Staff for assessing program quality.

Literature

HCA created two brochures for Realignment clients this past year. The first one is called “An Introduction to 12-Step Programs”. This brochure explains what a 12-step meeting is and how it works. Approximately 2,000 have been distributed since it was developed in August 2013. In conjunction with OC Probation, HCA created a brochure to provide written information to PCS/MS clients about behavioral health services. This brochure is being distributed at PCS/MS pre-release orientations in the jails.

Proposed New Services: Vivitrol

HCA is currently procuring Medication Assisted Treatment (MAT) Services. The release of the Request for Application is expected to occur in December 2013 with services starting in January 2014. The primary goal of this program is to treat opiate and alcohol addiction in persons with substance abuse disorders who are released either from prison on PCS or from Orange County (OC) jails on MS.

Research shows that MAT is a successful approach to treating SUDs.¹¹ MAT uses medications in combination with counseling and behavioral therapies to provide a whole-patient approach to the treatment of SUDs. One such medication, Vivitrol, also known as injectable, long acting Naltrexone, is a Food and Drug Administration (FDA) approved opiate antagonist. Vivitrol blocks the opiate receptors, thus denying the euphoric effect of the opiate. Vivitrol works by blocking the effect that alcohol or opioids has on the brain, and reduces the cravings that many people experience after they quit. It has been demonstrated to be effective in the treatment of opiate addiction and alcoholism, and is given to the patient by intramuscular injection once every thirty (30) days. The initial Vivitrol injection will be given to a referred participant in the detention facility approximately one week prior to their release, and thereafter by the selected treatment provider. Participants who do not receive an initial injection in the detention facility may also be referred for services. The treatment provider will ensure that Vivitrol is administered by a health care professional, such as a physician, nurse, or physician assistant in accordance with protocols set forth by the pharmaceutical company.

A medical evaluation is performed, at minimum, every 90 days. Each evaluation includes a drug test. Females of child bearing age shall be assessed and a pregnancy test given to qualified participants. Participants requiring additional injections shall be referred, at a minimum, every 90 days, to HCA assessment staff for approval for continued participation. Clients must concurrently receive outpatient treatment/counseling services while receiving Vivitrol MAT. Program eligibility requires the participant to be enrolled in and receive Vivitrol treatment services from the same approved Realignment outpatient treatment/counseling provider. Additionally, participants must maintain compliance with their treatment plan, and attend regularly scheduled outpatient appointments.

¹¹American Association for the Treatment of Opioid Dependence, Inc. (2013) Retrieved from <http://www.aatod.org/policies/policy-statements/>
<http://www.dpt.samhsa.gov/>



XII. Recidivism: New Crime Convictions

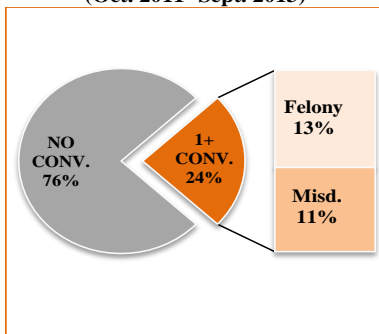
In order to measure the reoffending behavior of individuals under supervision, individuals under each supervision type were tracked for one year (up to September 30, 2013) from the date of their placement on probation, release from prison to PCS or release from jail to MS to see if they were convicted of a new crime (both felonies and misdemeanor) within that period. In order to determine new crime convictions, OC Probation used the Orange County Superior Court records for convictions that occurred between October 1, 2011 and September 30, 2013 for analysis.

Supervision Type	N	Description	Follow-Up Period (thru 9/30/2013)
Probation	4,217	New felony offenders placed on formal Probation in Orange County between October 1, 2011 and September 30, 2012	One year after placement on formal Probation
PCS	2,281	Individuals released from prison between October 1, 2011 and September 30, 2012	One year after release from prison
MS	429	Individuals sentenced to Mandatory Supervision <u>and</u> released from jail between October 1, 2011 and September 30, 2012	One year after release from jail

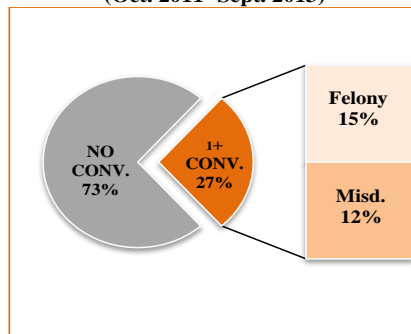
The vast majority of the three groups supervised by OC Probation did not have convictions for new crimes within one year of placement on probation or release from prison or jail: 76% under Probation, 73% under PCS, and 69% under MS had no convictions for new crimes within one year of entering supervision. Of those with convictions for new crimes (Probationers = 23.9%; PCS = 26.8%; MS = 31%), the most serious crime for which they were convicted over a one-year period was nearly divided equally between felonies and misdemeanors.

