

**SOLANO COUNTY
Community Corrections Partnership
AGENDA**

February 13, 2013

County Events Center – 601 Texas Street
Conference Room A
Fairfield, CA 94533

2:00 p.m. Meeting

MEMBERS

*Christopher Hansen,
Chief Probation Officer

Robert Bloom,
*Workforce Investment
Board*

*Lesli Caldwell,
Public Defender

Birgitta Corsello,
County Administrator

*Don du Bain,
District Attorney

*Patrick Duterte,
*Director Health and
Social Services*

*Tom Ferrara,
Sheriff/Coroner

Halsey Simmons,
*Deputy Director Mental
Health*

Lloyd Gieg,
Genesis House

Carolyn Wold,
*Office of Family Violence
Prevention*

*Christiana Smith,
Deputy Director
Employment & Eligibility
Services*

Jay Speck,
*Superintendent,
SCOE*

Brian Taylor,
*Court Executive Officer
Superior Court*

Andy Williamson,
*Substance Abuse
Administrator*

*Richard Word,
*Chief of Police,
Vacaville*

PURPOSE STATEMENT – Community Corrections Partnership

The mission of the Community Corrections Partnership (CCP) is to discuss issues related to the implementation of various pieces of state legislation that focus on adult criminal offenders, including the realignment of many state public safety functions to local jurisdictions. The overall objective is to reduce the recidivism rate of adult offenders in the local criminal justice system.

Membership of the CCP is defined by the Community Corrections Performance Incentive Act of 2009 (SB 678) and includes the Chief Probation Officer (Chair)*, Presiding Judge of the Superior Court* or his or her designee, a County Supervisor or County Administrator, District Attorney*, Public Defender*, Sheriff*, the head of the Department of Social Services*, the head of the County Department of Mental Health, the head of the County Department of Employment, the head of the County Alcohol and Substance Abuse programs, the County Superintendent of Education, a local chief of police*, a representative of a community-based organization with experience in successfully providing rehabilitative services to persons convicted of criminal offenses, and an individual who represents the interests of victims.

Through AB 109/AB117 the CCP is responsible for recommending a local plan to the county Board of Supervisors (BOS) for the implementation of the 2011 public safety realignment. This legislation also established an Executive Committee within the CCP. Each Executive Committee member is identified with an asterisk (*) above. The Executive Committee is responsible for approving the local plan for recommendation to the BOS.

ITEM

AGENCY/STAFF

Probation/Chris Hansen

- | | | |
|-------------|---------------------------------------|--|
| I. | CALL TO ORDER (2:00 p.m.) | |
| II. | APPROVAL OF AGENDA | |
| III. | OPPORTUNITY FOR PUBLIC COMMENT | |

Pursuant to the Brown Act, each public agency must provide the public with an opportunity to speak on any matter within the subject matter of the jurisdiction of the agency and which is not on the agency's agenda for that meeting. Comments are limited to no more than 5 minutes per speaker. By law, no action may be taken on any item raised during public comment period although informational answers

to questions may be given and matter may be referred to staff for placement on future agenda.

This agenda shall be made available upon request in alternative formats to persons with a disability, as required by the Americans with Disabilities Act of 1990 (42 U.S.C. § 12132) and the Ralph M. Brown Act (Govt. Code, § 54954.2) Persons requesting a disability-related modification or accommodation should contact Roberta Flannel, 475 Union Street, Fairfield CA 94533 (707-784-7564) during regular business hours, at least 24 hours prior to the time of the meeting.

IV. CONSENT CALENDAR

1. Approval of Minutes for January 16, 2013 (Action Item) Probation/Chris Hansen
Attachment: Minutes for January 16, 2013

V. DISCUSSION CALENDAR

2. Data Report (No Action) Probation/Amy Potter
Sheriff /Gary Faulkner
HSS/Stephan Betz

The committee will receive information for offenders released on Post-Release Community Supervision, offenders committed to county jail as a result of public safety realignment, and offenders receiving services through Health and Social Services.

3. CDCR Parole Update (No Action) CDCR/ Deborah Johnson

The committee will receive information from the California Department of Corrections and Rehabilitation (CDCR) Parole Administrator for the North Bay District.

4. Budget Update (No Action) CAO/Ian Goldberg
Probation/Chris Hansen

The committee will receive a status update from the CAO's Office regarding the budget for Public Safety Realignment.

5. Sheriff's Office Request (Action Item) Sheriff/Tom Ferrara
Sheriff/Gary Elliott
Attachment: Staff Report (5A)

a. Contracts

Consider supporting a recommendation to the Board of Supervisors to approve funding to the Sheriff's Office for the purpose of retaining consultants in the fields of: evidence-based inmate programming; educational/vocational programming; cognitive behavioral therapy; facility policy; and operations. Consultants would

review and advise the Sheriff's Office on program content, policy, procedures and development, for an amount not to exceed \$100,000, through June 30, 2014.

b. Position

Attachment: Staff Report (5B)

Consider supporting a recommendation to the Board of Supervisors to approve 1.0 FTE Program Services Manager to manage the Sheriff's inmate programming and reentry.

6. Day Reporting Center Subcommittee Probation/Donna Robinson
(Action Item)
Attachment: Staff Report (6), Exhibit 1

Consider a recommendation to approve the updated Service Center Framework submitted by Corrections Consultant Thomas White dated January 2013; and Consider a change in the name of the service center from the Day Reporting Center (DRC) to the Solano County Center for Positive Change (CPC). Consider supporting a recommendation to the Board of Supervisors approving personnel, contracted services, and miscellaneous expenses to expand correctional and treatment services throughout Solano County.

7. Employment/Education/Housing Subcommittee HSS/ Stephan Betz
Update
(Action Item)
Attachment: Staff Report (7)

Consider the Employment / Education / Housing Sub-committee's recommendation for a framework for employment services under Public Safety Realignment (AB 109) for Solano County; Consider supporting a recommendation to the Board of Supervisors allocating \$250,000 for employment/vocational/training services; and Direct the Chair of the Community Corrections Partnership (CCP) to convene a panel to review local proposals for such services and/or pursue formal Request for Proposals or Request for Qualifications.

8. Probation Department Request Probation/Chris Hansen
(Action Item) Probation/Donna Robinson
Attachment: Staff Report (8)

Consider supporting a recommendation to the Board of Supervisors to approve a contract extension for Corrections Consultant Thomas White, for an amount not to exceed \$125,000, through December 31, 2014; and Consider supporting a recommendation to the County Administrator to approve a contract with Corrections Consultant Richard Crawford, for an amount not to exceed \$24,000 through December 31, 2013.

VI. ANNOUNCEMENTS

VII. CCP CLOSING COMMENTS

ADJOURNMENT: The next regular meeting is proposed for **Wednesday, March 13, 2013** from 2:00 p.m. – 4:00 p.m. at the Solano County Administration Center, 675 Texas Street, Multipurpose Rooms 1600-1620.

SOLANO COUNTY
Community Corrections Partnership Meeting
Public Safety Local Plan Development Minutes
January 16, 2013

Present:

CCP Committee Members

Chris Hansen, *Chief Probation Officer**
Tom Ferrara, *Sheriff's Office**
Patrick Duterte, *Health & Social Services**
Don du Bain, *District Attorney**
Lesli Caldwell, *Public Defender**
Richard Word, *Vacaville Police**
Halsey Simmons, *Health & Social Services*
Lloyd Gieg, *Genesis House*
Andy Williamson, *Substance Abuse Administrator*
Robert Bloom, *Workforce Investment Board*
Carolyn Wold, *District Attorney/OFVP*
**Executive Committee Member*

Non-Member Participants

Donna Robinson, *Probation*
Stephan Betz, *Health & Social Services*
Tracy Blunt, *Health & Social Services*
Michael Wilson, *Board of Supervisors, #1*
Belinda Smith, *Board of Supervisors, #2*
Ron Grassi, *County Administrator's Office*
Nancy Huston, *County Administrator's Office*
Dennis Bunting, *County Counsel*
Karen Prows, *District Attorney*
Gary Faulkner, *Sheriff's Office*
Keith Bloomfield, *Sheriff's Office*
Gary Elliott, *Sheriff's Office*
Mitch Mashburn, *Sheriff's Office*
Mary Carnahan, *Superior Court*
Sharon Hoover, *Superior Court*
Lisa Chavez, *State Senate Field Rep*
Raymond Courtemanche, *Mission Solano*
Ed Weed, *Center for Intervention*
Deborah Johnson, *CDCR*
Bruce Jones, *Parole*
Amy Potter, *Probation*
Pippin Dew, *Vallejo Chamber of Commerce*
Robert Schussel, *Vallejo Resident*
Mark Robinson, *Vallejo Resident*
Dennis Klimisch, *Vallejo Resident*
Dennis Yen, *Vallejo Resident*
Martha Ann Williamson, *Vacaville Resident*

Natalie Woodard, *ADAB-District 1*
John Allen, *Fighting Back Partnership*
Steve Crane, *Fairfield Police Department*
Joseph Kreins (B. Garrick) *Vallejo Police Department*
Sarah Rohrs, *Vallejo Times Herald*
Jarrod Kohls, *River News Herald/Isleton Journal*
Pastor Anthony Summers, *Impact Church/Michael's Transportation*
Judy Thompson, *Chair FS/CAC*
Z. Bartholomew, *ZMB Consulting*

Chief Hansen welcomed members and requested introductions.

Approval of Agenda

Lesli Caldwell made a motion to approve the agenda. Motion seconded by Richard Word. No opposition. Motion carried (6-0).

County Counsel Dennis Bunting clarified that individuals may not speak on the same topic twice. The public also has the right to speak on topics not on the agenda.

Public Comment (Comments must be limited to five (5) minutes)

No Comment.

Approval of Minutes

Lesli Caldwell made a motion to approve the minutes. Motion seconded by Don du Bain. No opposition. Motion carried (6-0).

Data Report (*See Handouts– Probation Department/Sheriff's Office Data Presentation January 16, 2013, H&SS Mental Health/AB109 Referral & Placement Summary 12/8/2012 – 1/14/2013, and H&SS Substance Abuse/AB109 Referral & Placement Summary*).

Amy Potter presented statistical information pertaining to the Post Release Community Supervision (PRCS) population for the month of December 2012.

Chief Hansen clarified the following for the public: The PRCS population should not be referred to as "Parolees." The correct term is Post Release Community Supervision offenders (PRCS). The terms Parolee and PRCS are not interchangeable. Parolees are supervised by the State. The Probation Department supervises probationers and PRCS offenders released from the California Department of Correction and Rehabilitation (CDCR).

- 390 Clients under supervision
 - 23 Grants expired; 1 Grant revoked; 17 Grants revoked since October 2011
 - 4 Failed to report; 69 since October, 2011
 - 2 Transferred out of Solano County in December 2012; 51 since October 2011
 - 12 Transferred into Solano County in December; 57 since October 2011
 - 7 Bench Warrants ordered; 5 Bench Warrants cleared for December 2012
 - 11 Bench Warrants still outstanding for PRCS that failed to report from CDCR
 - Cities w/highest PRCS: **Vallejo** 40%; **Fairfield** 31%; **Vacaville** 15%; **Suisun** 8%; **Dixon** 5%; **Rio Vista and Benicia** 1%
 - Risk Level of Re-offending: Very High 17 %; High 57 %; Medium 15%; Low 1%; Pending Assessment 10%
- Risk Level by City: **Dixon:** Very High 19%; High 62%; Medium 19% - **Fairfield:** Very High 13%; High 60%; Medium 16%; Low 2%; None Listed 9% - **Suisun:** Very High 12%; High 60% ; Medium 16%; None Listed 12% - **Vacaville:** Very High 21%; High 55%;

Medium 17%; None Listed 7% - **Vallejo/Benicia:** Very High 19%; High 58%; Medium 15% ; None Listed 8% - **Rio Vista** - None

- Ethnic Profile: African American 45%; Caucasian 35%; Hispanic 14%; Other 6%;
- Gender Profile: 93 % male; 7 % female
- Age Profile: 8 % (18-25); 18% (26-30); 34% (31-40); 26 % (41-50); 12% (51-60); 2% (over 60)

Gary Faulkner provided statistical information pertaining to the jail population as a result of Public Safety Realignment.

