



# COUNTYWIDE CRIMINAL JUSTICE COORDINATION COMMITTEE



February 4, 2025

TO: Supervisor Kathryn Barger, Chair  
Supervisor Hilda L. Solis  
Supervisor Holly J. Mitchell  
Supervisor Lindsey P. Horvath  
Supervisor Janice Hahn

FROM: Guillermo Viera Rosa, Chief Probation Officer  
Chair, Public Safety Realignment Team

*Handwritten signature and date: 2/2/25*

SUBJECT: Public Safety Realignment Implementation – February 2025 Update

## **Introduction**

The Public Safety Realignment Team (PSRT) was established by the Board of Supervisors to coordinate the County's implementation of Public Safety Realignment (AB 109) and advise the Board on AB 109-related matters. Chaired by the Chief Probation Officer and comprised of multiple agencies and stakeholders, PSRT provides regular updates to your Board on focus areas and key activities of the committee.

This update covers the following:

- the preparation and submission of the annual Community Corrections Partnership (CCP) Survey response to the Board of State and Community Corrections (BSCC); and
- the preparation and submission of the 2025 CCP Plan update for your Board's approval.

## **Community Corrections Partnership Survey Response**

Each year, the BSCC conducts a survey of counties' CCPs. The survey response prepared by PSRT and implementing agencies provides a summary of public safety realignment implementation and progress on system-wide goals developed by the PSRT.

The attached CCP survey response was submitted to the BSCC in December 2024 (Attachment A). As a required component of the annual survey, the 2024 CCP plan that was approved by the Board of Supervisors in February 2024 was also provided to the BSCC with this submission.

## **2025 Community Corrections Partnership Plan**

The PSRT is submitting the 2025 CCP Plan update (Attachment B) and requesting approval by your Board.

The 2025 CCP Plan includes:

1. The revised CCP Plan framework approved by the PSRT in June 2021 and by the Board of Supervisors in August 2021. This remains the core, guiding framework for AB 109 implementation. (Note: The PSRT amended the framework in January 2024 to reference accurately those programs that are now overseen by the Justice, Care, and Opportunities Department (JCOD), which had not yet been established in 2021.)
2. The Fiscal Year 2024-25 Public Safety Realignment (AB 109) funding allocation approved by the Board of Supervisors on October 8, 2024.
3. Goals, Objectives, and Outcome Measures approved by the PSRT in September 2024 and submitted to the BSCC in December 2024.
4. The roster of PSRT members and designated alternates.

### **Conclusion**

The PSRT continues to meet regularly to review public safety realignment implementation in the County of Los Angeles and follow through with the direction provided from this Board.

If you have any questions about this update or need additional information, please contact me or Mark Delgado, Executive Director of the Countywide Criminal Justice Coordination Committee.

### Attachments

GVR:KE:MD:cm

c: Fesia Davenport, Chief Executive Officer  
Edward Yen, Executive Officer, Board of Supervisors  
Dawyn R. Harrison, County Counsel  
Mark Delgado, Executive Director, CCJCC

**ATTACHMENT A:**  
**FY 2024-2025 CCP Survey**  
**Response to BSCC**

## FY 2024-25 Community Corrections Partnership Survey PART A – TEMPLATE ONLY

Part A of the Fiscal Year (FY) 2024-25 Community Corrections Partnership (CCP) Survey collects information about CCP Membership and implementation of the county’s CCP plan. For detailed guidance on how to complete Part A of the CCP Survey, please refer to the [FY2024-25 CCP Survey Data Reporting Guide](#).

Part A is divided into five (5) sections:

- Section 1: Respondent Information
- Section 2: CCP Membership
- Section 3: Goals, Objectives, and Outcome Measures
- Section 4: Types of Programming and Services
- Section 5: Optional Questions

When applicable, use **person-first language** and terminology that eliminates potential generalizations, assumptions, and stereotypes that stigmatize individuals (e.g., incarcerated person(s), justice-involved individual(s), individual(s) impacted by the justice system).

Responses to the CCP Survey shall represent the collective views of the CCP and not a single agency or individual.

### SECTION 1: RESPONDENT INFORMATION

Section 1 asks questions related to the county for which survey responses are provided, the individual who is completing the survey, and who BSCC may contact for follow-up questions. There are three (3) questions in this section.

1. Please identify the county name for which this survey is being submitted: LOS ANGELES
2. Provide the contact information for the individual completing this survey in the spaces provided to the right of the list.