Examining new convictions among the three categories of supervision shows that less than one-third of individuals under each of the supervision categories have committed new crimes. Of the 4,217 individuals placed on formal Probation between October 1, 2011 and September 30, 2012, 1,006 or 23.9% were convicted of a new crime. PCS individuals released from prison during the same time period had the second highest conviction rate of the three groups despite having the highest average risk scores (26.9 vs. 20.3 for Probationers and 26.0 for MS); of the 2,281 PCS individuals, 611 or 26.8% had a conviction for a new crime. MS offenders have the highest new crimes conviction rate 31% (133 of the 429 individuals).

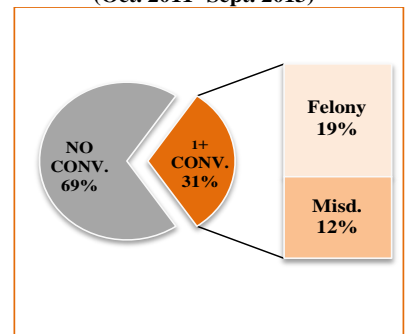
Probation Convictions
(Oct. 2011- Sept. 2013)



PCS Convictions
(Oct. 2011- Sept. 2013)



MS Convictions
(Oct. 2011- Sept. 2013)





Convictions: New Crimes Cont'd

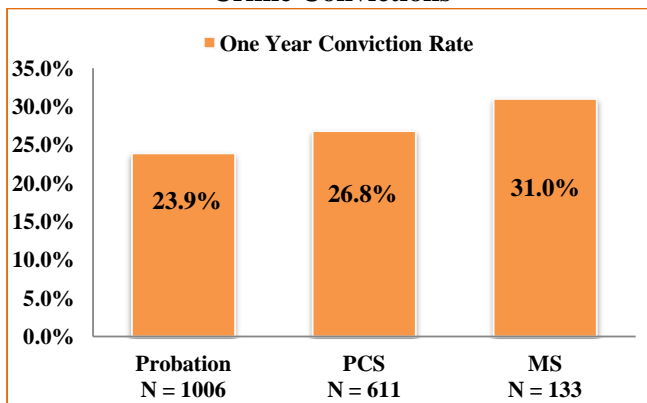
PCS individuals with subsequent convictions had an average of 1.5 convictions, while MS individuals, like the Probationers with subsequent convictions had an average of 1.3 convictions.

Time to Violation

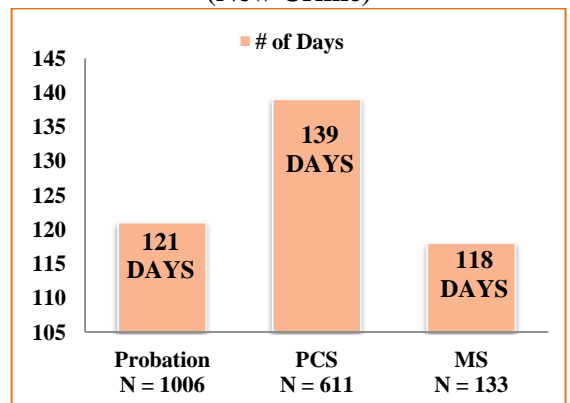
Of the three groups, PCS individuals had the longest period between release to supervision and the commitment of a violation averaging 139 days or 4.6 months. The ability of officers to impose flash incarcerations on PCS individuals as a sanction for violations of supervision terms may have played a role in the lengthened time-to-violation. Flash incarceration is a major component of Project H.O.P.E., short for Hawaii's Opportunity Probation with Enforcement, which sends a message of personal responsibility and accountability and includes a consistently applied and timely mechanism for dealing with an offender's non-compliance.¹ Designed for probationers identified as being at high risk of a probation violation, Project H.O.P.E. monitors offender behavior and rapidly punishes violations with relatively mild sanctions – typically a few days in jail – and provides much-needed structure to offenders whose lives are often in disarray.² Although the effect of flash incarceration cannot be isolated from the other components, the evaluation of Project H.O.P.E. in 2009 showed that H.O.P.E. participants had lower rates of positive drug tests, missed fewer probation appointments, had fewer revocations, and spent much less time in prison than the comparison group (Probation-as-Usual group).¹

MS individuals not only had the highest conviction rate for a new crime of the three groups (31%), they also committed their first new crime sooner than PCS offenders or Probationers. MS offenders also violated the terms of their supervision sooner than PCS offenders or Probationers (3.9 months after release from jail). Probationers had an average number of days to their first violation (based on the violation date, not the conviction date) of 121 days or four months.