- Jail Population: 919
- Parolees (3056): 159 in custody represents 17% of jail population (Parole Violators)
- 1170(h) (N3's): 198 in custody represents 22 % of jail population
- PRCS Bookings: 37 in custody represents 4% of jail population
- Jail Profile -Race: Black 42%; Hispanic 18%; White 34%; Other 6%
Male 87%; Female 13% - Age: 38% (18-29); 51% (30-49); 10% (50-59); 1% (60+)
- Sheriff Enforcement Team (SET) Most Wanted 194; Apprehended 155

Chief Hansen explained the benefits of a split sentence which includes the PRCS offender receiving community supervision by the Probation Department, the local police department, and the Sheriff's Enforcement Team. In addition, the offender will be offered programs once released. If split sentences are not ordered, the offender will be released back into the community without any type of supervision. There will be no tracking of whereabouts and law enforcement will not have search conditions.

Stephan Betz presented statistical information for Mental Health and Substance Abuse referrals and placements through Health and Social Services. The program screens all referrals received but only accepts clients who are seriously mentally ill which is defined by the presence of a major functional impairment such as schizophrenia and bi-polar disorder.

CDCR Parole Update:

Deborah Johnson, North Bay District Administrator reported statistical information on parole cases in Solano County.

- 736 Active parole cases
- 105 Parolees At Large (PAL)
- Active Parolees by City: 246 Fairfield; 322 Vallejo; 81 Vacaville
- Adult population 132,000 (2,200 above December projection)
- Parole population statewide: January 2013- 58,000; In year 2007/08-120,000

Deborah reported currently, there are three (3) Parole Units in Solano County which will be consolidating into two units within the next six (6) months. CDCR has published a document that includes 5-year realignment projections through 2017. The information may be found on the CDCR website: www.cdcr.ca.gov.

Pre-Trial Services:

Chief Hansen gave a recap of the December meeting where an Ad Hoc Committee was formed to look at pre-trial services in the County jail since up to 70% percent of the population are

awaiting trial. The committee consists of Don du Bain, District Attorney; Lesli Caldwell, Public Defender; Gary Elliott, Sheriff's Office; Chief Hansen, Probation; and a representative from the Court. Updates will be presented regarding the committee's progress.

Expansion of Jail Programs:

Gary Elliott gave a recap from the December meeting which addressed forming an Ad Hoc Committee within the Sheriff's Office to look at jail programs. He will be presenting an action item in relation to hiring a consultant at the next CCP meeting.

Employment/Education/Housing Subcommittee:

Stephan Betz reported the committee has been charged to look at PRCS client profiles that need/seek employment and match the profile to existing programs in the community that can absorb PRCS clients. The committee will meet January 17, 2013.

Day Reporting Center Subcommittee Update:

Donna Robinson reported the subcommittee will meet on Thursday, January 24, 2013 from 10:00 a.m. – 12:00 p.m. at the Probation Department, 475 Union Avenue, Fairfield, CA

Donna disturbed documents to the committee which included the following:

- A comparison of the traditional DRC model and the Solano model
- Corrections Consultant Tom White's modified framework dated January 2013
- Dr. Chris Lowenkamp's letter

Documents are located on the Probation website. [www.solanocounty.com/Probation/Community Corrections Partnership](http://www.solanocounty.com/Probation/Community%20Corrections%20Partnership)

Dennis Bunting suggested for the February meeting, the subcommittee come forward with their reviews and make a recommendation to the full body. The full body agreed the name change will go back to the DRC subcommittee for review and recommendation.

Public Comments Regarding the DRC:

Judge Wendy Getty – Expressed her concerns as the project keeps getting delayed thereby delaying the implementation of new services. She feels if this project cannot be implemented in the right way -- then let's stop. She is calling on the full body to lead.

Robert Schussel – Stated he supports the concept of a DRC if the program is done right. He feels citizens may not jump up and down and say thank you; however, the program may have a chance for success. The County is giving money to the jails and the County is giving Vallejo more crime. The elephant in the room appears to be the County is not providing security to Vallejo. Chief Hansen clarified that the state gave the County the responsibility of dealing with this population. The County is responding to this issue to ensure public protection.

Pastor Anthony Summers – Stated that because there are currently no services, he is glad the DRC is coming to Vallejo. He believes we have a choice to do something to make it better or do nothing. He suggested the committee not get stuck on a name without taking action as this will leave (us) out there for an extended period of time. It is imperative we see some action. There is

a glimmer of hope the DRC can give a person a second chance at life and a new opportunity. Let's get it done as soon as possible.

Dennis Klimisch – Asked the question: With the Vallejo City Council coming forth with a resolution to stop this (DRC), how will this hinder its process?

Pippin Dew – Spoke on behalf of the Board of Directors of the Vallejo Chambers of Commerce. We are in support of the Vallejo DRC because Vallejo has the highest number of parolees being released, the least amount of resources to monitor and assist parolees. The Board understands that 75 individuals will be specifically chosen to use the facility and will best benefit from the program thereby becoming responsible law-abiding citizens in our community. We encourage you as more funding becomes available to expand upon the program.

Dennis Yen – Expressed support and welcomes the Vallejo DRC. On December 6, he spoke with the Board of Supervisors asking not to delay the implementation date. He believes due to his life-long experience with this population, there is no significant jeopardy in this proposed type of setting. He stated Vallejo ran a similar program, "Fighting Back Partnership" which was located in the Vallejo Library Building (doing County business in a County building) and this program ended due to the elimination of funding as opposed to being successful.

Raymond Courtemache – Suggested that the body lead. Something has to be done, and it has to be done right. Let's help strengthen the community. We're on board.

Chief Hansen – Stated that the Probation Department is located in the proposed area of the Vallejo DRC. Two hundred people a week funnel through the Probation Office. This office has handled any kind of problems that have developed. In addition, the Sheriff's Office is located there as well. There has been no increase in crime or complaints from Vallejo citizens. Just a point of clarification – this population is currently coming into the office – they're there.

Committee Comments:

Chief Hansen announced there is another city meeting in Vallejo. This meeting is scheduled for January 31, 2013 at 6:00 p.m. - more details to follow.

The next meeting is scheduled for Wednesday, February 13, 2013 from 2:00 p.m. – 4:00 p.m. at the County Events Center, 601 Texas Street, Conference Room A

Adjournment:

The meeting adjourned at 3:50 p.m.



**AGENDA SUBMITTAL TO SOLANO COUNTY COMMUNITY
CORRECTIONS PARTNERSHIP**

ITEM TITLE: Consider supporting a recommendation to the Board of Supervisors to approve funding to the Sheriff's Office for the purpose of retaining consultants in the field of evidence based inmate programming, educational / vocational programming, cognitive behavioral therapy, facility policy and operations to review and advise the Sheriff's Office on program content, policy, procedures and development, for an amount not to exceed \$100,000, through June 30, 2014		CCP MEETING DATE February 13, 2013	AGENDA NUMBER 5A
Committee: Contact: Phone:	Solano County Sheriff's Office Thomas A. Ferrara, Sheriff 421-7030		
Published Notice Required?		Yes: _____	No: <u> X </u>
Public Hearing Required?		Yes: _____	No: <u> X </u>

RECOMMENDATION:

The Sheriff's Office recommends that the Solano County Community Corrections Partnership (CCP) consider supporting a recommendation to the Board of Supervisors to approve funding to the Sheriff's Office for the purpose of retaining consultants in the field of evidence based inmate programming, educational / vocational programming, cognitive behavioral therapy, facility policy and operations to review and advise the Sheriff's Office on program content, policy, procedures and development, for an amount not to exceed \$100,000, through June 30, 2014.

SUMMARY/DISCUSSION:

As a result of Realignment the inmate population continues to grow within Solano County, as many inmates who would have formerly been sentenced to state prison now remain at the local level. Because the escalating inmate population remains in county custody for longer periods of time, current programming must evolve to meet the needs of this population. The addition of a new facility (362 rated beds) will position the Sheriff's Office to move forward, should they choose, to repurpose the existing Claybank Facility to focus that space on programming and reentry.

The focus on reentry will require a reevaluation of our jail programming model. This review will allow for the revision of current jail programming to a more robust model that includes expanded access, evaluation, treatment, education, job readiness, life skills, and continuity with existing external services for those about to reenter the community.

In order to provide evidence-based practices, positive outcomes, unfettered access and evaluation, it is recommended that the CCP provide funding to the Sheriff's Office to retain experts in the field of evidence-based inmate programming, educational / vocational programming, cognitive behavioral therapy, facility policy and operations. These consultants will

review existing programming and operations to assure evidence based positive outcomes, program development through expanded access and full evaluation assuring continuity with existing external services to meet Solano County's goals regarding inmate programming and reentry.

FINANCING:

The services of these consultants would be funded through AB 109 planning/startup funds in an amount not to exceed \$100,000 dollars.

ALTERNATIVES:

The CCP Executive Committee could choose not to approve the recommendation to fund the Sheriff's Office for the purpose of retaining consultants in the field of evidence based inmate programming, educational / vocational programming, cognitive behavioral therapy, facility policy and operations to review and advise the Sheriff's Office on program content, policy, procedures and development. This is not recommended as the continued provision of existing programming does not adequately provide for the needs of Solano County inmates resulting in continued high levels of recidivism. Additionally, there are no internal Solano County resources to provide this review.

OTHER ORGANIZATION INVOLVEMENT:

Community Corrections Partnership, Solano County CAO, Health and Social Services, Solano County Probation, Solano County District Attorney, Solano County Superior Court, Solano County Public Defender.



**AGENDA SUBMITTAL TO SOLANO COUNTY COMMUNITY
CORRECTIONS PARTNERSHIP**

ITEM TITLE: Consider supporting a recommendation to the Board of Supervisors to approve 1.0 FTE Program Services Manager to manage the Sheriff's inmate programming and reentry.		CCP MEETING DATE February 13, 2013	AGENDA NUMBER 5B
Committee:	Solano County Sheriff's Office		
Contact:	Thomas A. Ferrara Sheriff		
Phone:	421-7030		
	Published Notice Required?	Yes: _____	No: <u> X </u>
	Public Hearing Required?	Yes: _____	No: <u> X </u>

SOLANO COUNTY SHERIFF'S OFFICE RECOMMENDATION:

The Sheriff's Office recommends that the Solano County Community Corrections Partnership (CCP) consider supporting a recommendation to the Board of Supervisors to approve 1.0 FTE Program Services Manager to manage the Sheriff's inmate programming and reentry.

SUMMARY/DISCUSSION:

Public Safety Realignment went into effect on October 1st, 2011. Since the inception of Realignment the percentage of inmates incarcerated in the Solano County Jail has risen to approximately 45% of our total inmate population. As outlined in the County of Solano 2011 Public Safety Realignment Act Implementation Plan, in-custody programs are essential to the success of the Plan.

As a result of realignment the inmate population continues to grow within Solano County, as many inmates who would have formerly been sentenced to state prison now remain at the local level. Because the escalating inmate population remains in county custody for longer periods of time, current in-custody programming must evolve to meet the needs of this population.

The Sheriff's in-custody programs are currently managed by a custody lieutenant who is responsible for several other key Sheriff's Office functions including managing the AB900 jail construction project. The multitude of duties assigned to the custody lieutenant impact the ability to manage the expansion of in-custody programs.

