

Placer County Proposition 47 Grant Local Evaluation Plan

Project Background – Information essential to understanding the grantee’s project. This section should include an overview of the project and the project goals and objectives as stated in the “Project Evaluation Plan” section of the proposal.

The Placer County Proposition 47 Action Team will deliver strengths-based, individual- and family-driven, solution-focused wraparound-type services to address the mental health, substance use, and diversion needs of young adults (YA), ages 18-32. The Action Team will offer an array of services and supports to engage the YA in services and achieve each individual’s goals.

The Action Team will assist in delivering mental health (MH) and/or substance use disorder (SUD) treatment, as well as providing support in finding safe and stable housing; developing vocational or educational skills; and creating positive social communities to support healthy choices. Services will be culturally competent and trauma informed, and be tailored to the individual’s needs, with overall goals of diverting individuals from the criminal justice system, preventing recidivism, and promoting safe and healthy communities.

Overview of Goals and Objectives

Goal 1: Transition YA who have been arrested for non-serious, nonviolent crimes from jail, and deliver MH and/or SUD treatment. Objectives: By the end of the grant period, the Action Team will: 1) Increase identification and assessment of arrested YA with MH and/or SUD issues; 2) Increase the number of YA who receive and complete MH and/or SUD treatment and avoid relapse; 3) Coordinate collaborative diversion services with Probation (e.g., Drug Court) to increase use of treatment services and remain arrest free; and 4) Link YA to community support groups (e.g., Alcoholics Anonymous) to achieve and sustain positive outcomes.

Goal 2: Reduce homelessness of YA arrested for or convicted of non-serious, nonviolent crimes. By the end of the grant period, the Action Team and organizational providers will: 1) Increase the number and percent of YA who are in a stable living arrangement; and 2) Deliver housing support services to increase the number and percent of YA living independently.

Goal 3: Reduce recidivism of YA who are arrested for or convicted of non-serious, nonviolent crimes. Objectives: By the end of the grant period, the Action Team will: 1) Increase the number and percent of YA who complete vocational and educational activities; 2) Increase the number and percent of employed YA; 3) Teach healthy communication skills to strengthen social support networks and to sustain positive outcomes; and 4) Deliver support services to family members to strengthen relationships with YA.

Project Performance – Describe the method for tracking changes and project performance over time.

Placer County has extensive experience in collecting baseline and outcome data across our systems of care and Mental Health Services Act (MHSA) activities. IDEA Consulting is the organization that will design and implement the Local Evaluation Plan. Over the past four (4) years, IDEA Consulting has served as the Evaluator for a number of Placer County evaluation activities, including MHSA, Whole Person Care, and the Substance Abuse and Mental Health Services Administration (SAMHSA) Primary and Behavioral Health Care Integration grant. IDEA Consulting is responsible for tracking changes and overall project performance for the Action Team.

Data Management – Describe the data sources, tools, and timelines for collecting data, who and where the data will be collected, and the methodology for analyzing the data. Include a description of any data sharing agreements and indicate if those agreements are in place.

IDEA Consulting has outlined, identified, and/or developed the data sources and tools needed to collect and analyze the data for this project. The Action Team will work closely with jail and probation staff to identify and refer individuals who meet the target population criteria. Once a YA has been referred, the Action Team will complete a brief Screening Tool to quickly assess for mental health and substance use issues. Demographic information will be collected (e.g., age, race/ ethnicity, gender, sexual orientation) to provide information on each person served and analyze trends in outcomes.

For YA who meet the Action Team target population, a full Behavioral Health assessment will be completed to identify the needs of the individual. In addition, baseline information on key outcome measures will be collected, including: living situation, educational and/or vocational training, employment, arrests, and days in jail. The Action Team will also assess needs of family members, when appropriate.

On an ongoing basis, the Action Team will collect information on services delivered. This data will include mental health and substance use services received, activities delivered by Action Team members, and YA involvement in community activities. Information on arrests, jail days, and involvement in Drug and Diversion Courts, will be collected from the jail and/or Probation department through data agreements with Health and Human Services (HHS). This data will provide information on diversion and recidivism.