One-Year Conviction Rate: Individuals with New Crime Convictions



Average Time to First Violation (New Crime)



¹Hawken, A. & Kleiman, M. (2009). Managing Drug Involved Probationers with Swift and Certain Sanctions: Evaluating Hawaii's HOPE. Submitted to the National Institute of Justice (Full report: <https://www.ncjrs.gov/pdffiles1/nij/grants/229023.pdf>)

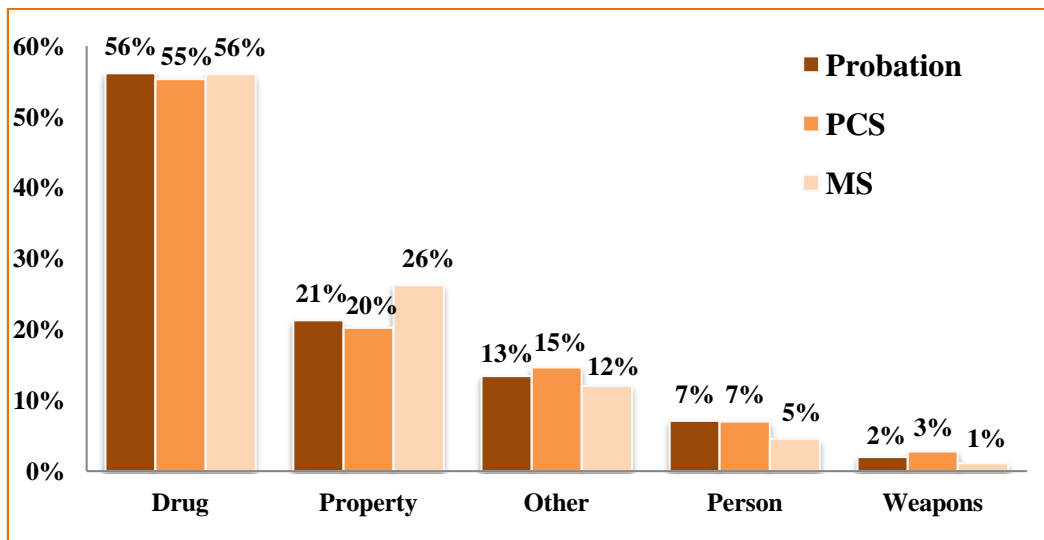
²Hawken, A. (2007, April 10). H.O.P.E. for Reform. *The American Prospect*. Retrieved from <http://prospect.org/article/hope-reform>



Convictions: Key Findings

As to the categories of crimes committed by the three groups, Drug Crimes (both felonies & misdemeanors) make up the majority (55 – 56%) followed by Property Crimes (20 – 26%). Weapons and Crimes Against Persons comprise the smallest proportions across all groups. Crimes in the “Other” category include but are not limited to: driving under the influence and similar vehicle code crimes, public intoxication and loitering, possession of burglary tools, disobeying domestic relations court order and falsely representing self to officer.

One-Year New Convictions by Category



Convictions for New Crimes Key Findings:

1. The vast majority of the three groups supervised by the OC Probation do not have convictions for new crimes within one year post-custody or adjudication: 76% of Probationers, 73% of PCS, and 69% of MS have no convictions for new crimes within one year.
2. All of the individuals in the sample were under supervision for felony offenses, and for the small group who committed new crimes (Probationers = 23.9%; PCS = 26.8%; MS = 31%), almost half of their new convictions were for less serious misdemeanor crimes.
3. Of those with convictions for new crimes, the average time to their first violation was approximately four months.
4. Drug crimes make up the majority of the convictions for all the groups (Probationers & MS = 56% and PCS = 55%) followed by Property Crimes (Probationers= 21%; PCS = 20%, MS = 26%).



XIII. Glossary

Abbreviation	Description
AB 109	Public Safety Realignment Act of 2011
CAO	County Administrative Officers
CDCR	California Department of Corrections and Rehabilitation
CJI	Crime and Justice Institute
CORE	Center for Opportunity, Rehabilitation, and Education
CSAC	California State Association of Counties
CSG	Council of State Governments
DA	District Attorney
DPO	Deputy Probation Officer
DRC	Day Reporting Center
EBP	Evidence-Based Practices
EM	Electronic Monitoring
GED	General Education Development
GPS	Global Positioning System
HCA	Health Care Agency
HD	Home Detention
ICMS	Integrated Case Management System
IEPP	Implementing Effective Probation Practices
Medi-Cal	Health coverage for low-income children, pregnant women, seniors and persons
OCCCCP	Orange County Community Corrections Partnership
OCDA	Orange County District Attorney's Office
OC Probation	Orange County Probation Department
OCPD	Public Defender
PC	Penal Code
PCS	Postrelease Community Supervision
PV	Probation or Postrelease Community Supervision Violation