Survey Respondent Contact Information	
Name:	Mark Delgado
Organization:	Los Angeles County Countywide Criminal Justice Coordination Committee (CCJCC)
Email Address:	mdelgado@ccjcc.lacounty.gov
Phone Number:	(213) 974-8399

3. Identify the individual who may be contacted for follow up questions. Check the appropriate box to the left of the list.

Same as above

Other (If "Other" is selected, provide contact information below)

Survey Follow-up Contact Information	
Name:	Craig Marin
Organization:	Los Angeles County Countywide Criminal Justice Coordination Committee (CCJCC)
Email Address:	cmarin@ccjcc.lacounty.gov
Phone Number:	213-974-2689

## SECTION 2: CCP MEMBERSHIP

Section 2 asks questions related to the CCP composition and meeting frequency. There are four (4) questions in this section.

4. CCP membership roles: Provide the name and organization of each individual fulfilling a membership role as of October 1, 2024 in the spaces to the right of each membership role.
- If a public membership role does not exist in the county, respond by indicating “not applicable.” This should only be used if the county does not have the specific position listed.
  - If a position exists in the county but the membership role is not filled in the CCP, respond by indicating “vacant.”
  - For county positions, one person may fill multiple roles.

Role	Name	Organization
Chief Probation Officer	Guillermo Viera Rosa	County Probation Dept.
Presiding Judge of the Superior Court or designee	Ricardo Ocampo, Supervising Judge of Criminal Division	Superior Court of California
County Supervisor or Chief Administrative Officer or a designee of the Board of Supervisors	Fesia Davenport	County Chief Executive Office
District Attorney	George Gascón	County District Attorney Office
Public Defender	Ricardo Garcia / Erika Anzoategui	Public Defender's Office / Alternate Public Defender's Office
Sheriff	Robert Luna	County Sheriff's Dept.
Chief of Police	Dominic Choi / Darren Arakawa	Los Angeles Police Department / County Police Chiefs Association
Head of the County Department of Social Services	Jackie Contreras	Department of Public Social Services

Head of the County Department of Mental Health	Lisa Wong	Department of Mental Health
Head of the County Department of Employment	Kelly LoBianco	Department of Economic Opportunity
Head of the County Alcohol and Substance Abuse Programs	Gary Tsai	Department of Public Health, Substance Abuse Prevention and Control
Head of the County Office of Education	Debra Duardo	County Office of Education
A representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense	Troy Vaughn	Los Angeles Regional Reentry Partnership
An individual who represents the interests of victims	<p>Itzel Citlali Bonilla</p> <hr/> <p>*NOTE: The Los Angeles County CCP has additional members to those listed above:</p> <p>Christina Ghaly</p> <p>Jennifer Hunt</p> <p>D'Artagnan Scorza</p> <p>Judge Songhai Armstead (Ret.)</p> <p>Ivette Alé-Ferlito</p>	<p>Representative of the interests of victims</p> <p>Director, Department of Health Services</p> <p>Director, Office of Diversion and Reentry</p> <p>Executive Director, Anti-Racism, Diversity, and Inclusion Initiative</p> <p>Director, Justice, Care, and Opportunities Department</p> <p>Board of Supervisors Appointees:</p> <p>First Supervisorial District Appointee</p>

	Vacant	Second Supervisorial District Appointee
	Marisa Arrona	Third Supervisorial District Appointee
	Jose Osuna	Fourth Supervisorial District Appointee
	Josh McCurry	Fifth Supervisorial District Appointee

5. How often does the CCP meet? Check the appropriate box to the left of the list. Select the **one/single** option that best describes the CCP's **regular** meeting schedule.

- Bi-weekly (every other week)
- Monthly
- Bi-monthly (every other month)
- Quarterly
- Semi-annually
- Annually
- Other (please specify below)

6. How often does the Executive Committee of the CCP meet? Check the appropriate box to the left of the list. Select the **one/single** option that best describes the Executive Committee's **regular** meeting schedule.

- Bi-weekly (every other week)
- Monthly
- Bi-monthly (every other month)
- Quarterly
- Semi-annually
- Annually
- Other (please specify below)

7. Does the CCP have subcommittees or working groups? Check the appropriate box to the left of the list.

- Yes
- No

If "Yes," list the subcommittees and/or working groups and their purpose.