Satisfaction with services will be collected to obtain feedback on services from the YA and their family members. HIPAA/HITECH and 42 CFR standards will be followed. Confidentiality requirements will be documented through collection of forms, including Consent to Participate, Release of Information, and Authorization for Services at admission and annually.

This evaluation will be designed, analyzed, and reported by IDEA Consulting, and evaluation reports will be shared with the Action Team, Behavioral Health and Probation managers, and other stakeholder groups, participating agencies, and organizations.

IDEA Consulting will utilize the extensive data collection tools developed for Placer County over the past four years and modify these tools to meet the needs of this project. This strategy will ensure systematic data collection and evaluation models to evaluate the success of the Action Team and meet the evaluation and reporting requirements of Prop 47.

Research Design – Describe the research design that will be used to evaluate the conduct (process evaluation) and evaluate the effectiveness (outcome evaluation) of the project. Each is described below.

1. Process Evaluation: For the purpose of the LEP, describe the development, implementation, services, and method of service delivery. This section answers the following questions:

- *How was the project developed?*
The project was developed during the planning and development of the proposal. Once the organizational provider is selected, Behavioral Health, Probation, and the Evaluator will meet the organizational provider to design and implement the goals of the grant.
- *How will the project be implemented?*
Once staff from the Action Team are hired, they will be trained to collect data on the evaluation forms. This training will provide guidance to the collection of the MH and SUD assessment tools, identify YA who meet the target population criteria and ensure timely access to the program. In addition, staff will be trained in the identified Evidence-Based Practices (EBPs) to create core skills for providing wellness, recovery, and strength-based services.
- *How many participants does the project expect to serve?*
It is estimated that approximately 100 YA will be served each year, with a total of over 200 unduplicated YA served across the three-year project.
- *How will participants be tracked in terms of progress in the project, dropouts, and successful completions?*
YA will be traced throughout the project through staff completion of an Individual Services Tracking form for each YA, for each day of service. The Individual Services Tracking form collects information on the date of service; types of services received; and key events (e.g., enrollment, discharge, successful completions, employment, educational activities, arrests, hospitalizations, and services received). The Individual Services Tracking form provides ongoing information on all services and events for each YA, and provides the foundation for the evaluation activities and outcomes.
- *What achievement indicators will be tracked during the project?*
The achievement indicators, or outcomes measures, collected will include recidivism reduction (arrests and encounters with law enforcement); mental health and substance use risk and resiliency factors; living arrangement; participation

and graduation from Drug Court; employment; and educational activities. Baseline data will be collected at admission to the Action Team, and changes to each indicator will be tracked over time. This information will show improved outcomes on reduced recidivism, health, substance use, housing stability, employment, and educational attainment. Social support and improvement in family involvement will also be tracked over time.

- *What are the services and how will they be delivered?*

An array of services will be delivered by the Action Team, as well as utilizing other existing services in the community. YA will receive MH and SUD services to help them improve functioning. Drug court will be utilized, when appropriate, to support the YA and family, to meet goals. Peer and family advocates on the Action Team will create a welcoming, recovery, strength-based environment to support success, positive choices, and help YA navigate through the system to achieve employment and/or enroll in the local community college to gain skills to meet their goals. Housing support services will also be available, including housing vouchers, to support stable, save housing in the community.

- *How many staff will be involved and how many hours will be devoted to the project?*

Project staff include:

- 1.0 FTE Project Lead (MH licensed and/or SUD certified): provides oversight of the project to ensure that the grant is implemented, and outcomes are achieved.
 - 1.0 FTE Dual Diagnosis (MH/SUD) Clinician: provides direct MH and SUD treatment services to YA and link them to engagement activities and more intensive services, as needed.
 - 2.0 FTE Young Adult Peer Advocates (Paraprofessionals) will build rapport, develop trust, and support individuals enrolled in the Action Team to meet their goals.
 - 1.0 FTE Family Peer Advocate (Paraprofessional) will support family members/support persons to develop positive relationships with individuals in the program, to build positive support networks, and create lasting relationships.
- *Describe the process variables and measures.*
Process measures include: a) Annual number of YA enrolled with the Action Team who meet the target population criteria, with a priority to enroll individuals who are Black, Hispanic, and/or Native American; b) Number of MH and SUD services treatment hours delivered annually; c) Number of YA attending self-help meetings (e.g., Alcoholics Anonymous) annually; d) Number of YA enrolled in Drug / Diversion Courts; Number of YA receiving housing support; and e) Number of YA receiving support to attend training/educational and/or vocational training activities annually.