XIV. Realignment-Related Links

TOPIC/TITLE	LINK
Board of State and Community Corrections (BSCC) Community Corrections Partnership Plans	http://www.bscc.ca.gov/board/realignment-resources/community-corrections-partnership-plans
CDCR: Realignment Overview	http://www.cdcr.ca.gov/realignment/index.html
CDCR: Realignment 1-Year Report	http://www.cdcr.ca.gov/realignment/docs/Realignment%206%20Month%20Report%20Final_5%2016%2013%20v1.pdf
CDCR: 2011 Adult Institutions Outcome Evaluation Report	http://www.cdcr.ca.gov/Adult_Research_Branch/index.html
Chief Probation Officers of California	http://www.cpoc.org/assets/Realignment/dashboard_county.swf
Criminal Justice Realignment: Court Realignment Data—First Quarter 2013	http://www.courts.ca.gov/documents/lr-2013-Court-Realignment-report-1st-qtr.pdf
<i>Funding Public Safety Realignment by Mia Bird and Joseph Hayes</i>	http://www.ppic.org/content/pubs/report/R_1113MBR.pdf
Orange County-PrCS	http://ocgov.com/gov/probation/prcs
Public Safety Realignment: California at a Crossroads A Report by the ACLU of California	https://www.aclunc.org/sites/default/files/public_safety_realignment_california_at_a_crossroads.pdf
<i>Tough on Crime (on the State's Dime): How Violent Crime Does Not Drive California Counties' Incarceration Rates - And Why it Should</i> by W. David Ball	http://digitalcommons.law.scu.edu/cgi/viewcontent.cgi?article=1163&context=facpubs
UCR Statistics Table Tool	http://www.ucrdatatool.gov/index.cfm
<i>Voices from the Field: How California Stakeholders View Public Safety Realignment</i> by Joan Petersilia, Ph.D. et al.	http://www.cdcr.ca.gov/Adult_Operations/FOPS/docs/ACP-Fact-Sheet-Final.pdf



Orange County Probation Department

Steven J. Sentman, Chief Probation Officer



Profiles of Actively Supervised Adults on Probation, PostRelease Community Supervision (PCS), and Mandatory Supervision (MS) As of September 2013

	Probationers	PCS	MS
Actively Supervised (excludes Warrants)	12,100	1,692	747
Gender			
Male	76%	89%	78%
Female	24%	11%	22%
Average Age	32.8	36.6	34.7
Ethnicity			
White	50%	47%	57%
Hispanic	37%	39%	33%
Black	4%	7%	3%
Asian/Pacific Islander	7%	5%	6%
Other	3%	2%	2%
Initial Convicted Offense			
Felony	93%	100%	100%
Person (e.g., robbery, assault)	22%	13%	11%
Property (e.g., burglary, theft)	19%	29%	34%
Drug	44%	44%	49%
Other	8%	14%	6%
Misdemeanor	7%	0%	0%
Initial Risk Factors			
Initial Risk Score	20.3	26.9	26.0
Initial Risk Classification			
High (21+)	62%	91%	90%
Medium (9 - 20)	25%	7%	9%
Low (0 - 8)	14%	2%	2%
Prior Probation Violations			
None	39%	6%	14%
One or more	61%	94%	86%
Substance Abuse (Drugs)			
No Problem	19%	14%	10%
Occasional to Frequent Abuse	81%	86%	90%
Age at First Conviction			
24 or older	34%	16%	25%
20-23	25%	24%	23%
19 or younger	42%	60%	53%
Number of Prior Periods of Probation Supervision			
None	39%	6%	11%
1+ prior	61%	94%	89%
Number of Prior Felony Convictions			
None	48%	5%	13%
One	19%	7%	13%
Two or more	33%	88%	73%

Prepared by OC Probation Research Division



Orange County Probation Department

Steven J. Sentman, Chief Probation Officer



AB109 Realignment Monthly Stats September, 2013

PostRelease Community Supervision (PCS)

September, 2013	Cumulative (from October 1, 2011)
Releases from Prison 68	3240
(Based on CDCR's projected release dates and are subject to change. Cumulative numbers reflect the most current release date information.)	
Flash Incarceration*	From Oct. 1, 2011- Sept. 30, 2013, 41.5% had at least one flash.
72% in September were due to a technical violation/warrant.	68% due to a technical violation/warrant.
28% in September were due to a new law violation.	22% due to a new law violation.
Revocations*	35.4%
Warrants*	36.4%
(* Individuals ÷ Cumulative Releases from Prison)	
Status of PCS Releases as of September 30, 2013	
Actively Supervised (PCS)	1692
On Active Warrant	439 (includes 211 ICE warrants)
Discharges Pursuant to 3456(a)(3)	666
Other Discharges/Transfers	443
Total	<u>3240</u>
Profile - All PCS Releases	
Average Age	37.66
Gender	
Male	89%
Female	11%
Ethnicity	
Hispanic	41%
White	44%
Black	7%
Asian	5%
Other/Unk	2%
Controlling Offense Category	
Person	8%
Property	35%
Drug	42%
Weapons	5%
Other/Unk	9%