In order to provide for programming expansion that meets or exceeds all state and federal mandates, and to assure evidence based positive outcomes, the Sheriff's Office is requesting the addition of 1.0 FTE Program Services Manager, with the actual classification to be determined through the Solano County Human Resources. The position will serve expert in the field of evidence based inmate programming, educational / vocational programming, and cognitive behavioral therapy. The Programs Services Manager will manage existing programming and implement and manage all future inmate programs..

The focus upon re-entry will require the realignment of current jail programming from the provision of the most basic legal mandates, to a more robust model that includes evaluation, treatment, education, job readiness, life skills, and continuity with existing external services for

those about to re-enter the community. The Programs Services Manager, as an expert in the field, will have the ability to assure that all programming remains evidence based, effective, and provides the required to continuity and synchronization to existing community corrections programming and resources.

FINANCING:

The Inmate Programs Services Manager position will be funded through AB109 Public Safety Realignment. This position when fully funded is projected to have an annual salary and benefits costs of \$107,000.

ALTERNATIVES:

The CCP Executive Committee could choose not to approve the recommendation to approve 1.0 FTE Program Services Manager to manage the Sheriff's inmate programming and re-entry. This is not recommended as the current service model requires jail programs to be managed by a custody lieutenant who is currently responsible for managing the AB900 jail construction project and other key Sheriff's Office functions and does not have the capacity required to manage the program expansion.

OTHER ORGANIZATION INVOLVEMENT:

Community Corrections Partnership, Solano County CAO, Health and Social Services, Solano County Probation, Solano County District Attorney, Solano County Superior Court, Solano County Public Defender, Human Resources.



**AGENDA SUBMITTAL TO SOLANO COUNTY COMMUNITY
CORRECTIONS PARTNERSHIP**

ITEM TITLE:		CCP MEETING DATE	AGENDA NUMBER
<p>Consider a recommendation to approve the updated Service Center Framework submitted by Corrections Consultant Thomas White dated January 2013; and Consider a change in the name of the service center from the Day Reporting Center (DRC) to the Solano County Center for Positive Change (CPC). Consider supporting a recommendation to the Board of Supervisors approving personnel, contracted services, and miscellaneous expenses to expand correctional and treatment services throughout Solano County.</p>		February 13, 2013	6
Committee:	DRC Subcommittee		
Contact:	Donna Robinson, Chair		
Phone:	784-7600		
	Published Notice Required?	Yes: _____	No: <u> X </u>
	Public Hearing Required?	Yes: _____	No: <u> X </u>

SUB-COMMITTEE RECOMMENDATION:

The DRC Sub-Committee recommends that the Solano County Community Corrections Partnership:

- Consider approving the updated Service Center Framework Report submitted by Corrections Consultant Thomas White, dated February 2013 and;
- Consider approving a change in the name of the Service Center from the Day Reporting Center to the Solano County Center for Positive Change.

PROBATION DEPARTMENT RECOMMENDATION:

- Consider supporting a recommendation to the Board of Supervisors approving staffing, contracted services, and miscellaneous expenses to expand correctional and treatment services throughout Solano County.

SUMMARY/DISCUSSION:

On October 17, 2011, the Solano County Community Corrections Partnership approved the 2011 Solano County Public Safety Realignment Plan that included a Day Reporting/Service Center as one of its priorities. The plan aimed to implement a Service Center to provide needed

programs and resources to offenders under the jurisdiction of the Probation Department that are released from the California Department of Corrections and Rehabilitation (CDCR) through Post Release Community Supervision (PRCS) or from the Solano County Jail under a split sentence or "Mandatory Supervision."

On August 8, 2012, the CCP approved a contract with Corrections Consultant Thomas White. In concert with the DRC Subcommittee, Mr. White completed an initial framework for the Service Center which was approved by the CCP on October 17, 2012. The framework outlined the six components of the Service Center. In addition, the CCP approved supporting a recommendation to the Board of Supervisors the operating budget for one Service Center which included personnel, contracted Services, and Facility/Miscellaneous costs (\$1,102,105).

On November 14, 2012, a community meeting was held in the City of Vallejo. Based upon comments received during and after the community meeting, Mr. White was asked to revise the framework and provide more details related to the program model. On December 18, 2012, the DRC Subcommittee reconvened with the goal of reviewing the program model for the Service Center outlined in the updated framework, specific to Component 7- Positive Reinforcements and Sanctions. The subcommittee was also tasked with identifying an appropriate name for the Service Center which would align with the model of the Center and represent the primary goals to be achieved at the Center.

Based on the directives from the CCP, the DRC Subcommittee met on January 24, 2013. The meeting was attended by representatives from Probation, Workforce Investment Board (WIB), Sheriff's Office, Health and Social Services (H&SS), Re-Entry Council, Mission Solano, and community residents from the Cities of Vallejo and Vacaville. After careful review and consideration, the following is referred for approval by the CCP:

- Approve the updated framework submitted by Corrections Consultant Thomas White, dated February 2013 (Exhibit 1: Solano County Public Safety Realignment - DRC Implementation Plan Framework - Feb 2013.docx) with the below noted additions/changes:
 - a. Included the role of the job developer in the Employment Services section
 - b. Included the Sanctions Grid adopted by the CCP on June 13, 2012, as an attachment to Component 7- Positive Reinforcements and Sanctions
 - c. Included examples of positive reinforcements that will be used in the narrative section of Component 7- Positive Reinforcements and Sanctions
- Approve a change in the name of the Service Center from the Day Reporting Center to the Solano County Center for Positive Change

Request by the Probation Department

- The Probation Department is requesting the CCP to move forward supporting a recommendation to the Board of Supervisors to approve the attached Service Centers Annual Operating Budget covering personnel, contacted services, and facilities/miscellaneous to expand correctional and treatment services throughout Solano County. The attached budget includes the following personnel.

Service Centers Staffing

The Solano County Center for Positive Change (formerly DRC) will be under the oversight of the Probation Department with support from Health and Social Services (H&SS) and contracted service providers. H&SS will assign staff to provide assessments, substance abuse treatment, and assistance with obtaining benefits. The following 10.0 FTE positions are requested to assist with the delivery of services, case management and administration of the Service Center:

- 1.0 FTE Supervising Deputy Probation Officer (SDPO). The position is needed to manage the two DRC staff and provide program oversight. The SDPO will supervise and monitor DRC staff; review case plans for propriety; make final determinations when appropriate; assist with establishing and implementing program policy and procedures; attend periodic inter-agency meetings; coordinate with stakeholders; and facilitate cognitive-behavioral treatment groups. The SDPO is also charged with program fidelity, retention, scheduling training, reviewing outcomes, consulting with program evaluators, and maintaining all program-related documents. The SDPO position is necessary for the successful implementation of the Service Center as these duties are critical to the program and essential to expected program outcomes.
- 1.0 FTE Sr. Deputy Probation Officer. The Sr. DPO will assist the Supervisor in the oversight of the groups being facilitated, provide case management to high-risk clients, group facilitation, client assessment and engagement, case planning, monitoring attendance in groups, and coordinating the Sheriff Enforcement Team (SET) and Probation Enforcement and Search Team (PEST) during announced and unannounced searches and compliance checks.
- 4.0 FTE Deputy Probation Officer (DPO). The positions are needed to provide case management and cognitive behavioral treatment to 100 (25 each) high-risk clients who are supervised under the Post Release Community Supervision program. The duties include client assessment, engagement, case planning, goal setting, monitoring program attendance, and individual counseling sessions to reinforce what is learned in group as well as the use of Motivational Interviewing to monitor the stage of progress. DPOs will also collect and maintain critical program data in order to track the outcomes of this project and collaborate with the partner agencies providing services. The four DPO positions are necessary for the successful implementation of the Service Center as these activities support the proposed Service Center Program Model comprised of the following evidence-based components: assessment/case planning, client engagement, intervention, relapse prevention, aftercare, and supportive case management.
- 1.0 FTE Sr. Legal Procedures Clerk (SLPC). The position is needed to perform routine reception activities such as client check-in, arrival notification, and client assistance, answering limited questions, copying paperwork, scheduling appointments, and making follow up phone calls. Additionally, the SLPC position will perform program data entry. The SLPC position is necessary for the successful implementation of the DRC as these tasks support the program; and without the SLPC position, the tasks would have to be performed by the Deputy Probation Officers themselves. This would not be efficient use of Departmental staff resources. Furthermore, it would impact the work of the Deputy Probation Officers, and potentially jeopardize program outcomes. In addition, the SLPC will provide clerical support to the Probation Department and the CCP by completing agendas and minutes for the Community Corrections Partnership meetings and other related duties as assigned.
- 1.0 FTE Legal Procedures Clerk. The position is needed to perform routine reception activities such as client check-in, arrival notification, and client assistance, answering limited questions, copying paperwork, scheduling appointments, and making follow up phone calls. Additionally, the LPC position will perform program data entry. The LPC position is necessary for the successful implementation of the DRC as these tasks

support the program; and without the LPC position, the tasks would have to be performed by the Deputy Probation Officers themselves. This would not be efficient use of departmental staff resources. Furthermore, it would impact the work of the Deputy Probation Officers, and potentially jeopardize program outcomes

- 2.0 FTE Clinical Services Associate (CSA). The positions will be allocated to H&SS and assigned to the DRC, will conduct clinical assessments using standard, evidence-based tools for substance abusing clients. As a result of the assessment, the CSA will recommend an appropriate level of treatment (outpatient, residential, or in-house at the Service Center). Other duties the CSA will perform include case management to ensure that the client is linked to other services such as primary care and mental health. The CSA will also facilitate substance abuse groups and provide individual weekly counseling sessions for their caseloads (projected at 25 clients each) and for those clients who require a more intense level of care at a contracted, formal treatment program. The positions will involve close collaboration with Probation staff at the Service Centers to ensure that clients' clinical issues are addressed, and monitored effectively to reduce recidivism and lower the risk of re-offending.

FINANCING:

The requested appropriations of \$1,708,851 and 10.0 FTE positions would be funded through Public Safety Realignment (AB 109). There is no impact on the County General Fund.

ALTERNATIVES:

The CCP could choose not to approve the updated framework recommended by the DRC Subcommittee. This is not recommended because the AB 109 clients, the majority of which are assessed as a high risk to re-offend, need programs and services to assist them as they re-integrate into the community. It is important to provide resources and services while they are still under the jurisdiction of the probation department.

The CCP could choose not to adopt the recommendation of the DRC Sub-Committee to change the name of the Service Center. This is also not recommended. In order to reduce anxiety and uncertainties regarding the intent of the Service Center, it is important that the name reflect the services and the goals to be achieved at the Center which include reducing recidivism through effecting positive behavior change.

The CCP could choose not to adopt the recommendation of the Probation Department to fund the expansion of correctional and treatment services throughout Solano County. This would continue delaying needed treatment and services to the population of offenders outlined under the Public Safety Realignment Act.

OTHER ORGANIZATION INVOLVEMENT:

Risk Management, Sheriff's Office, Health and Social Services, County Administrator's Office, Community Corrections Partnership, Community Based Organizations, and Community Residents.

Service Centers Annual Operating Budget

Personnel

1.0 Supervising Deputy Probation Officer	115,730
1.0 Sr. Deputy Probation Officer	106,000
4.0 Deputy Probation Officer (Journey Level)	424,000
1.0 Sr. Legal Procedures Clerk	83,631
1.0 Legal Procedures Clerk	78,830
0.6 Social Worker III	72,000*
2.0 Clinical Services Associate	224,118
1.0 Patient Benefit Specialist	H&SS**
1.0 Licensed Mental Health Clinician (Dual Diagnosis) Workers	H&SS**

Compensation, Unemployment Insurance and Administration Overhead	13,242
10.00 FTE are requested as part of Service Centers Budget & 2.0 FTE are included in H&SS Budget	

Sub Total	\$1,117,551
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Contracted Services

Outpatient Substance Abuse	150,000
Residential Substance Abuse	H&SS
Outpatient Mental Health	H&SS
Employment I Education	
Job Development Services	114,000
GED	31,000
After Care (Peer to Peer}	80,000
Continuous Quality Assurance I Training	20,000
Transportation	7,000
Housing	25,000

Sub Total	\$427,000
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Facility (South County) and Miscellaneous

CPC Office Space	27,000
Telephone	2,200
Cell Phone	600
Food/Snacks	6,500
Office Supplies	10,000
Computers	8,000
Security	110,000

Sub Total	\$164,300
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Total	\$1,708,851
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*Position and funding previously approved by the Board of Supervisors.