Subcommittee/Working Group	Purpose:
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1.	Ad Hoc Work Group on Custody and Reentry	Created in 2021 for the purpose of addressing Penal Code Section 1170(h) custody and reentry processes
2.	Ad Hoc Work Group on Post Release Community Supervision (PRCS)	Created in 2021 for the purpose of addressing supervision and treatment services for the PRCS population
3.	Ad Hoc Work Group on PRCS and Parole Revocation	Created in 2021 for the purpose of refining revocation processes and linkages to services
4.	Ad Hoc Work Group on Diversion and Alternatives To Incarceration (ATI)	Created in 2021 for the purpose of enhancing diversion and ATI options
5.	Ad Hoc Funding Work Group	Created in 2021 to consider funding proposals that may be recommended for consideration by the Chief Executive Office.
	6. Ad Hoc Evaluation Work Group	Created in 2022 to assist with the development of a framework for evaluating AB 109 funded programs, in accordance with a motion from the Board of Supervisors.



## SECTION 3: GOALS, OBJECTIVES, AND OUTCOME MEASURES

Section 3 asks questions related to the CCP’s goals, objectives, and outcome measures. Please refer to the [CCP Survey Data Reporting Guide](#) for detailed information about goal and objective statements, and outcome measures.

### Updated Information on FY 2023-24 Goals, Objectives, and Outcome Measures

Questions 8, 9, and 10, ask the CCP to provide *updated* progress information about the goals, objectives, and outcome measures previously reported for FY 2023-24 in the 2023-24 CCP Survey.

For each question, provide the goals, objectives, and outcome measures as reported in the FY 2023-24 survey. The progress information (last two rows of each table) should be updated to reflect the progress achieved over the full fiscal year.

8. Describe a goal and the associated objectives as reported in the FY 2023-24 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2023-24. If no goal, objective, or outcome measure was identified in FY 2023-24 respond by indicating “Not Applicable.”

<b>Goal</b>	Enhance the County’s Post Release Community Supervision (PRCS) and pre-release processes to facilitate case planning, linkages to services, and reentry
<b>Part of FY 23-24 CCP plan?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	1. Continue and grow the Pre-Release Video Conferencing (PRVC) program for individuals pending release from state prison to PRCS
Objective:	2. Expand DMH and DPH-SAPC behavioral health efforts to assess Post-release Supervised Persons (PSPs) in custody in order to facilitate a seamless connection to community-based services upon release
Objective:	3. Develop options to optimize and increase the provision of transportation of PSPs to locations including, but not limited to, their assigned probation office, treatment providers, court, and their place of residence - FYI - For FY 24-25, this language was modified to read: Expand partnerships and formal agreements between agencies to improve transportation services for Post-Release Supervised Persons (PSPs), ensuring reliable access to probation offices, treatment providers, court appointments, residences, and other essential locations  Objective 4: Enhance the Medi-Cal enrollment process based on the implementation of the California

	Advancing and Innovating Medi-Cal (CalAIM) pre-release initiative
Outcome Measure:	1. Increase the number of PRVC contacts with individuals being released to Los Angeles County on PRCS to include all AB 109 partner agencies, as appropriate, in order to support pre-release planning efforts
Outcome Measure:	2. The number of clients contacted through jail in-reach efforts by probation and the number of clients successfully screened and linked to community-based mental health and SUD services by DMH and DPH-SAPC
Outcome Measure:	3. Increasing agreements with partnering departments and/or CBOs to provide transportation to PSPs and data capturing the provision of transportation services to PSPs - FYI - For FY 24-25, this language was modified to read: The number of formal agreements established to implement transportation procedures, and track delivery of transportation services provided  Outcome Measure 4: The number of persons in custody exiting custody with approved Medi-Cal
Briefly describe progress toward goal:	<p>The County continues to pursue this goal as an ongoing endeavor each year. Updates on progress are provided to the CCP.</p> <p>Pre-Release Video Conferencing (PRVC):</p> <p>The Probation Department continues to use PRVC's to conduct pre-release planning activities with individuals in state prison who will be released onto PRCS. This has included a partnership with the Department of Mental Health and discussions for including community-based organizations.</p> <p>A total of 469 PRVC's were completed, which is 53% of those assigned.</p> <p>Behavioral Health Treatment Services:</p> <p>The total of Community Reentry and Resource Center (CRRC)/Jail In-Reach Orientations was 3,129.</p> <p>For Fiscal Year 2023-24, DMH increased the number of in-custody in-reach and engagement efforts with AB109 clients. Specifically, four dedicated DMH clinicians conducted clinical interviews inside</p>