Mandatory Supervision (MS)

September, 2013	Cumulative (from October 1, 2011)
Total MS Convictions 88	2008
(A count of total convictions, not individuals)	
Individuals with MS Convictions	
Actively Supervised (Released from Jail)	747
Sentenced, but still in custody	364
On Active Warrant as of September 30, 2013	181
MS Case Terminated/Expired/Other	341
Total	<u>1633</u>

Prepared by OC Probation Research Division



Orange County Probation Department

Steven J. Sentman, Chief Probation Officer



PostRelease Community Supervision Monthly Stats September, 2013

PCS Releases from Prison

City of Residence (*)	September, 2013		On Active Supervision as of September 30, 2013 (**)	
	Total n	% of Total	Total n	% of Total
LA COUNTY	5	7%	34	2%
RIVERSIDE COUNTY	3	4%	17	1%
SAN BERNARDINO COUNTY	3	4%	16	1%
SAN DIEGO/IMPERIAL COUNTY	0	0%	7	0%
OCSD CONTRACT CITIES	3	4%	135	8%
OTHER CA COUNTIES	0	0%	4	0%
OUT OF STATE	0	0%	2	0%
OUT OF COUNTRY	0	0%	1	0%
ANAHEIM	9	13%	259	15%
BREA	1	1%	14	1%
BUENA PARK	4	6%	38	2%
COSTA MESA	2	3%	84	5%
CYPRESS	1	1%	16	1%
FOUNTAIN VALLEY	0	0%	13	1%
FULLERTON	2	3%	65	4%
GARDEN GROVE	4	6%	113	7%
HUNTINGTON BEACH	4	6%	68	4%
IRVINE	2	3%	26	2%
LA HABRA	1	1%	27	2%
LAGUNA BEACH	0	0%	6	0%
LOS ALAMITOS	1	1%	3	0%
NEWPORT BEACH	1	1%	13	1%
ORANGE	4	6%	73	4%
PLACENTIA	2	3%	19	1%
SANTA ANA	8	12%	385	23%
SEAL BEACH	0	0%	5	0%
TUSTIN	1	1%	34	2%
UNKNOWN	5	7%	167	10%
WESTMINSTER	2	3%	48	3%
YORBA LINDA (***)	0	0%	0	0%
TOTAL	68	100%	1692	100%

(*) The City of Residence is based on the offender's address in probation records as of the monthly report production.

(**) Active Supervision includes PCS individuals released from prison and on active supervision by the Probation Department.

It includes individuals in the community and those currently serving local custody for a flash incarceration or revocation.

The total excludes PCS individuals on active warrant status, discharged, transferred to other counties, or terminated for other reasons.

(***) Effective January 5, 2013, the Orange County Sheriff's Department took over police services for the city of Yorba Linda.

Prepared by OC Probation Research Division

Assembly Bill 109 (California Prison Realignment) has two types of supervision:

- 1.) Offenders released directly from prison under Postrelease Community Supervision (PCS or PRCs) per Section 3450(a) PC.
 - 2.) Offenders sentenced at court to serve a sentence in the county jail with supervision is known as Mandatory Supervision or Supervised Release (also called "split sentence") under Section 1170(a)(1) PC.
- Both types of supervision will be provided by Probation and Deputy Probation Officers.

YOUR FIRST APPOINTMENT AFTER RELEASE FROM PRISON

The office location of your first visit is 909 N. Main St., Santa Ana, CA 92701. High-Control offenders are mandated by law (Section 3060.7 PC) to report within 48 hours of release from prison. If that falls on a holiday or weekend you will report to Orange County Juvenile Hall located 331 City Drive, Orange CA 92828. All others have (2) "business" days to report to 909 N. Main St., Santa Ana, CA 92701.

What to bring to your first appointment:

- Birth Certificate and/or documentation of citizenship
- California Driver License or California ID
- Current address and phone number
- 11590 H&S registration or appointment if required
- Employer Information

If you do not have all of this information, have an idea or a plan as to when you will have it.