** Position and funding previously approved by the Board of Supervisors and included

in HS&S operating budget

EXHIBIT 1

SOLANO COUNTY PUBLIC SAFETY REALIGNMENT

**SOLANO COUNTY CENTER FOR POSTIVE CHANGE
(CPC)**

Prepared for

Community Corrections Partnership

By:
Thomas White
Corrections Consultant

February 2013

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INTRODUCTION

Decades of research on offender rehabilitation programs indicate clearly that effective supervision and treatment services can be developed and implemented resulting in a significant reduction in offender recidivism. Therefore we cannot continue to support offender supervision and treatment practices that are not supported by either the existing evidence of the causes of crime, or the existing knowledge of which correctional programs have been proven to positively change offender behavior. To improve community supervision effectiveness and enhance the safety of our communities, agencies should adopt evidence-based principles of offender supervision and treatment – principles that have been scientifically proven to reduce offender recidivism. Our budgets can no longer support programs and supervision practices that have not proven to be effective. (White, T., *Evidence-Based Practices In Probation And Parole: The Implementation Challenge*, Perspectives, Summer 2006)

With this in mind, the Solano County Community Corrections Partnership (CCP) has taken steps to develop an evidence-based Assessment and Risk Reduction Center (CPC) model program. The CCP has identified the following eight core elements for the CPC:

1. Cognitive Behavioral groups using Evidence-Based Practices such as Aggression Replacement Training, Moral Recognition, Crossroads, and/or Thinking For A Change.
2. Mental Health (MH) / Substance Abuse (SA) assessments tools using Evidence-Based Practices.
3. MH / SA treatment groups using Evidence-Based Practices and certified addiction counselors and peer mentors. Peer mentors are individuals who have had a successful experience in the justice system / substance abuse system and can be of assistance as a “safety net” of support to those currently navigating the reentry system.
4. GED / High School Diploma / Literacy Services.
5. Job readiness, vocational training and employability skills.
6. Drug testing.
7. Eligibility Benefits and other social services – both online self-service and in-person benefit assistance.
8. Transportation and Housing Assistance.

At the July 11, 2012 CCP meeting, direction was provided to explore the creation of a Assessment and Risk Reduction Center in Vallejo first, and then one in Fairfield. Four Operational Workgroups were established to refine the service delivery model:

1. Cognitive Behavioral Groups and Drug Testing: Probation
2. MH / Substance Abuse Assessments, Treatment and Benefit services: HS&S
3. GED / High School, Job Readiness and Vocational Training: WIB and Sheriff's Office
4. Housing: Reentry Council

In August the CCP secured the services of a consultant to assist in the development and implementation of the CPC. During the consultant's initial onsite visit he met individually and collectively with members of the CCP Executive committee, Workgroup Chairs, and identified stakeholders. It was evident that a significant amount of thought and work had gone into the development of the CPC by the members of the Workgroups. This initial report and recommendations reflect many of their ideas.

The CPC service model that is outlined in this report is based upon the following research supported offender behavior change principles: (See Dvoskin, J. etal, *Using Social Science to Reduce Violent Offending*, 2012).

1. **Tailor behavior change programs to the individual.** Given the heterogeneity of the offender population, there is a need to recognize that "one size does not fit all." Treatment services need to be tailored to the individual risk, needs, and responsivity factors that are unique to each offender.
2. **Use risk factors and protective factors to inform supervision and treatment.** Interventions should be strength based and built upon existing resilience and prosocial skills that the offender possesses, along with social and community resources.
3. **Clearly identify both wanted and unwanted behaviors and establish a positive reinforcement protocol that systematically reinforces the wanted behaviors.** The best way to influence offenders' behavior is to "catch them doing something right" and reward them for it. However, we must first understand what each offender finds rewarding, given his or her beliefs, expectations, and value system. In other words, people do what rewards them, but before we can change their ways of getting rewards, we have to understand what motivates them.
4. **Attend to issues of motivation and incorporate methods of facilitating treatment engagement and retention.** There is considerable merit in the perspective that many offenders are less "treatment resistant" than lacking in "readiness for change." To ameliorate this problem and to foster reinforcing offender-provider interactions, programs should incorporate motivational components, such as building the participatory involvement

of offenders in considering the pros and cons of behavioral change and in setting behavior change goals.

5. **Establish high-quality relationships with offenders.** A growing body of research has established that staff offender relationships that are viewed by the offender as firm, fair, caring and supportive are directly linked to positive behavior change on the part of the offender.
6. **Use and establish real evidence-based programs.** Evaluation measures and procedures should be built into programs so that progress can be monitored and ongoing feedback provided to both staff and offenders. For every program, the same questions should be asked: “How do you know it works?” “How strong is the evidence?”
7. **Implement a treatment approach that nurtures prosocial skills, encourages prosocial affiliations, and promotes a positive lifestyle.** What skills are likely to be used in a variety of life situations to prevent general antisocial behavior? Skills in solving problems, communicating and negotiating effectively with others, resolving conflicts, and planning for the future. Antisocial cognitions and behaviors must be replaced by prosocial values and actions.
8. **Incorporate procedures to increase the likelihood of generalization and maintenance of intervention effects.** This requires behavioral rehearsal and skills practice (e.g., role plays) that approximate real-life situations. This principle is vital. Intervention should not be limited to didactic instruction, because offenders’ active participation is critical.
9. **Incorporate a relapse prevention component that actively involves the offender in considering possible obstacles to behavior change efforts and in formulating “game plans” and “backup plans” to confront each obstacle.** Relapse prevention strategies are relevant to preventing repetition of internally rewarding and exciting behavior, such as substance abuse and criminal offending. The goal is for offenders to foresee situations that might elicit criminal behavior and to develop self-management skills tailored to those situations, thereby reducing the risk of reoffending.

CPC OPERATION AND PURPOSE

Day Reporting Centers (DRC) have been operating in the United States for more than twenty years. Historically DRC’s served two primary purposes: 1) enhanced supervision and decreased liberty of offenders placed in the community; and 2) treatment of offenders’ problems. Over the past decade a robust body of empirically sound research has led to the development of the Risk, Need, and Responsivity (RNR) model of offender behavior change (Andrews, D. and Bonta, J., *The Psychology of Criminal Conduct*, 2006). The RNR model has become predominate correctional

practice for achieving reductions in offender recidivism. The primary principles of the RNR model are that the level of service should be proportionate to the level of assessed risk (high risk individuals require the most intensive intervention); that treatment should be focused on changing criminogenic needs (these being dynamic factors which, when changed, are associated with reduced recidivism); and that the style and mode of the intervention should engage the offender and suit his or her learning style and cognitive abilities. These three principles require the development of comprehensive and validated assessment instruments to guide interventions. Treatment programs should be cognitive behavioral in orientation, highly structured, implemented by well trained, supported and supervised staff delivered with integrity (in the manner intended by program designers), based on manuals, and located in organizations committed to changing offender behavior.

Following a discussion with members of the Executive Committee of the CCP, it was decided that the modified DRC model would have as its primary goal the reduction of offender recidivism through positive sustained behavior change. Therefore, offenders would come to the CPC only to attend programs and receive services, and the supervision and monitoring responsibility would be carried out by the offender's assigned probation supervision officer. It has been my own experience that trying to accomplish too much at a DRC makes it difficult to manage, and does not lend itself to achieving reductions in offender recidivism. Furthermore, not all offender services can be conducted at the CPC. Collaboration with community agencies and referral to both existing and perhaps new County programs and services will be important.

DATA REVIEW

The initial offender group that will be targeted for services at the CPC are individuals placed on probation supervision through the 2011 Public Safety Realignment (AB109). At the present time, there are approximately 273 males and 25 females who are in this group and have been assessed by the Probation Department. The first step in determining the primary services that should be available through the CPC was to review the LS-CMI (Risk and Needs Assessment) available data on this targeted group. The racial composition and age breakdown of this group are reflected in the following tables:

LS / CMI DATA REVIEW AB 109 OFFENDERS		
	MALE	FEMALE
# OFFENDERS ASSESSED	273	25
RACIAL BREAKDOWN		
White	36%	36%
Black	45%	40%
Hispanic	14%	12%
Other	5%	12%
AGE BREAKDOWN		
20 to 25 years of age	9%	4%
26 to 30 years of age	19%	16%
Over 30 years of age	72%	80%

Upon review, the majority of this group is over thirty years of age (male 72%, female 80%) with only 36% being white.

In order to realize the greatest reductions in crime (measured by offender recidivism rates), it is important to focus your resources on changing the behavior of those offenders who without intervention, are most likely to continue their criminal behavior. These “high risk” offenders historically commit the majority of the crimes although they may not make up the majority of the general criminal population. It is these high “base rate offenders” who should be the target for intervention through the CPC. The research has demonstrated that providing extensive services and supervision to “low risk” offenders may actually increase the likelihood of them continuing to commit crimes. (Lowencamp, C. and Latessa, E., *Understanding the Risk Principle: How and Why Correctional Interventions Can Harm Low-Risk Offenders*, 2004). It should be noted that general assessment tools that predict offender risk are not assessing the dangerousness of the offender nor the severity of any future offenses, but rather their risk to reoffend. Below is a breakdown of the risk levels of the AB 109 offenders who are under probation supervision as determined by a validated risk assessment tool:

ASSESSED RISK LEVEL		
RISK LEVELS	MALE	FEMALE
Very high	14%	12%
High	65%	66%
Medium	20%	22%
Low	1%	0%

Perhaps not surprising, 79% of the males and 78% of the females fall into the “Very High” or “High” risk categories. This compares to just under 50% of all the offenders who are under probation supervision in the County being assessed as “Very High” or “High”. Therefore, in comparison AB 109 probationers are older and higher risk groups of offenders.

The most effective way to change criminal behavior is to modify the risk factors (criminogenic needs) that are the primary cause for an individual’s antisocial (criminal) behavior (Andrews, D., Bonta, J., *The Psychology of Criminal Conduct*, 2006). Through years of research, eight risk factors have been identified that have the greatest effect on an individual’s criminal behavior. These eight factors are summarized on the next page (Andrews, D., Bonta, J., *The Psychology of Criminal Conduct*, 2006).

MAJOR RISK AND/OR NEED FACTORS AND PROMISING INTERMEDIATE TARGETS FOR REDUCED RECIDIVISM		
Factor	Risk	Dynamic Need
History of Antisocial Behavior	Early and continued involvement in a number of antisocial acts	Build noncriminal alternative behaviors in risk situations
Antisocial Personality	Adventurous, pleasure seeking, weak self-control, restlessly aggressive	Build problem-solving, self-management, anger management and coping skills
Antisocial Cognition	Attitudes, values, beliefs and rationalizations supportive of crime, cognitive emotional states of anger, resentment, and defiance	Reduce antisocial cognition, recognize risky thinking and feelings, build up alternative less risky thinking and feelings. Adopt a reform and/or anticriminal identity
Antisocial Associates	Close association with criminals and relative isolation from prosocial people	Reduce association with criminals, enhance association with prosocial people
Family and/or Marital	Two key elements are nurturance and/or caring, better monitoring and/or supervision	Reduce conflict, build positive relationships, communication, enhance monitoring and supervision
Employment and/or Education	Low levels of performance and satisfaction	Enhance performance, rewards, and satisfaction
Leisure and/or Recreation	Low levels of involvement and satisfaction in anti-criminal leisure activities	Enhancement involvement and satisfaction in prosocial activities
Substance Abuse	Abuse of alcohol and/or drugs	Reduce SA, reduce the personal and interpersonal supports for SA behavior, enhance alternatives to SA

The first four of the above factors have been found to have the greatest influence (if present in someone's life) on an individual becoming a criminal. (Andrews, D., Bonta, J., *The Psychology of Criminal Conduct*, 2006). If we want to change an offender's criminal behavior and reduce crime, we need to identify and focus our efforts on changing those risk factors that are present in their lives.

