

## MENTALLY ILL OFFENDER CRIME REDUCTION GRANT PROGRAM PROPOSAL SUMMARIES

### Juvenile Proposals

#### Contra Costa County (\$950,000)

The Transitioning Out to Stay Out (TOSO) project will provide Functional Family Therapy to juvenile offenders and their families following an existing program of court-mandated therapy to improve transition from custody to the community. TOSO will be a supplemental layer of service beyond the suite of court-mandated services provided by the County to serious, persistent teenage male offenders and to sexually-exploited/repeat-offending female youth—groups who are at high-risk for re-offense.

#### Nevada County (\$750,000)

The Strengths, Opportunities, and Recidivism Reduction (SOARR) project will provide an intensive wraparound model for treating mental illness, eliminating barriers to recovery, teaching and reinforcing pro-social behaviors, and reducing recidivism. Wraparound services will be provided to the county's seriously mentally ill youth and their families and to those youth most at risk of an out-of-home placement, such as hospitalization, incarceration, or congregate care. Treatment will be designed to address the therapeutic needs, functional impairments, educational needs, and community resource deficits that frequently result in reoffending.

#### Orange County (\$1,060,539)

The Orange County project will provide integrated and individualized plans for mentally ill youth diagnosed with disorders including but not limited to mood-based disorders (depression, anxiety, bi-polar, etc.), trauma disorders, psychotic disorders, and those with co-occurring substance use disorders. Services will be provided through case management planning to ensure youth are referred to appropriate in-custody and community-based resources such as employment, housing, education, substance abuse and other supportive services as required. Services include a multi-phase structure encompassing assessment, recidivism and relapse prevention, intervention, supervision, prerelease treatment, transition planning, insurance needs, wraparound services in the community, and sustained aftercare up to age 25.

#### Riverside County (\$948,510)

The Intensive Re-Integration Services (IRIS) project is a collaborative, three-phase approach to support mentally ill juvenile offenders with successful community reentry. The first phase uses intensive in-custody treatment programs targeted towards addressing both significant mental illness and recidivism through multi-modal, evidence-based practices and strategies. The second phase focuses on reentry planning for youth, including appropriate housing, educational services, employment opportunities, job skills training, life skills development, and community reintegration skills. The third phase focuses on community supervision of the youth using either Functional Family Probation or Wraparound.

**San Diego County (\$950,000)**

The Screening, Assessment, and Services for Traumatized (SAST) Mentally Ill Juvenile Offenders project will provide short-term, cost-effective evidence-based interventions that are proven effective for traumatized youth. The SAST project will expand early identification and intervention for high-risk, high-need youth with mental illness and broaden the service continuum to reduce recidivism and improve outcomes by targeting trauma. Youth and their caregivers will receive Trauma Focused Cognitive Behavioral Therapy and Cognitive Processing Therapy, both of which reduces PTSD and depression.

**San Joaquin County (\$949,073)**

The Court for Individualized Treatment for Adolescents (CITA) Juvenile Mental Health Court will provide a specialized treatment model to address the mental health needs of mentally ill juvenile offenders, address the root causes of offending, and will provide a range of supportive services to help youthful offenders and decrease recidivism. The CITA project will include expediting early intervention through the timely screening and referral of participants, using a dedicated team approach, intensive supervision of participants, and placing the judge at the center of the treatment and supervision process. Interventions include Cognitive Behavioral Interventions (CBI) within the Juvenile Justice Center and in the community, Trauma Focused CBI, Aggression Replacement Training, and CBI for substance use.

**Santa Clara County (\$946,250)**

The Successful Outcomes and Active Reengagement (SOAR) project will implement culturally responsive evidence-based intervention throughout the county juvenile justice system. Components planned that will significantly impact mental health outcomes for youth and involvement with the juvenile justice and dependency systems include training of mental health providers in "*El Joven Noble*" and "*Cara y Corazon*" curricula, the addition of a social worker to the Dually Involved Youth Unit, services for commercially sexually exploited (CSE) youth and the formation of a youth advisory council. Project SOAR will allow for more targeted service to CSE youth, who are facing serious emotional and mental illnesses.

**Santa Cruz County (\$950,000)**

The "*Familias Unidas En Respecto, Tranquilidad y Esperanza*" (FUERTE) project (Families United in Respect, Tranquility, and Hope) will address the individuals' and families' therapeutic needs and criminogenic risks in order to reduce recidivism, reduce unnecessary use of detention through community-based alternatives, improve individual functioning, and increase family capacity/skills. The core services provided will be treatment matching through screening and assessments, in-home therapy for the youth and family, intensive case management, and linkages to community-based resources. Additional services may include therapeutic groups addressing aggressive/criminal behaviors and outpatient substance use/co-occurring disorder treatments.