ORANGE COUNTY PROBATION OFFICE LOCATIONS

Santa Ana Office
909 N. Main Street, Suite 1, Santa Ana, CA 92701
(714) 569-2000

Manchester Office Building
4th & 5th Floor
301 The City Drive, Orange, CA 92868
(714) 935-7411

Juvenile Hall
331 The City Drive, Orange, CA 92868
(714) 935-6660

North County Field Services
1535 E. Orangewood Avenue, Anaheim, CA 92805
(714) 937-4500

West County Field Services
14180 Beach Boulevard, Westminster, CA 92683
Adult (714) 896-7500
Juvenile (714) 896-7878

South County Field Services
23141 Moulton Parkway, Suite 110
Laguna Hills, CA 92653
(949) 707-3660

San Juan Capistrano Office
32118 Paseo Adelanto, Suite 1-A
San Juan Capistrano, CA 92675
(949) 248-3220

Adult Day Reporting Center (DRC)
901 Civic Center Street, Santa Ana, CA 92701
(714) 415-7400
Fax (714) 542-0179

Center for Opportunity, Reentry and Education
(CORE)
2823 S. Bristol Street, Santa Ana, CA 92704
(714) 769-8740

ORANGE COUNTY PROBATION DEPARTMENT

GUIDELINES TO SUCCESSFUL COMPLETION OF POSTRELEASE COMMUNITY SUPERVISION



Steven J. Sentman
Chief Probation Officer

This pamphlet explains what is expected of you and to assist you on successful completion of Postrelease Community Supervision (PCS).

GUIDELINES TO SUCCESSFUL COMPLETION OF POST RELEASE COMMUNITY SUPERVISION (PCS)

The terms and conditions of PCS are set by law (Section 3453 PC). Additional conditions may be added by your assigned Probation Officer based upon your current offense & prior record.

- Know your terms and conditions of PCS.
- If you follow the rules and are cooperative, you will successfully discharge.
- Talk to your Probation Officer if you have any questions or problems. Communication is very important in any success.
- Have a positive attitude and an open mind. We want to help you to help yourself.
- Keep your appointments. Failure to report to your Probation Officer or Court could result in negative consequences.
- Complete all counseling and community service as directed.
- Do not use drugs or abuse alcohol. If you have a substance abuse problem, admit it and seek treatment.
- Maintain a legitimate residence. Avoiding supervision and not living where you say you do is a common mistake. You will end up in custody. Prior to release, make sure your family, relatives, or friends know you will be supervised and it is O.K. for you to live in their home upon release. Plan ahead!
- Don't hang out with negative "old friends". Surround yourself with positive people.
- Do not break the law. If you do have police contact or arrest, report it immediately to your Probation Officer.

- One of the Probation Department's main goals is to protect the community. If you violate PCS in a way that indicates you are at risk to reoffend, your probation officer may arrest you to protect the community.

If you violate your terms & conditions of PCS, you will be held accountable. Your Probation Officer can increase your level of supervision including testing, reporting, outpatient program, residential program, community service, GPS, or referral to a Day Reporting Center. You are also subject to additional custody time if you violate including:

Flash: 1-10 days in local jail. No formal hearing is required and is at the discretion of the Probation Officer.

Formal Revocation: similar to a formal probation or parole violation and requires a Court hearing (180 day maximum lid per occurrence and is served at local jail).

FREQUENTLY ASKED QUESTIONS

Who will supervise me?

You are under the jurisdiction of the Probation Department and will be supervised by a Deputy Probation Officer for up to 3 years after your release.

In addition to my Probation Officer, can the police check on me or conduct a search at my residence?
Yes, you are subject to "search" by ANY peace officer.

Can I do "mail-ins"?

Based upon your overall POSITIVE progress, your Probation Officer may decrease your level of supervision which could include phone call, mail-in, or "kiosk" reporting. This must be earned after a sufficient period of supervision and you must be in compliance with the overall terms and conditions of your PCS supervision.

Can I live in a different county?

Yes. Your PCS case will be assigned to the appropriate jurisdiction based upon verified, approved, and documented residence. You will be required to report to your Probation Officer regularly until your case is transferred. Plan ahead and confirm your residence prior to your release.

Can I move to another state?

Your request to live outside of CA in another state is governed by Federal Law (*Article I, § 10 of the United States Constitution and pursuant to Title 4, Section 112(a) of the United States Code*). You must have a legitimate reason AND receive prior permission from the receiving state prior to your move. This formal process can take up to 6 months including verification of residence in the other state. You will remain in CA under PCS supervision and report to your Probation Officer until the other state says "yes" you can move there.

When am I discharged from PCS?

You have up to 3 years of supervision. You are eligible for discharge after 6 months of successful supervision at the DISCRETION of the Probation Officer. The law MANDATES "discharge" upon successful completion of 12 months of continuous supervision ("successful" is defined as no custodial sanction). It is in your best interest to cooperate in your rehabilitation prior to and after your release.