	<p>Revocation Court, the county jails (TT/MCJ and CRDF) linking clients to outpatient mental health/substance abuse services (OPCOD), Co-Occurring residential services (COIN), Enriched Residential Services (ERS) and urgent care services. DMH successfully screened, assessed and linked 1,153 clients in custody between July 1, 2023 and June 30, 2024.</p> <p>During this same period, an additional 879 clients released from CDCR and Los Angeles County jails, were assessed and linked to services by DMH staff that are co-located at probation HUBs.</p> <p>DPH-SAPC does not manage any jail in-reach projects inside the County jail facilities; however, in FY 2023-24, Client Engagement and Navigation Services provided SUD screenings to 947 AB 109 incarcerated clients, of whom 944 were referred or recommended to treatment.</p> <p>Transportation Services:</p> <p>Total number of unduplicated clients that received transportation assistance from Fiscal Year 2023-24 (July 1st, 2023, - June 30, 2024): 1,499</p> <p>Total Expenditures for Fiscal Year 2023-24 (July 1st, 2023 - June 30th, 2024): \$64,236.27</p> <p>Types of Transportation provided to program clients: Tap Cards (Train) Bus Cards Gas Card Rideshare (Uber and Lyft)</p> <p>Accompaniment To: Treatment and health Centers (Mental Health/Counseling, Residential/Recovery) Housing DPSS Immigration DMV Social Security Office Court Probation office Employment/Job Interview Primary Care Physician Legal</p>
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	<p>Outpatient Clinic                      Pharmacy                      Parole and Probation Office                      Grocery Store                      Day Care                      Dentist Appointment</p> <p>The County is also tracking the supervision status of individuals receiving transportation services as well as their demographics.</p> <p>Medi-Cal Enrollment:</p> <p>For FY 2023-24, 2,373 individuals were enrolled in Medi-Cal upon exiting custody.</p>
<p>Rated progress toward the goal:</p>	<p><input type="checkbox"/> No progress  <input checked="" type="checkbox"/> Partially achieved  <input type="checkbox"/> Fully achieved</p>

9. Describe a goal and the associated objectives as reported in the FY 2023-24 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2023-24. If no goal, objective, or outcome measure was identified in FY 2023-24 respond by indicating "Not Applicable."

<b>Goal</b>	Enhance the Correctional Health Services (CHS) intake screening process and expand access to treatment
<b>Part of FY 23-24 CCP plan?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	1. Ensure that within 24 hours of intake, each person in custody is screened in the reception center by a registered nurse to identify urgent or emergent medical and mental health needs
Objective:	2. Ensure that each person in custody in the reception center who is identified as having emergent or urgent mental health needs is evaluated by a Qualified Mental Health Professional (QMHP) as soon as possible but no more than four hours from the time of identification
Objective:	3. Create a process at intake to identify individuals who report an opiate use disorder  Objective 4: Implement a program for patients with opiate use disorders to increase access to Medication Assisted Treatment (MAT) for inmates
Outcome Measure:	1. Average length of time from custody intake to screening by a registered nurse
Outcome Measure:	2. The percentage of persons in custody with an emergent or urgent mental health need who are evaluated within four hours of identification
Outcome Measure:	3. The number of justice-involved individuals who report opiate use disorder during intake  Outcome Measure 4: The percentage of eligible patients who are offered medication assisted treatment while in custody
Briefly describe progress toward goal:	The County continues to pursue this goal as an ongoing endeavor each year. Updates on progress are provided to the CCP.  Average length of time from custody intake to screening by registered nurse:  -2022 (1 week): Average 2:22 hrs. / Median 1:58 hours -2023 (Jan - June): Average 4.3 hrs. / Median 3 hours -2024 (Jan - Aug): Average 2.8 hrs./ Median 2 hours

	<p>The percentage of persons with an emergent or urgent mental health need who are evaluated within four hours of identification:</p> <p>-2022: 56% (1 week - 32 individuals)                  -2023: 84.5% (1,183/1,399)                  -2024 (Jan - Aug): 92.6% (2,050/2,215)</p> <p>The number of justice-involved individuals who report opiate use disorder during intake:</p> <p>-2022: 11 months – 4,322 (393/mo.)                  -2023: 6 months – 3,433 (572/mo.)                  -2024: 8 months – 5,200 (650/mo.)</p> <p>The percentage of eligible patients who are offered medication-assisted treatment while in custody:</p> <p>-2022: No % provided                  -2023: 34.3% (1,176/3,433)                  -2024 (Jan to Aug): 90.6% (4,710/5,200)</p> <p>Individuals not receiving MAT include those that didn't accept the offer, those that were released, and those that were otherwise not available to accept MAT at that time.</p> <p>Since March 2021, 13,254 individuals have received Suboxone or Buprenorphine. This includes 6,273 individuals in 2024 (as of September 1, 2024).</p> <p>Since July 2022, 5,370 individuals have received at least one dose of Sublocade. This includes 1,787 individuals in 2024 (as of September 1, 2024).</p> <p>Since November 2023, 1,237 individuals have received Brixadi. This includes 1,211 individuals in 2024 (as of September 1, 2024).</p>
Rated progress toward the goal:	<p><input type="checkbox"/> No progress  <input checked="" type="checkbox"/> Partially achieved  <input type="checkbox"/> Fully achieved</p>