**Yolo County (\$950,000)**

The Yolo County project will expand the county's current wraparound services to youth involved with the juvenile justice system who have co-occurring mental health and

substance abuse diagnoses. The project will coordinate a team using multiple resources, members from various agencies such as social services, behavioral health providers, and justice partners, and most importantly, the family. The wraparound program will coordinate appropriate services to provide treatment for youth and interventions that will improve youth and their family's functioning across multiple life domains to provide a smooth transition back into the community while reducing the likelihood of recidivism.

### **Adult Proposals**

#### **Alameda County (\$948,459)**

Operation My Home Town (OMHT) is an intensive pre- and post-release case management program that is intended to create a paradigm shift in reentry services for adult inmates. Participants in the program will receive extensive validated assessments, develop Individualized Reentry Plans with their Clinical Case Managers (CCMs), and engage in pre-release services (e.g., education, vocational training, cognitive behavioral interventions, restorative justice circles), and receive post-release case management. CCMs will assist participants' transition to the community and provide referral and support services until reentry goals are met for up to a year post-release. CCMs will also assist participants with enrollment for public benefits.

#### **Los Angeles County (\$1,834,000)**

"*Nemo Resideo*" (no one left behind) will provide a comprehensive and integrated discharge plan, as well as jail in-reach, intensive community-based services and housing to tri-morbid offenders (seriously mentally ill individuals with co-occurring disorders and a chronic medical condition). The program is an enhanced discharge planning program with jail in-reach by the community-based organization providing the wraparound services, intensive case management and housing upon release, as well as identification of service locations, treatment providers, a medical home, and a dedicated pharmacy.

#### **Madera County (\$869,547)**

The Behavioral Health Court will use multi-organizational collaboration to coordinate court-ordered integrated treatment, supervision and community resource plans for mentally ill offenders in order to achieve the optimum results of reduced jail recidivism and criminogenic risks. Necessary resources for participants include access to housing, access to prescribed psychotropic medication, intensive supervision and case management services. The project will also include transitional housing accommodations and securing residential treatment beds.

#### **San Francisco County (\$950,000)**

The San Francisco project will create a Behavioral Health Court (BHC) specifically designed to improve outcomes among adults with mental illness who are accused of misdemeanor offenses. As part of the BHC, continuum of care services and responses include direct housing services to support temporary and transitional housing for offenders, subsidized transportation, employment skills training, and incentives for participation in cognitive behavioral therapy and evidence-based interventions such as

Moral Reconciliation Therapy and Wellness Recovery Action Plan. A peer specialist will also be included to support BHC clients through the process.

#### San Luis Obispo County (\$950,000)

The San Luis Obispo project will implement a collaborative and multidisciplinary program designed to provide for a Behavioral Health clinician at pre-trial to screen mentally ill offenders as they are being sentenced to provide an alternative to incarceration, in-custody evidence-based treatment services, increased capacity within the community clinic to provide walk-in medication and screening appointments for post-release offenders in order to provide an immediate and seamless reentry of the client into the community. In-custody treatment services include Cognitive Behavioral Therapy for Psychosis, Criminogenic interventions (Moral Reconciliation Therapy), and trauma-focused treatment (Seeking Safety).

#### Santa Clara County (\$950,000)

The In-Custody Reentry Team (ICRT) will support the successful reentry of inmates with a serious mental illness. The ICRT will employ incarceration-based, prevention-oriented case management and discharge planning to program clients, linking them to post-release services and increasing engagement in the types of treatment and support services that will improve their quality of life and reduce their chances of recidivating. The ICRT will work with serious mentally ill offenders from booking to release, establishing a reentry case plan within days of a mental health referral and following the client through incarceration to their release through service linkages.

#### Santa Cruz County (\$949,995)

The Mentally Ill Offender Continuum of Care project will address the effects of mentally ill offenders in the local criminal justice system including this population's typically longer average length of stay in the County Jail due to their distinctive needs, the impact of untreated offenders with psychiatric issues in the community, and the need to draw from the evidence-based practice and intensive treatment of the Forensic Assertive Community Treatment (FACT) model. The project will provide pre-offender interventions as prevention opportunities through law enforcement liaison personnel, provide post-arrest diversion programming through in-custody dual diagnosis treatment services, Probation pre-trial and supervision services, and expand capacity for the FACT team.

#### Solano County (\$949,998)

The Solano County project will create a county-wide response to the issues of services, treatment, and recidivism reduction for the justice-involved mentally ill. The project will divert low level offenders prior to and shortly after booking, will provide Jail-based mental health programming for sentenced and certain un-sentenced offenders after assessment, and will provide comprehensive reentry planning and intensive case management aftercare services to the participants prior to and after release. The County will create Collaborative Teams to direct the work of the diversion and reentry/aftercare components of the project and will use the evidence-based practice Critical Time Intervention to guide the reentry and aftercare process.