A review of the assessment data on the CPC target population indicates that the risk factors or criminogenic needs that were most often identified as being a very high or high need included the following:

RISK / NEED FACTOR	PERCENT ASSESSED AS VERY HIGH / HIGH
1. History of Antisocial Behavior	83%
2. Leisure / Recreation	79%
3. Employment / Education	75%
4. Antisocial Associates	63%
5. Substance Abuse	37%

Based upon the above data, it is recommended that the following services should be the primary program areas within the CPC model:

- Cognitive Behavioral Therapy
- Employment / Education Development
- Substance Abuse Treatment

ASSESSMENT AND RISK REDUCTION CENTER PROPOSED PROGRAM MODEL

The following CPC model is based on a “stand alone” program location. In the future, if a CPC is co-located with the County jail, some changes in the program model would be both possible and necessary. The CPC recommended program model is comprised of the six following components:

1. Assessment / Case Planning
2. Client Engagement
3. Intervention
4. Relapse Prevention
5. Aftercare
6. Supportive Case Management

Component One: Assessment and Case Planning

Assessing clients using validated and reliable tools is a prerequisite for managing limited resources, and triaging cases essential to the effective management of clients. Assessment is a continuous and ongoing collection of information, observations and collateral information that goes beyond a one time event and used to inform case decisions, case planning, and targeting services.

Assessments are most reliable when staff are trained to administer the tools, and use effective interviewing and engagement techniques. Therefore, prior to any employee administering Assessments, staff must be trained in Administering and Interpreting the Assessments selected.

Assessment outputs should be used to develop frequency of reporting, targeting criminogenic needs, sequencing of services, identifying strengths, determining a client's level of motivation, and identification of basic needs.

The following Assessments are recommended:

- ***Level of Services Case Management Inventory (LS / CMI)***

Risk / Need Assessments have undergone many transformations since their inception. Classifying offenders initially relied on unstructured clinical judgment. Then, with the first generation of Risk / Need Assessments, assessors began to consider mechanically gathered static predictors of an offender's risk to reoffend.

Second generation Risk Assessments brought advances by considering dynamic (changeable) predictors in addition to the static risk factors. Dynamic factors can be changed through intervention, programming, and treatment, or as a result of environmental, social, or internal experiences.

The third generation of Risk Assessments integrated risk and need components identifying criminogenic needs as well as producing a risk level estimate.

Fourth generation Risk Assessment tools integrate general and specific risk / need components, addresses other client issues and responsivity concerns, and include a case management component.

The LS / CMI is a valid fourth generation assessment, and is presently being used by the Solano County Probation Department.

- **Correctional Mental Health Screen (CMHS)**

The National Institute of Justice funded researchers to create and test a brief mental health screen for criminal offenders. (Ford, J. and Trestman, R., *Evidence-Based Enhancement of Detection, Prevention, and Treatment of Mental Illness in the Correction Systems*, 2005).

The CMHS uses separate questionnaires for men and women. The version for women (CMHS-W) consists of 8 yes / no questions, and the version for men (CMHS-M) contains 12 yes / no questions about current and lifetime indications of serious mental disorder. Six questions regarding symptoms and history of mental illness are the same on both questionnaires; the remaining questions are unique to each gender screen. Each screen takes about 5 minutes to administer. It is recommended that male inmates who answer six or more questions “yes” and female inmates who answer five or more questions “yes” be referred for further mental health evaluation.

Statistical analysis of the validation test results against the clinical assessments showed that these screens proved highly valid in identifying depression, anxiety, PTSD, some personality disorders, and the presence of any undetected mental illness. The CMHS-W was 75% accurate in correctly classifying female offenders, and the CMHS-M was 75.5% accurate in correctly classifying male offenders as having a previously undetected mental illness.

- **Adult Substance Use Survey – Revised (ASUS-R)**

The ASUS-R is a 96 item psychometric-based, adult self report survey comprised of 15 basic scales and three supplemental scales. It is appropriate for clients 18 years or older, and may be self or interview administered. The ASUS-R meets the needs of a self report instrument that is an essential component of a convergent validation approach to the assessment of patterns and problems associated with the use of alcohol and other drugs (AOD).

The ASUS-R is designed to differentially screen and assess an individual’s alcohol and other drug use involvement in ten commonly defined drug categories and to measure the degree of disruptive symptoms that result from the use of these drugs. The ASUS-R provides a mental health screen, a scale that measures social non-conformity and a scale that measures legal non-resistance to self-disclosure, and a measure of self-perceived strengths. Three supplemental scales provided a differential assessment of disruptive AOD use outcomes which are subscales of the general disruption scale. The ASUS-R provides measures of AOD involvement and legal conforming for the most recent six month period the client has been in the community. The ASUS-R rater scale allows a comparison of the evaluator’s perception of the client’s drug use and abuse with the client’s perception of that use.

The ASUS-R can be used to provide guidelines for assessing levels of AOD problems, abuse and dependence. It can also be used to provide referral guidelines for various levels of services for clients with a history of AOD and co-occurring problems.

- **Basic Needs Screening**

For many clients, unmet basic needs can often serve as a barrier to the treatment that is critical for positive behavior change to occur. Therefore, an important component of Assessment and Case Planning is to identify and address a client’s basic needs. Below are some of the basic needs that clients should be screened for:

SSI / SSD	Application for Supplemental Security Income or Social Security Disability
CAL FRESH/WORKS	Application for Temporary Assistance for Needy Families
WIC	Application for Women, Infants and Children benefits
Food	Connection with food pantry, soup kitchens, application for food stamps, etc.
Housing	Connection with shelters, temporary housing, applications for housing assistance, and other affordable housing options
Clothing	Directly meeting clothing needs or connecting the client with a program such as Dress for Success that can provide clothing
Medical Insurance	Help with obtaining either employer sponsored, private, or government sponsored medical and/or dental insurance for self and/or family
Medical Services	Includes connection with general practitioners, dental, OB/GYN, family planning counseling, HIV/STD educations as well as health related needs such as obtaining prescriptions, glasses, hearing aids, wheel chairs, etc.
Identification	Assistance with obtaining birth certificates and social security cards.
Drivers License / Transportation	Assistance with obtaining a drivers license, enrollment in drivers education, assistance with accessing public transportation
Child Care	Connection with day care, pre-schools, etc.
Personal Hygiene	Provide or make connection to obtain personal hygiene items (toothbrush, toothpaste, etc.)

- **Individual Service Plan (ISP)**

The results of the Assessment process should be the development of an ISP which identifies the client’s needs and other risk factors and formulating a written plan of action that is specific to each client in order to address their needs.

The following principles should be followed when developing the ISP:

- ✓ The development of the ISP should be a collaborative process that the case worker and client complete together.

- ✓ Addressing the client's highest criminogenic needs at the appropriate time is essential to changing their criminal behavior.
- ✓ Beginning with the issues that the client has identified can build trust and increase chances that they will follow the ISP.
- ✓ Trying to address too many needs, goals, activities and obligations at the same time can lead to frustration and failure.
- ✓ ISP goals must be clearly understood by the client, realistic and achievable.
- ✓ Short-term steps that the client should take to achieve the agreed upon goal should be incrementally identified.
- ✓ A timeframe for the client to finalize the identified steps they need to complete should be established.
- ✓ The ISP should be frequently reviewed and discussed with the client and modified when needed.
- ✓ The client should be encouraged and positively reinforced for their efforts toward achieving the ISP steps and goals.
- ✓ Client setbacks and barriers to completing the ISP should be identified, discussed, and problem-solved.

Component Two: Client Engagement

There is abundant evidence that motivational factors (broadly defined) are central in understanding, preventing and reversing criminal behavior. (Miller, William, et al, *Rethinking Substance Abuse: What the Science Shows and What We Should Do About It*, 2005).

It appears that actively doing *something* toward change may be more important than the particular actions that are taken. The traditional wisdom that "It works if you work it" appears to be true of many different routes to change. Placing a client in the right treatment program that they do not complete has no value in changing their behavior, even when the program is evidence-based. Client motivation needs to be assessed and strengthened early on and throughout the treatment process. It is clear from the research that brief motivational interventions often trigger change. Therefore, the following individual interventions (as opposed to group counseling) are being recommended:

- **Motivational Interviewing (MI)**

Motivational Interviewing is a goal-directed, client-centered counseling style for eliciting behavioral change by helping clients to explore and resolve ambivalence. The operational assumption in MI is that ambivalent attitudes or lack of resolve is the primary obstacle to behavioral change, so that the examination and resolution of ambivalence becomes its key goal. Although many variations in technique exist, the MI counseling style generally includes the following elements:

- ✓ Establishing rapport with the client and listening reflectively.
- ✓ Asking open-ended questions to explore the client's own motivations for change.
- ✓ Affirming the client's change-related statements and efforts.
- ✓ Eliciting recognition of the gap between current behavior and desired life goals.
- ✓ Asking permission before providing information or advice.
- ✓ Responding to resistance without direct confrontation. (Resistance is used as a feedback signal to the counselor to adjust the approach).
- ✓ Encouraging the client's self-efficacy for change.
- ✓ Developing an action plan to which the client is willing to commit.

- **Motivational Enhancement Therapy (MET)**

Motivational Enhancement Therapy is an adaptation of motivational interviewing that includes one or more client feedback sessions in which normative feedback is presented and discussed in an explicitly non-confrontational manner. This intervention has been extensively tested in treatment evaluations of alcohol and other drug use/misuse. MET uses an empathic but directive approach in which the counselor provides feedback that is intended to strengthen and consolidate the client's commitment to change and promote a sense of self-efficacy. MET aims to elicit intrinsic motivation to change problem behaviors by resolving client ambivalence, evoking self-motivational statements and commitment to change, and "rolling with resistance" (responding in a neutral way to the client's resistance to change rather than contradicting or correcting the client).

- **Brief Strengths-Based Case Management for Substance Abuse (SBCM)**

Brief Strengths-Based Case Management for Substance Abuse is a one-on-one social service intervention for adults with substance use disorders that is designed to reduce the barriers and time to treatment entry and improve overall client functioning. The intervention is a time-limited version of SBCM that focuses on substance abuse. SBCM differs from conventional case management in its use of a strengths perspective. This perspective

defines how to carry out the five functions of SBCM's case management component: assessment, planning, linkage, monitoring, and advocacy. The case manager helps the client identify personal skills, abilities, and assets through discussion; supports client decision making so that the client sets treatment goals and determines how the goals will be met; encourages client participation in seeking informal sources of assistance; and works to resolve any client-identified barriers to treatment, such as lack of transportation, child care, and social support. Although broad system change is not the intent, the counselor also advocates with treatment providers and seeks system accommodation on behalf of the client. The counselor strives to develop a strong working alliance with the client, which is considered central to the process of linking with and using substance abuse treatment services effectively. Unlike SBCM, which is usually structured over many months and sometimes years, Brief SBCM for Substance Abuse delivered in a maximum of 5 sessions over a limited, predetermined period. Sessions typically average 90 minutes, with some requiring more than 2 hours. Each session is flexible, providing an opportunity to develop and implement a personal, client-driven plan that improves the individual's overall functioning and/or addresses specific barriers to linking with treatment.