10. Describe a goal and the associated objectives as reported in the FY 2023-24 CCP survey. Please provide updated progress toward goal information to reflect the

progress achieved over the full FY 2023-24. If no goal, objective, or outcome measure was identified in FY 2023-24 respond by indicating "Not Applicable."

<b>Goal</b>	Reduce the mental health population in the County jail system
<b>Part of FY 23-24 CCP plan?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	1. Enhance and support the Office of Diversion and Reentry's (ODR) delivery of housing and intensive case management services to individuals with mental health disorders diverted from the jail
Objective:	2. Continue implementation and operationalization of the County's Alternative Crisis Response (ACR) system and expand the number of mobile crisis response teams to provide 24/7 service and to assess and ensure timely response
Objective:	3. Continue to expand and deploy Psychiatric Social Workers (PSW's) in defense agencies to serve clients facing potential custody sentences and to support them in diversion, reentry, and rehabilitation programs/efforts  Objective 4: Enhance the continuum of community-based services available so that individuals touched by the justice system can access high quality care at the appropriate level of service
Outcome Measure:	1. The number of individuals supported in the ODR Housing Program, including the number of new clients served in FY 2023-24
Outcome Measure:	2. Percentage of mobile crisis response team field response NOT requiring law enforcement involvement
Outcome Measure:	3. The number of mobile crisis response teams deployed and the average response time  Outcome Measure 4: Number of individuals diverted from incarceration with the assistance of the PSW program and assisted with reentry efforts through the PSW program  Outcome Measure 5: Assessment of PSW caseload and staffing levels
Briefly describe progress toward goal:	The County continues to pursue this goal as an ongoing endeavor each year. Updates on progress are provided to the CCP.  ODR Housing (ODHR) client numbers:  ODRH clients served in FY 2023-24: 2,964

	<p>New clients served in FY 2023-24: 866</p> <p>ACR &amp; MCRT:</p> <p>In FY 2023-24, there were a total of 18,929 Mobile Crisis Response Team (MCRT) deployments (Field Intervention Team (FIT) dispatches), for an average of about 1,577 per month.</p> <p>The average time to dispatch (in hours) each month during this time was as follows: July 2023 – 2.22; August 2023 – 1.95; September 2023 – 2.27; October 2023 – 2.02; November 2023 – 1.97; December 2023 – 1.88; January 2024 – 1.88; February 2024 – 1.78; March 2024 – 1.52; April 2024 – 1.25; May 2024 – 1.48; June 2024 – 1.28.</p> <p>The percentage of field responses requiring law enforcement involvement was as follows: July 2023 – 10%; August 2023 – 7%; September 2023 – 8%; October 2023 – 8%; November 2023 – 4%; December 2023 – 6%; January 2024 – 6%; February 2024 – 7%; March 2024 – 6%; April 2024 – 7%; May 2024 – 5%; June 2024 – 5%.</p> <p>PSW Program:</p> <p>During FY 2023-24, there were a total of 1,773 clients seen by all of the adult PSW programs in the Public Defender’s Office (PD).</p> <p>For three of those programs (Guiding Reentry of Women (GROW), Holistic Opportunities for People to Excel (HOPE), and AB 109 funded, which had a seen a total of 888 clients among those three), the number of clients diverted from state prison were as follows: GROW - 185, HOPE - 39, and AB 109 funded - 48</p> <p>From September 2020 through August 2024, the combined number of GROW clients served by both the PD and Alternate Public Defender’s Office (APD) was 534. The number of clients diverted from state prison was 270. This is an increase from a total of 119 one year earlier due in part to added PSW positions.</p> <p>Enhance the continuum of community-based services:</p>
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	<p>In FY 2023-24, 289 people were screened through the Co-Occurring Integrated Care Network (COIN) program, designed to address the needs of adult AB 109 PSPs who have a co-occurring chronic SUD and severe and persistent mental illness. Of all the 289 people screened for services, 289 were determined positive for SUD services and recommended to the COIN program.</p> <p>In FY 23-24, COIN bed capacity increased from 33 to 38 beds.</p> <p>During FY 23-24, there were 1,335 AB 109 individuals served by DPH-SAPC's network of providers who self-reported mental health issues.</p>
<p>Rated progress toward the goal:</p>	<p><input type="checkbox"/> No progress</p> <p><input checked="" type="checkbox"/> Partially achieved</p> <p><input type="checkbox"/> Fully achieved</p>

**Information on FY 2024-25 Goals, Objectives, and Outcome Measures**

11. For FY 2024-25, will the CCP use the same goals, objectives, and outcome measures identified above from FY 2023-24? Check the appropriate box to the left of the list.