- 2. Outcome Evaluation:** *The purpose of the outcome evaluation is to determine if the program “worked” in terms of achieving the goals as stated in the proposal. For the purpose of writing the LEP, list the outcome variables that will be collected. For each outcome variable listed, describe how the variable will be measured. Describe the method by which the impact of the project/intervention(s) on the outcomes to be measured will be determined. You may want to include a description of the comparison group (i.e., a group that will not participate in the program) including the comparison group eligibility criteria and sample size. Also include the operation definition of all independent and dependent variables. For Example: Project Interventions (Independent Variables). Interventions might include such things as:*
- *Organizational changes (e.g., staff assignments, organizational development);*
 - *Staff training (e.g., motivational interviewing);*
 - *New or altered assessment instruments (e.g., for assessing participant needs);*
 - *Alternatives to secure detention (e.g., home detention with electronic monitoring);*
 - *Services (e.g., expanded or improved services to participants to reduce recidivism).*
 - *Include in the description of interventions, for example:*
 - *The estimated number of participants who will be affected (the number that will receive each type of intervention in the project),*
 - *The estimated number of participants for whom individual data will be collected and analyzed (e.g., the number of participants for whom data will be entered into a database as individual records).*
 - *A list of variables that will be included in a participant’s participation record (e.g., background data, program participation data, program achievement and completion data, follow-up data).*
 - *A list of any eligibility criteria such as age, gender, type of offense, etc.*
 - *Also, for programs in which participants were asked or required to enroll (e.g., drug/alcohol treatment), provide program specifics, such as:*
 - *Program components (e.g., training topics, services provided, types of family involvement);*
 - *Length of the program;*
 - *Eligibility criteria for participation in the program;*
 - *Criteria for successful completion in the program;*
 - *A description of how those who fail to successfully complete the program (e.g., dropouts) will be treated in the research.*
 - *If multiple types of interventions will be employed, describe how the separate effects on outcome variables of each type of the intervention will be determined, if possible. If not possible, explain how the results will be interpreted given that outcomes might be due to complex interactions among interventions.*

The Action Team intervention will create a welcoming, strength-based environment and team that will support the YA to identify goals and activities to help them achieve positive life changes. The Action Team will utilize EBPs and interventions and apply them in a creative, person-centered manner. This approach will include creating a supportive, positive environment that engages YA, family, and multiple agencies to achieve positive outcomes.

Young adults, ages 18-32, who have been arrested, charged, or convicted of a non-serious offense (e.g., petty theft or drug possession) and have a history of MH and/or SUD issues that

limits one or more of their life activities, are eligible for enrollment in the Action Team. Individuals may receive services until they meet their goals. It is anticipated that the average length of time in the program will vary between 6 and 12 months, with some individuals requiring additional time in the program to meet their goals. Successful completion in the program depends upon the individual's goals and may include stability of MH and/or SUD; graduation from Drug Court and/or probation; no repeat offenses/re-arrests; part or full-time employment; enrollment in educational activities and stability in a safe living situation.

The Action Team will utilize activities of interest to this 18-to-32-year-old group and provide the additional support needed to reduce MH and SUD issues and recidivism, and to develop positive alternative behaviors. The Action Team includes five positions funded with grant funds: 2.0 FTE staff with experience in MH and/or SUD services, 2.0 FTE YA Peer Advocates with lived experience, 1.0 FTE Family Peer Advocate. In addition, 1.5 FTE positions are funded by partner agencies: 1.0 FTE Probation Officer, .5 FTE CSP. Volunteers, community mentors, and family advocates will also provide supportive services to the team. The Action Team will create opportunities to help achieve healthy outcomes. The Action Team will utilize a harm-reduction model to give individuals ongoing, positive support, to help make positive choices, while learning to achieve their goals. The success of this innovative model will provide clear evaluation outcomes to demonstrate effective components of the program. Data will be reported on all individuals served by this project, including reporting the number who drop-out and the number who successfully complete services.