Each of the above interventions has been identified by the Substance Abuse and Mental Health Services Administration (SAMHSA) as an evidence-based practice. Although primarily researched in the field of addiction programming, each of the above interventions has broad application to other need areas.

Component Three: Primary Interventions

- ***Criminal Thinking and Life Skills***

The most extensively researched and effective programs for changing criminal behavior are Cognitive-Behavioral Therapies (CBT). (Hansen, C., *Cognitive-Behavioral Interventions: Where They Come From and What They Do*, 2008).

CBT programs, in general, are directed toward changing distorted or dysfunctional cognitions or teaching new cognitive skills and involve structured learning experiences designed to affect such cognitive processes. These processes include interpreting social cues, identifying and compensating for distortions and errors in thinking, generating alternative solutions, and making decisions about appropriate behavior.

Traditional cognitive-behavioral approaches used with correctional populations have been designed as either cognitive-restructuring, coping skills, or problem-solving therapies. The cognitive-restructuring approach views problem behaviors as a consequence of maladaptive or dysfunctional thought processes, including cognitive distortions, social misperceptions, and faulty logic. The coping skills approaches focus on improving deficits in an offender's ability to adapt to stressful situations. Problem-solving therapies focus on offenders'

behaviors and skills (rather than their thought processes) as the element that is ineffective and maladaptive.

Effective cognitive-behavioral programs of all types attempt to assist offenders in four primary tasks: (1) define the problems that led them into conflict with authorities, (2) select goals, (3) generate new alternative prosocial solutions, and (4) implement these solutions.

Generally, cognitive-behavioral therapies in correctional settings consist of highly structured treatments that are detailed in standardized manuals, and typically delivered to groups of 8 to 12 clients in a classroom-like setting. The following CBT offender change programs are recommended:

✓ *Thinking For A Change (T4C)*

This program begins by teaching offenders an introspective process for examining their ways of thinking and their feelings, beliefs, and attitudes. This process is reinforced throughout the program. Social-skills training is provided as an alternative to antisocial behaviors. The program culminates by integrating the skills offenders have learned into steps for problem-solving. Problem-solving becomes the central approach offenders learn that enables them to work through difficult situations without engaging in criminal behavior. Offenders learn how to report on situations that could lead to criminal behavior and to identify the cognitive processes that might lead them to offending. They learn how to write and use a “thinking report” as a means of determining their awareness of the risky thinking that leads them into trouble. Within the social skills component of the program, offenders try using their newly developed social skills in role-playing situations. After each role-play, the group discusses and assesses how well the participant did in following the steps of the social skill being learned. Offenders also apply problem-solving steps to problems in their own lives. Written homework assignments, a social skills checklist, and input from a person who knows the client well are all used by the class to create a profile of necessary social skills, which becomes the basis for additional lessons. Through a variety of approaches, including cognitive restructuring, social-skills training, and problem-solving, T4C seeks to provide offenders with the skills as well as the internal motivation necessary to avoid criminal behavior.

The curriculum is divided into 22 lessons, each lasting 1 to 2 hours. No more than one lesson should be offered per day; two per week is optimal. It is recommended that at least 10 additional sessions be held using the social skills profile developed by the class (as noted above). Lessons are sequential, and program flow and integrity are important.

✓ *Reasoning and Rehabilitation II (R&R2)*

This program focuses on enhancing self-control, interpersonal problem-solving, social perspectives, and prosocial attitudes. Participants are taught to think before

acting, to consider consequences of actions, and to conceptualize alternate patterns of behavior. The authors of R&R2 believe that long-term intervention can both tax the motivation of many offenders and can be associated with high attrition rates; it can also tax the motivation of trainers and overburden agency budgets.

This program is designed to increase the prosocial competence of the participants. R & R II objectives include:

- ❑ Provider assessment. This program can be used as an assessment device, with the client's performance providing a more complete measure of cognitive functioning than testing alone. It can also direct the provider toward needs for other programs.
- ❑ Participant assessment. R&R2 allows participants to experience CBT and assess whether they may be open to further program treatments.
- ❑ Motivation. Participants may become engaged in the process and more motivated to get involved in longer treatment programs when needed.
- ❑ Preparation. Often programs require a higher level of cognitive skills than many clients possess. R&R2 allows them to learn the skills required to continue with cognitive behavioral programs.

The program provides just over seventeen hours of actual training. Lessons require the transfer of cognitive skills to real-life events, and every one of the 17 sessions has homework assignments. Each session includes time for feedback from offenders on their observations and experiences that occurred between sessions. R&R2 manuals include the "Handbook," which is a detailed instruction manual for trainers that has all materials required for each session, and the "Participant's Workbook," which contains handouts, exercises, and worksheets that should be available for each participant. The ideal group size is 8 clients or, depending on the characteristics of the group, no less than 4 and no more than 10. Sessions are flexible, but two to three 90-minute sessions per week are suggested.

- **Substance Abuse Treatment**

A significant amount of research has been conducted in the field of substance abuse treatment. A large number of these studies have investigated potential differences in outcome between various forms of inpatient and outpatient treatment in the treatment of both alcohol and drug dependence.

As stated in a recent publication (See Miller, William et al, *Rethinking Substance Abuse: What the Science Shows and What We Should Do About It*, 2005):

“There have been more than 30 studies in which alcohol- or drug-dependent patients have been randomly assigned to an equal length (usually 30-60 days) of some form of residential or inpatient treatment, or to some form of outpatient or day hospital treatment. While virtually all of these studies have shown significant improvements in substance use from admission to posttreatment outcome (usually 6-12 months postdischarge), it has been surprising to many that the great majority of these studies have shown essentially no significant differences in effectiveness between different settings of care, in either alcohol- or drug-dependent patient groups.

This body of research suggests that across a range of study designs and patient populations, there appears to be no significant advantage provided by inpatient or residential care over traditional outpatient care in the rehabilitation of alcohol or drug dependence – despite the substantial difference in costs. It should be noted, however, that in virtually every study of treatment setting, premature dropout was significantly higher in the outpatient condition than in the inpatient condition. While this is pertinent to the relative attractiveness of these two settings of care, it is not relevant to the relative effectiveness comparisons because most studies examined both intent-to-treat and fully treated groups, finding no evidence of differential effectiveness.....”

“...Drug problem severity occurs along a smooth continuum, and diagnostic criteria (such as the current distinction between drug *abuse* and drug *dependence*) represent somewhat arbitrary cut points in symptom counts. Drug involvement typically develops through gradually increasing levels of use, consequences, dependence, and variety of drugs. In this sense, prevention and treatment are not distinct interventions, so societal response to drug problems should involve an integrated continuum of care that addresses the full range of problem development. The concept of stepped care is a sensible albeit still largely untested approach suggesting that when one level of care is insufficient, a more intensive level of intervention is warranted and likely to succeed.

A further argument for a menu and spectrum of services is to permit people to find levels and types of services that they find appropriate and attractive. Poor outcomes are likely to ensue when people's goals are mismatched to program goals. A reasonable and under-utilized approach would be to offer brief motivational counseling as a first-line intervention, and then to offer more expensive and intensive services to those who do not respond to this brief intervention.....”

Considering the above, and based upon my own experience in operating CPC's, I am recommending two levels of substance abuse treatment, an intermediate and intensive outpatient model. There are some existing evidence-based intermediate interventions (e.g., Cognitive Behavioral Coping Skills Therapy) and intensive outpatient interventions. For the intensive outpatient treatment I am recommending the following:

✓ *Matrix Model*

The Matrix Model is an intensive outpatient treatment approach for substance abuse and dependence that was developed through 20 years of experience in real-world treatment settings. The intervention consists of relapse prevention groups, education groups, social support groups, individual counseling, and urine and breath testing delivered over a 16-week period. Clients learn about issues critical to addiction and relapse, receive direction and support from a trained therapist, become familiar with self-help programs, and are monitored for drug use by urine testing. The program includes education for family members affected by the addiction. The therapist functions simultaneously as teacher and coach, fostering a positive, encouraging relationship with the client and using that relationship to reinforce positive behavior change. The interaction between the therapist and the client is realistic and direct, but not confrontational or parental. Therapists are trained to conduct treatment sessions in a way that promotes the client's dignity and self-worth.

• *Employment Services*

One of the major hurdles for clients is obtaining and maintaining employment. Research has shown that employment is associated with lower rates of re-offending, and higher wages are associated with lower rates of criminal activity. To achieve these outcomes working with clients on techniques to identify an appropriate occupation, employer, and retain employment with advancement opportunities is essential.

A number of offender pre-employment training programs have been developed that should be reviewed for possible use at the CPC. These programs provide skill training including administering interest inventories, completing applications, mock interviewing, addressing

proper interview / job attire and interview etiquette in addition to teaching employment “soft skills”. Soft skills are the skills that assist clients in getting jobs as well as being successful in the workplace. Soft skills include: reporting to work on time, getting along with other workers, problem-solving and managing conflict resolution. Job development and placement services are also a critical part of effective employment services, and CPC staff should work with local employment and workforce development agencies to assist in placing CPC clients in jobs.

Component Four: Relapse Prevention

As a subset of CBT, Relapse Prevention Therapy (RPT) includes concepts and skills for working with those who are at risk of relapsing from their commitments to abstain from addictive or compulsive behaviors.

RPT proposes that relapse is less likely to occur when an individual possesses effective coping mechanisms to deal with such high-risk situations. With this, the individual experiences increased self-efficacy and, as the length of abstinence from inappropriate behavior increases and effective coping with risk situations multiplies, the likelihood of relapse diminishes.

RPT involves five change strategies:

1. Coping-skills training, which teaches ways to handle urges and cravings that occur in early stages of the habit change journey.
2. “Relapse Road Maps,” which are used to identify tempting and dangerous situations, with “detours” presented for avoiding these situations and successfully coping without having a lapse or relapse.
3. Strategies to identify and cope with cognitive distortions, such as denial and rationalization, that can increase the possibility of relapse with little conscious awareness.
4. Lifestyle modification techniques, so that harmful compulsive behavior with constructive and health-promoting activities and habits.
5. Learning to anticipate possible relapses, with unrealistic expectations of perfection replaced with encouragement to be prepared for mistakes or breakdowns and skills taught on how to learn from those mistakes and continue on.

RPT should be conducted at the CPC as a stand-alone intervention following completion of the primary interventions, or included as a component within the primary intervention.

In addition to RPT, each of the CBT and intermediate substance abuse interventions should conduct booster sessions for those clients who complete their treatment. The goals of booster sessions are to anticipate and prepare clients to face problem situations that will lead to crime; train clients to rehearse alternatives to antisocial behavior, encourage clients to practice new prosocial behaviors in increasingly difficult situations, and reward clients for demonstrating improved competencies. Booster sessions allow clients to practice real world application and struggles with the newly learned skills through behavioral methods such as role playing, feedback and praise. It is anticipated that most clients would benefit from booster sessions following the completion of a primary intervention.

Component Five: Aftercare

All CPC clients who are assessed as having a substance abuse problem and complete treatment should participate in Peer Recovery Support Services.

Peer recovery support services help people become and stay engaged in the recovery process and reduce the likelihood of relapse. Because they are designed and delivered by peers who have been successful in the recovery process, they embody a powerful message of hope, as well as a wealth of experiential knowledge. The services can effectively extend the reach of treatment beyond the clinical setting into the everyday environment of those seeking to achieve or sustain recovery.

Peer recovery support service projects have developed a variety of peer services. Not all programs provide all services, and some peer leaders may provide more than one service. Four major types of recovery support are (1) peer mentoring or coaching, (2) recovery resource connecting, (3) facilitating and leading recovery groups, and (4) building community:

Peer recovery support services can fill a need long recognized by treatment providers for services to support recovery after an individual leaves a treatment program. In addition, peer recovery support services hold promise as a vital link between systems that treat substance use disorders in a clinical setting and the larger communities in which people seeking to achieve and sustain recovery live. Using a nonmedical model in which social support services are provided by peer leaders who have experienced a substance use disorder and recovery, these services extend the continuum of care by facilitating entry into treatment, providing social support services during treatment, and providing a posttreatment safety net to those who are seeking to sustain treatment gains.