- Yes. (Skip to Section 4)
- No. The CCP will add and/or modify goals, objectives, and outcome measures (Continue with section below)

Questions 12, 13, and 14, the CCP is asked to describe a goal and its associated objectives and outcomes for FY 2024-25. For the goal, also provide information about the current progress toward the stated goal. As survey responses are due mid-year, progress information for these goals over the full fiscal year will be requested as part of the FY 2025-26 CCP Survey.

12. Describe a goal for FY 2024-25 and one (1) or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2024-25, respond by indicating "Not Applicable."

<b>Goal</b>	
<b>Part of FY 24-25 CCP plan?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	
Objective:	
Objective:	

Outcome Measure:	
Outcome Measure:	
Outcome Measure:	
Briefly describe <i>current</i> progress toward goal:	
Rate the <i>current</i> progress toward the goal:	<input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected

13. Describe a goal for FY 2024-25 and one or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2024-25, respond by indicating "Not Applicable."

<b>Goal</b>	
<b>Part of FY 24-25 CCP plan?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	
Objective:	
Objective:	
Outcome Measure:	
Outcome Measure:	
Outcome Measure:	
Briefly describe <i>current</i> progress toward goal:	
Rate the <i>current</i> progress toward the goal:	<input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected

14. Describe a goal for FY 2024-25 and one or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2024-25, respond by indicating "Not Applicable."

<b>Goal</b>	Reduce the mental health population in the County jail system
<b>Part of FY 24-25 CCP plan?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Objective:	
Objective:	
Objective:	
Outcome Measure:	
Outcome Measure:	
Outcome Measure:	
Briefly describe <i>current</i> progress toward goal:	
Rate the <i>current</i> progress toward the goal:	<input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected

### SECTION 4: TYPES OF PROGRAMMING AND SERVICES

Section 4 asks questions about the types of programs and services provided during FY 2023-24. For each type of program or service provided, identify the agency(ies) that provided the program or service and at what stage(s) the program or service is provided (in-custody, supervision, other). Please refer to the CCP Survey Data Reporting Guide for the BSCC’s definition of each type of program and service listed and the stage(s) of program or service.

Program/Service	Provided	Providing Agency (check all that apply)	Stage(s) Provided (check all that apply)
<b>Mental Health/Behavioral Health</b> – Services designed to improve mental health.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Department of Health Services - Integrated Correctional Health Services Office of Diversion and Reentry (ODR)	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release

Program/Service	Provided	Providing Agency (check all that apply)	Stage(s) Provided (check all that apply)
<b>Substance Use</b> – services designed to assist with substance use.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Department of Health Services - Integrated Correctional Health Services	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Housing</b> – services designed to assist with housing after release.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sheriff <input checked="" type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Office of Diversion and Reentry (ODR) Justice, Care, and Opportunities Department (JCOD)	<input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Employment</b> – services designed to provide clients with a job and/or to provide job training to improve chances of finding employment after release.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Sheriff <input checked="" type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Department of Economic Opportunity (DEO) Department of Public Social Services (DPSS) Justice, Care, and Opportunities Department (JCOD)	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Education</b> – focuses on academic achievement.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Charter Schools, Local Adult Education	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Family</b> – family-oriented education, service, and training.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe:

Program/Service	Provided	Providing Agency (check all that apply)	Stage(s) Provided (check all that apply)
		<input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: >	>Post-Release
<b>Domestic Violence Prevention</b> – support and intervention	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Department of Public Social Services (DPSS)	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Physical Health</b> – services designed to improve clients’ physical well-being.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Department of Health Services Office of Diversion and Reentry (ODR)	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release
<b>Quality of Life</b> – Services that enhance the standard of happiness, comfort, and well-being of an individual to participate in life events (e.g., assistance in getting a driver’s license, opening a bank account, etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Sheriff <input checked="" type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input checked="" type="checkbox"/> Other, describe: >Justice, Care, and Opportunities Department (JCOD) Office of Diversion and Reentry (ODR)	<input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Other, describe: >Post-release

**FY 2024-25 Community Corrections Partnership Survey  
PART B**

Part B of the CCP Survey collects information about the allocation of Public Safety Realignment dollars.