The Action Team will be trained in Motivational Interviewing, trauma-informed services, harm reduction, and promoting the individual's voice as the driving force in the design and development of the individual's services. The Action Team will work directly with Probation, the Placer Re-Entry Program (PREP), the sheriff and jail staff, courts, and Behavioral Health to identify YA who are appropriate for enrollment. An Action Team member will follow-up on each referral with a face-to-face meeting with the YA to assess the individual's immediate and long-term needs and goals, cultural background, and support network, as well as to assess the individual's MH and SUD history; suicidal behavior; involvement with criminal justice; enrollment in Drug Court; current living situation; education; vocational and employment history; family involvement; and history of trauma, abuse, domestic violence, etc., to provide baseline data.

Interventions will include MH and/or SUD treatment, with services designed to meet each individual's needs. When indicated on the Behavioral Health assessment, individuals may be referred to existing MH and/or SUD treatment in the community. Other interventions may include job coaching to obtain employment, support to enroll and attend community college, and/or housing support services to find safe and stable housing. The Action Team will utilize a "Whole Person Care" and a "whatever it takes" philosophy to create a wraparound model of services to engage, support, mentor, and celebrate achievements. The Young Adult and Family Peer Advocates will provide leadership and support to individuals to help them achieve positive outcomes. This program will include a harm-reduction model, to provide support to help YA learn to make positive choices.

According to a Pew Center on the States study in 2011, reliable strategies to prevent recidivism include access to education, aid in finding and maintaining employment, connections to the community and family, and, when appropriate, progressive sanctions for violations. The Action Team will utilize the court system to divert individuals from jail, as well as apply sanctions, when appropriate, to help prevent recidivism. The Action Team will work closely with the courts, Probation, PREP, and legal services to support diversion and reduce recidivism. These programs will improve access to the continuum of supports and services.

On an ongoing basis, the Action Team will collect information on services delivered. This data will include MH and SUD services received, activities led by Action Team members, and involvement in community activities. Information on key indicators including living situation; months in educational/vocational training; employment; arrests; days in jail; recidivism; community safety; and services provided will be collected to evaluate program success. YA and family satisfaction surveys will also be used to provide feedback on the success of the program.

A pre-post evaluation design will be utilized to compare outcome indicators at baseline and periodically throughout enrollment in the Action Team program.

Data for the evaluation activities will utilize Electronic Health Record (EHR) data from HHS and Probation Department, as well as data collected by the Action Team. The evaluation activities will meet or exceed the state performance measurement requirements. In addition, local evaluation activities will be conducted throughout the three-year period. Data will be evaluated to identify differences in access, service utilization, and outcomes, to determine whether the Action Team services were effective at promoting community health and safety. The Action Team will adhere to the National Standards for Culturally and Linguistically Appropriate Services (CLAS).

3. **Outcome Measure:** *As required by the grant, “At a minimum, recidivism reduction must be an outcome measure for the project.” For the purpose of the LEP, provide the following:*
- *A strategy for determining whether or not recidivism may be lower at the end of the project than before the project began.*
 - *A rationale for concluding that any reduction in recidivism will be due to the project and not some other factor unrelated to the project (e.g., over the last several years, there has been a statewide decline in juvenile arrests, bookings and juvenile hall detention; and any program to reduce these variables would have to show reductions over and above the current statewide trends).*

Outcomes will be measured throughout the grant for all YA enrolled in the Action Team. Individual outcomes measure if each individual improves and maintains key indicators. This data will be collected through use of the Individual Services Tracking form to collect changes in arrests, living situation, employment, vocational, and other key outcomes. Outcome measures will be calculated to document the: a) Number and percent of YA in stable housing situations; b) Number and percent of YA with improved health, MH, and SUD indicators; c) Number and percent of YA who avoid relapse; d) Number and percent of YA employed and/or in school; e) Number and percent of YA with reduced number of arrests, reduced days in jail; f) Number of

YA diverted from jail annually; g) Number and percent of YA who remain arrest free; and h) Number of YA involved in healthy social activities.