Component Six: Supportive Case Management

Case management is an active and purposeful intervention that can best be described as a coordinated approach of assessment, engagement, planning, setting goals, connecting clients to

community-based agencies, as well as holding clients accountable for their behaviors. The CPC Case Manager and the Probation Supervision Officer are responsible for the overall management of the client.

Following are some key activities that should be incorporated into their initial and subsequent contacts with the client:

- During the Initial Contact

- ✓ Explain the goals of the program and how the program will work with him/her to successfully complete the program.
- ✓ Using Motivational Interviewing techniques, discuss the circumstances that lead to the client being placed in the program.
- ✓ Explain that the role of the case manager and program staff is to both help him/her remain crime-free, address basic needs and if necessary, respond to any non-compliance with conditions set by the referral source and program rules.
- ✓ Review program rules and conditions of the referral source and how the program will communicate all information with the referral source.
- ✓ Explain the range of responses for non-compliance with conditions and program rules.
- ✓ Complete initial program intake and program paperwork gathering contact information and alternate addresses or phone numbers.
- ✓ Schedule the client for his/her assessment. Be sure to review any barriers the client may have in attending their session and how long the session will be.
- ✓ Answer all questions the client may ask.

- Subsequent Contacts

- ✓ Help the client explore and weigh the pro's and con's of changing his/her criminal behavior.
- ✓ Review goals and objective that have been developed by the client, reinforce strengths and explore any problems or concerns the client is having.
- ✓ Focus on criminogenic needs and help the client identify possible options to address them, including referrals to community programs.
- ✓ Use role plays to practice skills learned in groups.

- ✓ Help develop and encourage prosocial supports to assist the client now, and after he/she leaves the program.
- ✓ Point out, explore and challenge any distorted and/or criminal thinking exhibited by the client.
- ✓ Conclude each session by summarizing and reinforcing any positive progress and behavior. Summarize client's responsibilities that need to be completed by the next visit.

In addition to the above, the CPC Case Manager, the Probation Supervision Officer and other CPC staff should assist the clients in meeting their needs by obtaining services that are not conducted at the CPC. These services may include:

- Educational Services
- Mental Health Services
- Basic Needs

Component Seven: Positive Reinforcement and Sanctions

An important role in shaping behavior is applying a combination of rewards and sanctions. Literature on effective correctional programming states that positive reinforcement should outnumber punishers at a ratio of not less than 4:1. Programs should look for ways of “catching” clients doing something good and have a systematic approach of rewarding desired behaviors that support behavior change. Positive reinforcement however, is not done at the expense of holding clients accountable and applying swift and certain sanctions for unacceptable behavior and failure to comply with program rules and regulations.

The application of reinforcements and sanctions is derived from the therapeutic research on Contingency Management. Contingency Management (CM) is an intervention wherein specific behaviors are targeted for rewards or punishments to exact behavioral change. CM is based on operant conditioning principles wherein behaviors that are reinforced, or rewarded, are more likely to increase, and behaviors that are punished are more likely to decrease over time (Higgins & Petry, 1999).

The purpose of reinforcement is to *increase* a specific target behavior and can be either positive or negative in nature. Positive means *adding* or administering a contingency after a target behavior is performed. Negative means *removing* a contingency after a behavior is performed (Higgins, etal, 2008). As such, positive reinforcement is *administering* a contingency in order to *increase* a target

behavior. Negative reinforcement is the *removal* of a contingency but with the same goal of *increasing a target behavior*.

CM methods include but are not limited to token economies, shaping, behavior contracting, and voucher-based programs. Generally speaking, CM techniques are used in conjunction with other intervention methods including cognitive behavioral therapy.

Research has also demonstrated the efficacy of CM in reducing drinking and increasing compliance among alcoholics and problem drinking, as well as those involved with the criminal justice system (Higgins et al, 2008). To that end, the CPC should implement contingency management components into the everyday operations of the program.

CPC Case Managers should set up a contract with the client as part of the ISP, using the following four steps:

1. Staff arranges for targeted interventions/services based on risk and criminogenic needs.
2. Staff provides to client agreed upon tangible reinforcers when targets are reached (individualized incentives for each client).
3. Staff withholds designated incentives when targets are not completed.
4. Staff assists clients in establishing alternative, healthy options to replace the reinforcement derived from criminogenic areas.

CPC IMPLEMENTATION

Attached to this report is a flow chart of the CPC Services and Supervision Model, along with a projected annual operating budget. Based upon the recommended client services and within the annual budget, the CPC is projected to be approximately a 75 client/slot program. The program duration will be based upon the individual client's needs, and normally will be six to ten months. The CPC Program Team will be comprised of the following positions:

1. CPC Administrator (Probation Supervisor)
2. Three Case Managers (2 Journey Probation officers and Clinical Services Associate)
3. One Social Worker (.6 position)
4. One Patient Benefit Specialist (H&SS)
5. One Assessment Specialist (Dual Diagnosis (H&SS))
6. One Legal Procedures Clerk

The Probation Supervisor will serve as the Team leader and provide supervision to all other team members. The Case Managers will each carry a caseload of approximately 25 clients and provide weekly individual counseling. The Case Managers will also facilitate the client treatment groups for, Thinking For A Change; Reasoning and Rehabilitation; Intermediate Substance Abuse; and Program Booster Sessions. In addition the CPC will contract independently, or through Solano County Health and Social Services (H&SS), for the following services/positions.

1. Intensive Out Patient Substance Abuse Treatment
2. Residential Substance Abuse Treatment
3. Employment Specialist
4. Peer Recovery Support Services
5. Educational Services (GED/Literacy)
6. Transportation
7. Transitional Housing

H&SS will also provide Mental Health Services to CPC clients.

All CPC clients at the Vallejo location will be under Probation supervision, and the supervising probation officer will work closely with the CPC staff.

Although only minor physical plant modifications will be required at the Vallejo location, a substantial amount of staff training and coaching will need to be provided to the CPC staff as well as the probation officers supervising the cases. Once all of the CPC staff have been hired, it will take a number of weeks before they will be ready to conduct the CPC services that have been identified in this Report.

One of the reasons that evidence-based programs fail to achieve the expected results is the failure to implement and sustain the program as designed. As a new program, the CPC Director should report directly to the Chief or Deputy Chief of the Probation Department. After the CPC has stabilized and the desired outcomes are being achieved, the CPC Director could report to a Probation Manager. There will be many challenges that will need to be overcome to effectively implement the CPC. After approval of the program model, components and services, the focus will need to shift to implementation. Following are some brief general recommendations:

1. The program components should be derived from an examination of the risk and needs of the targeted participants, and be manageable.
2. The program model and interventions should be based on credible scientific evidence.

3. The program should not overstate the gains to be realized..
4. The fiscal requirements of the program should be cost-effective, sustainable, and should not jeopardize existing effective programs.
5. Program implementation should proceed incrementally and initially focus on achieving intermediate process goals.
6. A system for clinical supervision, continuous quality improvement, and program evaluation should be established.

CONCLUSION

Realignment will change how Solano County responds to many of its residents who are charged with, or convicted of a criminal offense. With this increased responsibility there is an opportunity to reduce recidivism and crime within the County. We are now confronted with the adage that if we continue to do what we have been doing, we will likely get the same results. With the recidivism rates of those offenders who are leaving the State's prison system at unacceptable levels, the County is in a position to do better. "Doing better" will undoubtedly not occur overnight, and will require persistence, patience, and leadership. In this regard, Solano County is fortunate to have a group of talented and dedicated individuals who are more than capable of leading this effort.

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ATTACHMENTS

ADMINISTRATIVE SANCTIONS FOR VIOLATIONS OF TERMS OF POSTRELEASE COMMUNITY SUPERVISION

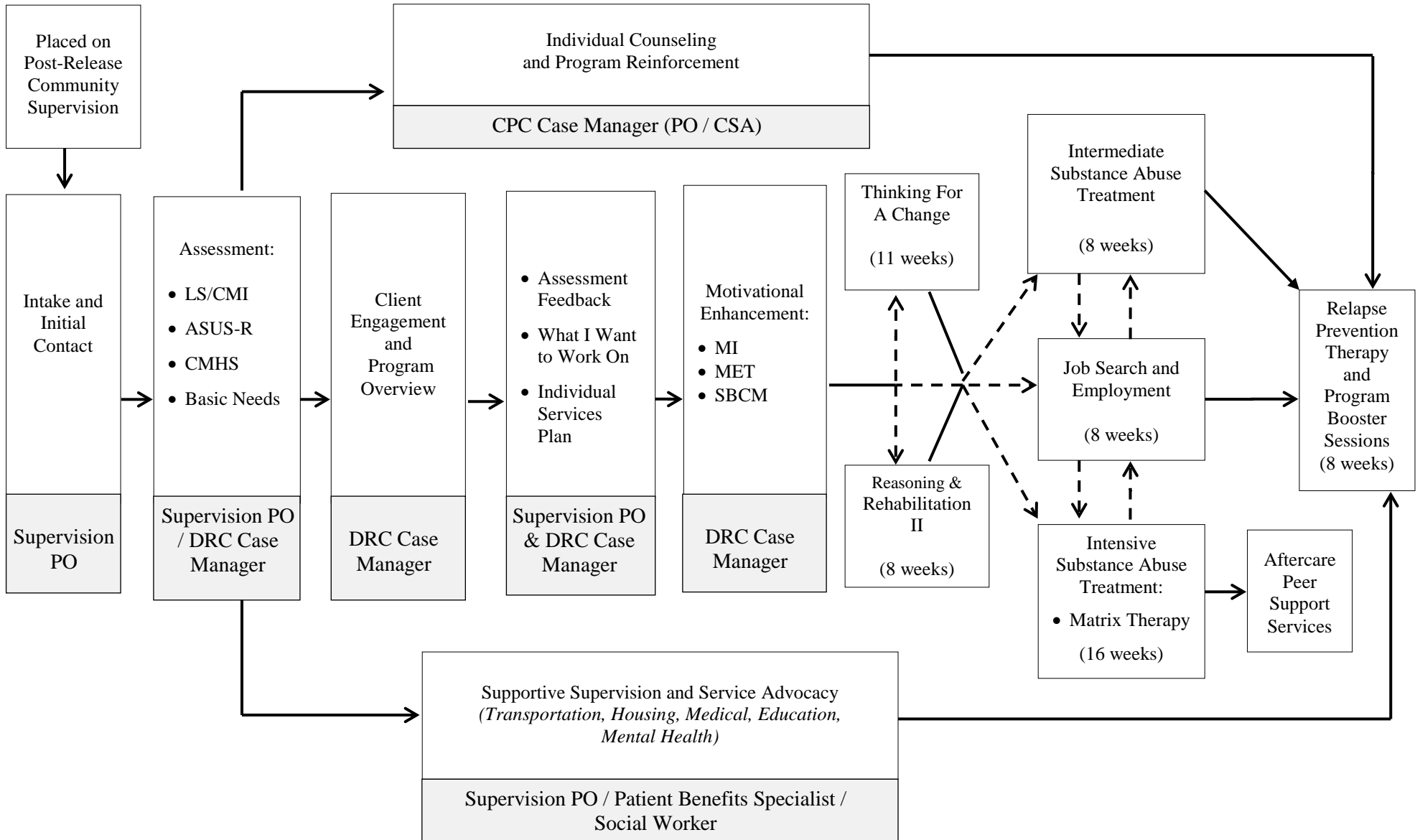
It is the intent of the Solano County District Attorney, Chief of Probation, Public Defender and Sheriff to facilitate successful completion of postrelease community supervision for offenders under their supervision by imposing graduated sanctions in response to technical violations in lieu of filing a petition for revocation with the court.