For detailed guidance on how to complete Part B of the CCP Survey package, please refer to the FY 2024-25 CCP Survey Data Reporting Guide at: [https://www.bscc.ca.gov/m\\_realignment/](https://www.bscc.ca.gov/m_realignment/)

The first question in this file, question 24, requests the name of the county for which the survey is being submitted.

Following the identification of the county, Part B is divided into two sections:

- Section 6: FY 2022-23 Public Safety Realignment Funding Allocation
- Section 7: FY 2023-24 Public Safety Realignment Funding Allocation

**24.** Please identify the county for which this portion of the survey is being submitted:  
**County Name: LOS ANGELES**

**SECTION 6: FY 2023-234 Public Safety Realignment Funding Allocation**

**Section 6 contains questions related to the allocation of FY 2023-24 Public Safety Realignment dollars. There are three (3) questions in this section.**

**When answering these questions, consider the funds allocated in FY 2023-24 and include any monies from 2022-23 growth funds and 2023-24 programmatic funding.**

**25.** Of the total funds received in FY 2023-24, how did the CCP budget the allocation? Input the total allocation in the cell above the table. Within the table, identify where funds were allocated to, and include if the county used any carry-over funds (monies from previous annual CCP allocations) and/or if the county put any funds into a reserve fund (i.e., funds specifically set aside to be used when budget is disrupted or decreased so operations can continue). Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in **red**. **Please correct any cells displaying red prior to submitting.**

Total Allocation: **\$ 723,046,000**

Where funds were allocated to:	Amount
Alternate Public Defender	\$ 8,094,000
Auditor-Controller	\$ 245,000
Board of Supervisors	\$ 4,067,000
Chief Executive Office	\$ 350,000
District Attorney	\$ 10,503,000
Economic Opportunity	\$ 1,820,000
Fire District	\$ 4,359,000
Health Services (includes Office of Diversion & Re-Entry)	\$ 170,588,000
Justice, Care and Opportunities	\$ 32,939,000
Mental Health	\$ 43,631,000
Probation	\$ 129,611,000
Public Defender	\$ 18,885,000
Public Health	\$ 15,837,000
Sheriff	\$ 255,762,000
Trial Court Operations	\$ 49,000
Youth Development	\$ 26,306,000

(Total sums to) **\$ 723,046,000**

Please spell out all names and do not use acronyms.

Difference from Stated Allocation: **\$ -**



**SECTION 7: FY 2024-25 Public Safety Realignment Funding Allocation**

Section 7 asks three (3) questions related to the allocation of FY 2024-25 Public Safety Realignment funding.

When answering these questions, consider the total funds allocated in FY 2024-25 and include any monies from 2023-24 growth funds and 2024-25 programmatic funding.

28. Of the total funds received in FY 2024-25, how did the CCP budget the allocation? Input the total allocation in the cell above the table. Within the table, identify where funds were allocated to, and include if the county is using any carry-over funds (monies from previous annual CCP allocations) and/or if the county is putting any funds into a reserve fund (i.e., funds specifically set aside to be used when budget is disrupted or decreased so operations can continue). Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red. **Please correct any cells displaying red prior to submitting.**

Total Allocation: **\$ 803,798,000**

Where funds were allocated to:	Amount
Alternate Public Defender	\$ 7,785,000
Auditor-Controller	\$ 254,000
Board of Supervisors	\$ 4,061,000
Chief Executive Office	\$ 20,253,000
District Attorney	\$ 10,723,000
Economic Opportunity	\$ 1,815,000
Fire District	\$ 4,036,000
Health Services (includes Office of Diversion & Re-Entry)	\$ 166,147,000
Justice, Care and Opportunities	\$ 31,058,000
Mental Health	\$ 42,834,000
Probation	\$ 131,990,000
Public Defender	\$ 16,986,000
Public Health	\$ 15,906,000
Sheriff	\$ 319,530,000
Trial Court Operations	\$ 49,000
Youth Development	\$ 30,371,000

(Total sums to) **\$ 803,798,000**

*Please spell out all names and do not use acronyms.*

Difference from Stated Allocation: \$ -





**ATTACHMENT B:  
2025 CCP Plan**



PUBLIC SAFETY  
REALIGNMENT TEAM

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*Realignment Implementation Plan - 2025*

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# Part I:

# CCP Plan Framework

(Approved June 2021)  
(Revised January 2024\*)

\*PSRT revised the framework in January 2024 to reference accurately those programs that are now overseen by the Justice, Care, and Opportunities Department (JCOD), which had not yet been established in 2021.