A pre-post evaluation design will be utilized to compare outcome indicators at baseline and periodically throughout enrollment in the Action Team program. Data for the evaluation activities will utilize EHR data from HHS and Probation, as well as data collected by the Action Team. The evaluation activities will meet or exceed the state performance measurement requirements. In addition, local evaluation activities will be conducted throughout the three-year period. Data will be evaluated to identify differences in access, service utilization, and outcomes, to determine whether the Action Team services were effective at promoting community health and safety. The Action Team will adhere to the National Standards for Culturally and Linguistically Appropriate Services (CLAS).

Documentation of services delivered, length of time in program, pre-post outcome measurement, and satisfaction with services will help establish the effectiveness of the Action Team's interventions with this high risk, high need population. Reductions in recidivism and improvement in outcomes will demonstrate the effectiveness of this project across the three years.

***A Logic Model** – A visual representation of the project depicting the logical relationships between the input/resources, activities, outputs, outcomes, and impacts of the project.*

Please see Attachment A for the Placer County Prop 47 Grant Logic Model.

Attachment A - Placer County Prop 47 Program – Logic Model

INPUTS	ACTIVITIES / OUTPUTS	GOALS / OUTCOMES		IMPACTS
<ul style="list-style-type: none"> • Contracted organizational provider implements the Action Team and utilizes the principles of Assertive Community Treatment (ACT) and Wraparound Team; in collaboration and partnership with HHS, MH, SUD, probation, education, housing, courts, jail, and community providers; peer and family advocates/mentors; volunteer mentors; young adults and family members • Time • Leverage Funding: Grant dollars; AB 109 funds; 678 dollars; MHSA; HUD; JAG; Veterans; Whole Person Care; SAMHSA Health 360 grant; in-kind contributions; Drug and Mental Health Medi-Cal • Local Community Partners • Research 	<ul style="list-style-type: none"> • Contracted Org. provider delivers coordinated, culturally competent BH services; probation officer in kind • Train Action Team in EBPs • Action Team delivers high-interest engagement activities; BH services, coordinates with probation, courts, and jail • Advance principles of restorative justice to reduce recidivism • Identify, refer, and enroll persons (ages 18-32) who have been arrested, charged, or convicted of an offense AND have mental health issues or substance use disorders • Coordinate services and deliver client-centered, trauma-informed evidence-based services, including MH and SUD treatment, support successful housing and employment skills; transportation; and flex funds • Utilize collaborative courts to support program goals • Utilize paid and volunteer peer mentors to support young adults and family members • Conduct Action Team meetings • Routinely gather data on utilization and outcomes • Evaluate program through data analysis and reports • Share data and outcomes with WRAP and community partners • Celebrate successes 	<p style="text-align: center;"><u>Young Adult Outcomes</u></p> <ul style="list-style-type: none"> • Employed and/or in school • Reduced number of arrests • Reduced number of days in jail • Reduced recidivism • Reduced mental health symptoms • Reduced substance use • Living in safe and stable housing situation • Involved in a positive social community • Involved in healthy social activities • Improved health, mental health, and substance use indicators • Long-term lasting support networks 	<p style="text-align: center;"><u>System Outcomes</u></p> <ul style="list-style-type: none"> • Enhanced coordination and integration of probation, courts, jail, health, mental health, substance use services, housing assistance, job skills and employment, civil legal services to reduce recidivism • Implementation of culturally competent WRAP model of care • Delivery of engagement activities, timely access to services; development of positive social community for young adult and family • Coordinated, and individualized mental health and substance use treatment; housing assistance, employment support; transportation • Data collection, measurement, and evaluation of key health, mental health, substance use indicators, arrests, and recidivism • Development of shared reports to track outcomes and improve services over time, including client and family satisfaction with access, services, and outcomes 	<ul style="list-style-type: none"> • Persons (ages 18-32) who have been arrested, charged with, or convicted of a criminal offense AND who have mental health and/or substance use issues; have increased access to intensive, coordinated, and individualized Action Team services to successfully redirect their lives, engage in a healthy social community, and achieve positive outcomes • A vibrant learning collaborative is maintained • Integrated services offer seamless, coordinated care • Program data analysis and shared mental health, substance use, and arrest outcomes are utilized to continually improve quality and integration of care