Below are guidelines for response to technical violations of postrelease community supervision relating to the imposition of graduated sanctions. The Level 1, 2, and 3 violations listed are not all-inclusive and may include other behaviors regarding noncompliance with terms and conditions of post release community supervision. Violations will be considered on a case-by-case basis consistent with risk level. **Level 3 sanctions will be approved by the Supervising Probation Officer.** The following list of sanctions consists of actions available to be utilized proportionately by your Probation Officer in response to your action(s). The sanctions are community-based interventions and are considered swift and certain consequences to your behavior as delayed response encourages violations. Sanctions do not always occur in a linear fashion.

Level 1 Violations	Level 1 Sanctions Available
Failure to Report – Arrest/Citation Failure to Report – As Instructed Failure to Report – Address/Telephone Number Change Failure to Register – 11590 HS Failure to Pay Fines/Fees Failure to Complete Community Service 1 st positive Drug/Alcohol Test Refusal to Drug/Alcohol Test Missed Treatment/Program Group Possession of Prohibited Items (non-weapons)	Verbal Warning Written Letter of Apology Referral to Education/Employment/Life Skills Program Develop Relapse Prevention Plan Educational / Home Study Activity Increased Drug Testing Increased Alcohol Testing Referral to Drug/Alcohol Treatment Community Service with Probation (Complete up to 24 hours within 30 days)
Level 2 Violations	Level 2 Sanctions Available
Multiple Level 1 Violations Failure to Comply with Level 1 Sanction 2 nd Positive Drug/Alcohol Test Offense Related Violation Continued Missed Treatment/Program Group Contact with Restricted Person/Place Possession of Prohibited Items (weapons) Failure to attend Offense-Specific Treatment Failure to follow Electronic Monitoring program rules Failure to follow Work Release program rules	Any Level 1 Sanction Multiple Level Sanctions in combination Referral for Treatment Assessment Increased Drug/Alcohol Testing Increased Reporting as Directed Modification of Treatment Plan Work Release with Sheriff's Office (Complete up to 48 hours within 30 days) Alcohol Monitoring with Sheriff's Office Curfew with Restriction using Voice ID System
Level 3 Violations	Level 3 Sanctions Available
Multiple Level 2 Violations Failure to comply with Level 2 Sanction Non-Threatening contact with victim Misd. Behavior (non-offense related) Leave State of CA without permission Termination from treatment program (non-residential) Failure to report from CDCR as instructed District Attorney Deferral	Any Level 1 or 2 Sanction Multiple Level Sanctions in Combination Modification of supervision terms and conditions Electronic Monitoring for up to 30 days Flash Incarceration up to 10 days

Multiple or severe violations such as but not limited to the following will result in immediate incarceration and will be reported to the court through the filing of a petition for revocation of community supervision: Abscond/termination from residential treatment program, Escape from Electronic Monitoring Program, new law violation, threatening contact with victim, and any continued Level 3 sanction violation.

CPC SERVICES AND SUPERVISION MODEL





**AGENDA SUBMITTAL TO SOLANO COUNTY COMMUNITY
CORRECTIONS PARTNERSHIP**

ITEM TITLE:		CCP MEETING DATE	AGENDA NUMBER
<p>Consider the Employment / Education / Housing Sub-committee’s recommendation for a framework for employment services under Public Safety Realignment (AB 109) for Solano County; Consider supporting a recommendation to the Board of Supervisors allocating \$250,000 for employment/vocational/training services; and Direct the Chair of the Community Corrections Partnership (CCP) to convene a panel to review local proposals for such services and/or pursue formal Request for Proposals or Request for Qualifications.</p>		February 13, 2013	7
Committee:	Employment / Education / Housing		
Contact:	Stephan Betz, Chair		
Phone:	784-8500		
	Published Notice Required?	Yes: _____	No: <u> X </u>
	Public Hearing Required?	Yes: _____	No: <u> X </u>

SUB-COMMITTEE RECOMMENDATION:

The CCP Employment / Education / Housing Sub-committee recommends that the CCP:

1. Consider the Employment / Education / Housing Sub-committee’s recommendation for a framework for employment services under AB 109 Realignment for Solano County;
2. Consider supporting a recommendation to the Board of Supervisors to approve an allocation of \$250,000 for such services.
3. Authorize the Chair of the CCP to convene a panel to review local proposals for employment/vocational/training services and/or pursue formal Request for Proposals or Request for Qualifications.

SUMMARY/DISCUSSION:

On October 17, 2011, the Executive Committee of the Solano County Community Corrections Partnership approved the Solano County AB 109 Realignment Plan that included employment services as one of its priorities for initial funding. The plan aims to implement “rapid referral protocols that line up appointments for offenders to meet with providers of health, mental health, substance abuse, employment, housing and/or other needed services immediately after release” and calls for an “investment in education, vocational training and employment”. Subsequently, the CCP formed an Employment / Education / Housing Sub-Committee to recommend allocations for employment services.

On October 17, 2012, the CCP voted to adopt the Service Center Implementation Plan Framework recommended by corrections consultant Thomas White which included a Job Developer position, GED / Adult Education as well as Transportation and Housing Vouchers recommended for funding by the Chair of the CCP Employment / Education / Housing sub-committee. The Chair of the sub-committee supported the framework and noted that this allocation for employment services, while a good first step, was not sufficient to cover all employment needs identified by the sub-committee.

After further deliberation and in recognition of more services, the CCP at its meeting January 16, 2013, tasked the Employment / Education / Housing sub-committee to produce an expanded service delivery framework that would use a one-time allocation of \$250,000 for employment/vocational/training services with the intent to solicit proposals from currently operating programs with a maximum expenditure of \$50,000 per program. These proposals should be considered pilot projects that test best practices for employment services for Solano County reentry clients and should be periodically evaluated for successful outcomes.

After careful consideration, the sub-committee now proposes the following seven point employment framework for CCP's consideration:

1. Start services with an assessment for career and skills, include educational testing, then develop individualized plans
2. Focus on specific populations, clients who are at medium or high risk to re-offend and employable, include clients with apprenticeship certificate
3. Link clients to apprenticeship programs and coordinate employment programs in the jail with similar programs outside the jail
4. Include Cognitive Behavior classes as a part of employment services,
5. Build a network for common case management and ensure a high level of case management,
6. Employ metrics and track concurrent with program to demonstrate early successes to employers, Measure success on metrics on the way to job placement, not solely job placement and compare our metrics against larger populations
7. Link programs to a Job Developer who is an advocate to employers and "owns the client", taking an approach that we stand behind our referrals of clients to employers and we commit to vetting clients thoroughly before making a referral to an employer

Services should be considered "pilot projects" leading to meaningful and sustained employment. The members of the sub-committee believe that funding for employment services outlined in the October 17, 2012 framework for services must be maintained in order for the additional pilot projects to be successful. In particular, the job developer will build and maintain trust relationships with employers, coordinate job readiness and employability assessments, provide job search assistance and placement to clients, and ensure job retention. Branching from these activities, the seven point employment framework provides the guidelines for employment programs. The sub-committee recommends that solicitation and evaluation of proposals for programs be expedited so that services can commence expeditiously.

FINANCING:

The requested appropriation of \$250,000 would be funded through Public Safety Realignment (AB 109). There is no impact on the County's General Fund.

ALTERNATIVES:

The CCP Executive Committee could choose not to consider the framework and not recommend funding for services at this time. This is not recommended, because approximately 210 AB 109 clients at high risk to re-offend need employment services to get a Second Chance for re-entry into their community.

The CCP Executive Committee could choose to adopt an amended framework, then direct the Chair of the Employment / Education / Housing Sub-committee to execute a Request For Proposals based on the amended framework.

OTHER ORGANIZATION INVOLVEMENT:

The Employment / Education / Housing Sub-committee met with members of the community and faith based organizations to build the framework.



**AGENDA SUBMITTAL TO SOLANO COUNTY COMMUNITY
CORRECTIONS PARTNERSHIP**

ITEM TITLE: Consider supporting a recommendation to the Board of Supervisors to approve a contract extension for Corrections Consultant Thomas White, for an amount not to exceed \$125,000, through December 31, 2014; and Consider supporting a recommendation to the County Administrator to approve a contract with Corrections Consultant Richard Crawford, for an amount not to exceed \$24,000, through December 31, 2013.		CCP MEETING DATE February 13, 2013	AGENDA NUMBER 8
Agency: Contact: Phone:	Probation Department Donna Robinson 784-7600		
	Published Notice Required?	Yes: _____	No: <input checked="" type="checkbox"/> _____
	Public Hearing Required?	Yes: _____	No: <input checked="" type="checkbox"/> _____

RECOMMENDATION:

The Probation Department recommends that the Solano County Community Corrections Partnership (CCP):

1. Consider supporting a recommendation to the Board of Supervisors to approve a contract extension for Corrections Consultant Thomas White, for an amount not to exceed \$125,000, through December 31, 2014;
2. Consider supporting a recommendation to the County Administrator to approve a contract with Corrections Consultant Richard Crawford, for an amount not to exceed \$24,000, through December 31, 2013.

SUMMARY/DISCUSSION:

On October 17, 2011, the CCP approved the 2011 Solano County Public Safety Realignment Plan that included a focus on cognitive behavioral programming to effect positive change in offenders as one of its priorities. The plan aims to implement and facilitate cognitive behavioral groups and provide referrals and resources to offenders under the jurisdiction of the Probation Department. To improve community supervision effectiveness and enhance community safety, the department identified specific curriculum geared towards reducing recidivism.

On August 8, 2012, the CCP approved supporting a contract with Corrections Consultant Thomas White. In addition to completing the framework for the Day Reporting Center/Service Center, Mr. White provided research, data, and service center models to the CCP and the management team at the Probation Department. Moreover, as the Department moves forward with effecting positive behavioral change in offenders through the use of research driven assessments, supervision strategies, and techniques, Mr. White has assisted in the initial

evaluation of the operations in the Adult Division. At this juncture, the services of Mr. White are still needed to implement and evaluate the programs provided to adult offenders, provide technical assistance to the CCP, incorporate feedback and input from community forums, and to assist in restructuring the operations of the Adult Division to include supervision strategies and techniques geared towards reducing recidivism.

The Probation Department is asking the CCP to supporting a recommendation to the County Administrator to approve funding a contract with Corrections Consultant Richard Crawford. The contract would cover fees and expenses for Mr. Crawford to moderate any necessary community forums related to the expansion of correctional treatment services throughout Solano County. In addition, Mr. Crawford will be working with the Probation Department to streamline the pre-sentence process to align with evidence based and best practices. This will assist the Probation Department in forming appropriate sentencing recommendations for the court.

After careful review and consideration, the department proposes the following for approval by the CCP:

1. Support a recommendation to the Board of Supervisors to approve a contract extension for Corrections Consultant Thomas White, for an amount not to exceed \$125,000, through December 31, 2014
2. Support a recommendation to the County Administrator to approve a contract with Corrections Consultant Richard Crawford, for an amount not to exceed \$24,000, through December 31, 2013.

FINANCING:

The requested appropriation of \$125,000 for Mr. White and \$24,000 for Mr. Crawford would be funded through Public Safety Realignment (AB 109) planning and start-up funds.

ALTERNATIVES:

The CCP Executive Committee could choose not to approve the contract extension for Mr. White or the contract for Mr. Crawford. This is not recommended. In order to implement effective programs and provide program fidelity, the services of a consultant who has expertise in this area is necessary. In addition, allowing Mr. White to continue to provide technical assistance to the CCP and the Probation Department as the County continues to move forward with implementing Public Safety Realignment is warranted.

OTHER ORGANIZATION INVOLVEMENT:

Sheriff's Office, Health and Social Services, Community Corrections Partnership, County Administrator's Office, Community Based Organizations, and Local Law Enforcement Agencies.