MISSION STATEMENT OF

ORANGE COUNTY

PROBATION DEPARTMENT

As a public safety agency, the Orange County Probation Department serves the community using efficient and research-supported corrections practices to:

* Reduce Crime

* Assist the Courts in managing offenders

* Promote lawful and productive lifestyles

* Assist Victims



SAVE THE DATE

Thursday, January 23, 2014

10:00 a.m. to 4:00 p.m.

INCREASING SAFETY & REDUCING COSTS UNDER REALIGNMENT & THE AFFORDABLE CARE ACT

Co-Sponsored by:

Partnership for Community Excellence, a Project of California Forward
The California Endowment
Californians for Safety and Justice
Community Oriented Correctional Health Services

Hosted by San Diego County

This one day convening is provided at no cost and is designed to assist counties in creating strategies to take full advantage of the opportunities afforded by the Affordable Care Act to increase access to health care, especially behavioral health care, for offenders and reduce recidivism and county costs. The day will include presentations from experts, structured group discussions and county team strategy sessions. Learn more [here](#).

OBJECTIVES OF CONVENING

- Learn how to leverage the increased opportunities for health coverage under ACA and the increased flexibility and local responsibility under Realignment to increase safety and savings;
- Learn how partnerships between county criminal justice and health care systems can increase the number of people receiving services, particularly those with substance use disorders and/or mental illness, and reduce recidivism and costs;
- Identify specific issues, goals or strategies, and partnerships needed to address the unique needs of your county;
- Identify specific next steps for follow up; and,
- Identify potential technical assistance needs.

THIS CONVENING IS DESIGNED FOR:

- County Administrative Officers - Coordinator of the County Team
- Chief Probation Officers
- Sheriffs and their jail health services administrators
- District Attorneys, Public Defenders and the Courts
- Behavioral Health Officials
- Health and Human Services Officials, particularly those with specific knowledge in Medi-Cal including Drug Medi-Cal and enrollment
- Public Health and Social Services Officials
- County or Regional Health Plans' Representatives
- Legislative Affairs Officials

INCREASING SAFETY & REDUCING COSTS UNDER REALIGNMENT & THE AFFORDABLE CARE ACT

Supporting Counties' Strategies & Implementation

CO-SPONSORED BY:

**Partnership for Community Excellence, a Project of California Forward
The California Endowment
Californians for Safety and Justice
Community Oriented Correctional Health Services**

The Partnership for Community Excellence (PCE), Californians for Safety and Justice (CSJ) and Community Oriented Correctional Health Services (COCHS) have partnered to bring small groups of counties together to assist in developing county-specific strategies that take advantage of opportunities provided through the 2011 Public Safety Realignment Act (Realignment) and the Affordable Care Act (ACA) to improve public safety outcomes and reduce county costs. Opportunities include:

**Increased flexibility and local responsibility;
Expanded Medi-Cal eligibility for offenders; and,
Generous federal reimbursement rates for Medi-Cal services.**

OBJECTIVES OF CONVENINGS

- Learn how to leverage the increased opportunities for health coverage under ACA and the increased flexibility and local responsibility under Realignment to increase safety and savings;
- Learn how partnerships between county criminal justice and health care systems can increase the number of people receiving services, particularly those with substance use disorders and/or mental illness, and reduce recidivism and costs;
- Identify specific issues, goals or strategies, and partnerships needed to address the unique needs of your county;
- Identify specific next steps for follow up; and,
- Identify potential technical assistance needs.

CONVENINGS INCLUDE

- Morning presentations by Steve Rosenberg, President of COCHS; and Jenny Montoya Tansey, Research and Information Director for CSJ; with ample time for questions and answers.
- County work sessions guided by a set of questions designed to identify key issues, partnerships, next steps and technical assistance needed.
- The Partnership, along with its partners providing follow up assistance to support counties' success.



SUPPORTING COUNTIES IN IMPLEMENTING THE 2011 PUBLIC SAFETY REALIGNMENT



THE PARTNERSHIP FOR COMMUNITY EXCELLENCE IS SUPPORTED BY GRANTS FROM THE JAMES IRVINE FOUNDATION AND S. D. BECHTEL, JR. FOUNDATION; AND IN-KIND SUPPORT FROM CALIFORNIA FORWARD.

WHY IS THIS OPPORTUNITY IMPORTANT TO MY COUNTY?

The convergence of Realignment and ACA creates significant opportunities that can be leveraged to reduce recidivism and county costs and better integrate public services in counties. A large percentage of the individuals who cycle in and out of the justice system do not have health insurance and suffer from a myriad of health problems, including mental illness and substance use disorders. These untreated or unmanaged health problems, particularly behavioral health disorders, contribute to recidivism and high costs in the justice system.

The generous Medicaid reimbursement rate of 100 percent from 2014 to 2016, then decreasing to 90 percent by 2020, and the plan subsidies provided for those who are not Medicaid eligible, provides enormous opportunities for local criminal justice systems. Widespread health plan enrollment of people in jails and on probation coupled with both currently under-utilized and new health care resources, wholly or partially funded by federal dollars, will result in reduced:

- Jail operating costs;
- Jail population pressures;
- Health care expenditures by probation; and/or,
- County general fund expenditures for health care and criminal justice.

Partnerships between criminal justice and health care systems will be critical to taking full advantage of these opportunities to address the long-standing challenges caused by the prevalence of uninsured individuals with health problems, particularly behavior health problems, in the justice system.

The regional convenings will assist counties in leveraging both the increased opportunities for health coverage under ACA and the increased flexibility and local responsibility under Realignment to increase both safety and savings.

A series of webinars also will be conducted on various aspects of ACA, the interface between ACA and community corrections and a variety of technical aspects of Medi-Cal enrollment and eligibility that will help build overall capacity in counties. Other follow up assistance will be provided as needed.

Counties may want to develop strategies around a different opportunity or challenge and convenings can be arranged to assist in these efforts.

TARGET AUDIENCES

These convenings are designed to move participants from gaining knowledge and understanding to identifying the key elements of a plan to take advantage of this opportunity and next steps. In order for your county to make the most of this convening it is important that key leaders from county administration, criminal justice and health and human services attend. Counties that gained the most and were most successful in developing and following through on the plans they developed at the convenings included the following:

- County Administrative Officers - Coordinator of the County Team
- Chief Probation Officers
- Sheriffs and their jail health services administrators
- District Attorneys, Public Defenders and the Court
- Behavioral Health Officials
- Health and Human Services Officials, particularly those with specific knowledge in Medi-Cal including Drug Medi-Cal and enrollment.
- Public Health and Social Services Officials
- County or Regional Health Plans Representatives
- Legislative Affairs Officials

MORE INFORMATION

Contact Sharon Aungst at Sharon@cafwd.org or 916-529-0912 for more information about how to hold a convening in your county. These convenings are offered to counties at no cost.



Realignment Summit

There are plans for a Realignment summit where Orange County Community Corrections Partnership will be rolling out presentations that cover important and relevant aspects of Realignment, as experienced locally in Orange County. The intended audience for these topics includes city and county leaders, and local criminal justice partners and program providers. A

Some potential topics include:

Topic
What Public Safety Realignment Is/Isn't
Impact of Public Safety Realignment on Orange County
The "Community Corrections Partnership and Its Purpose
Enforcement, Supervision Program, Rehabilitative Strategies
Realignment Challenges/Needs/Gaps
What Works in OC Re-Entry Management
Building Sustainable Collaboration and Community Partnerships
Overall Reduction in Recidivism Action Plan

To date, there have been approximately 120 presentations to local law enforcement, community groups and colleges within Orange County.



AB109 Realignment Monthly Stats
November, 2013

#7
12-19-13



PostRelease Community Supervision (PCS)

Status of PCS Releases as of November 30, 2013 from October 1, 2011

Actively Supervised (PCS)	1698	
On Active Warrant	461	(includes 219 ICE warrants)
Discharges Pursuant to 3456(a)(3)	751	
Other Discharges/Transfers	496	
Total Releases from Prison	3406	

Releases from Prison (Nov. 30, 2013) 69

(Based on CDCR's projected release dates and are subject to change.
Cumulative numbers reflect the most current release date information.)

Flash Incarcerations

November (N=89)

74% in November were due to a technical violation/warrant.
26% in November were due to a new law violation.

Cumulative (October 1, 2011 - November 30, 2013)

From Oct. 1, 2011- Nov. 30, 2013, **41.0%** (N=2815) had at least one flash.

68% due to a technical violation/warrant.
32% due to a new law violation.

Cumulative (from October 1, 2011)

Revocations* 36.2%

Warrants* 37.1%

(* Individuals + Cumulative Releases from Prison)

Profile - All PCS Releases

Average Age	37.72
Gender	
Male	89%
Female	11%
Ethnicity	
Hispanic	41%
White	44%
Black	7%
Asian	5%
Other/Unk	2%
Controlling Offense Category	
Person	8%
Property	35%
Drug	43%
Other/Unk	9%

Mandatory Supervision (MS)

November, 2013

Cumulative (from October 1, 2011)

Total MS Convictions 66 2284

(A count of total convictions, not individuals)

Individuals with MS Convictions

Actively Supervised (Released from Jail)	782
Sentenced, but still in custody	358
On Active Warrant as of November 30, 2013	223
MS Case Terminated/Expired/Other	471
Total	1834