# I. BACKGROUND AND INTRODUCTION

## **PUBLIC SAFETY REALIGNMENT**

In October of 2011, the State of California enacted Public Safety Realignment, a major criminal justice reform effort to reduce state prison overcrowding as ordered by a Federal Court. Outlined in Assembly Bill 109 and Assembly Bill 117, Public Safety Realignment transferred various responsibilities from the State to counties. Though more specific criteria apply, the primary components of realignment were as follows:

- ***Local Custody*** – Custody responsibility was transferred from the State to counties for individuals convicted and sentenced for non-violent, non-serious, non-sex (N3) felony offenses.
- ***Post-Release Community Supervision*** – Community supervision of eligible individuals released from state prison was transferred from state parole to a new, county-implemented Post-Release Community Supervision (PRCS) program.
- ***Local Revocation Process*** – Revocation processes for state parole (and for the newly created PRCS) were transferred to the counties and a local Court process. In addition, custody terms that result from parole (or PRCS) revocations were shifted to local county jail.

## **LOS ANGELES COUNTY'S PUBLIC SAFETY REALIGNMENT TEAM**

Following its adoption of the County's Community Corrections Partnership (CCP) realignment implementation plan in 2011, the Board of Supervisors established the Public Safety Realignment Team (PSRT) to ensure the ongoing coordination of realignment implementation among departments, stakeholder agencies, and community partners. Initially established with a composition and structure mirroring a county's CCP, the PSRT is chaired by the Chief Probation Officer and provides ongoing realignment updates to the Board of Supervisors and the California Board of State and Community Corrections.

In December 2020, the Board approved a motion expanding the membership of the PSRT and directing the newly constituted body to update the county's implementation plan. Specifically, the Board approved an updated PSRT membership structure by adding:

1. The department head or high-level executive from:
  - a. Office of Diversion and Reentry
  - b. Alternatives to Incarceration Initiative (now Justice, Care, and Opportunities Department)
  - c. Anti-Racism, Diversity, and Inclusion Initiative
  - d. Department of Health Services

2. Five representatives from community-based or advocacy organizations that work with the AB 109 reentry population with one appointee to be appointed by each supervisor for two-year terms; at least one representative should have lived experience.

Further, the Board directed the updated PSRT to:

1. Revise the AB 109 Community Corrections Partnership (CCP) implementation plan to reflect the Board's priorities on alternatives to incarceration, including, but not limited to, diversion programs, substance abuse programs, mental health treatment, housing, restorative justice programs, and community-based services.
2. Within 90 days of the new AB 109 CCP implementation plan being approved, provide recommendations for AB 109 funding that reflect the Board's priorities listed above.

The PSRT member roster and full motion approved by the Board are attached.

### **IMPLEMENTATION PLAN FORMAT**

The goal of the PSRT implementation update is to provide a framework for how the County can address the responsibilities transferred to the County through realignment and incorporate the County's justice reform priorities. To that end, PSRT members developed an implementation plan format that identifies principles and corresponding programmatic/strategic recommendations in the following subject matter areas:

- Diversion / Alternatives to Incarceration
- Custody and Reentry
- Post-Release Community Supervision

The overall intent was to develop an integrated set of recommendations that promotes community-based services to reduce the number of individuals in custody or on supervision and to ensure that those who are in custody or on supervision are connected with services that support reentry, improve outcomes, and reduce recidivism. The set of documents that were approved by the committee are provided in Section II.

As directed by the Board, the PSRT is continuing its work to provide funding recommendations. Per the Chief Executive Office, the PSRT's funding recommendations will offer valuable input and guidance that will inform the CEO's development of the recommended AB 109 budget.

## II. ITEMS APPROVED BY THE PUBLIC SAFETY REALIGNMENT TEAM

### Overarching Principles

#### Diversion / Alternatives to Incarceration

- I. Implementation of Public Safety Realignment in Los Angeles County is guided by the County's Care First, Jails Last priorities.
- II. Los Angeles County's justice system operates with a racial and gender equity lens and aims to reduce racial and gender disparities.
- III. The provision of services that meet the needs of individuals in contact with the justice system, including survivors of harm, are provided by community-based service providers, outside the custody or supervision environments when possible.
- IV. Recovery is not a linear process. As individuals engage in this journey, strategies to assist in recovery should not penalize them and should afford individual agency and a spectrum of services utilizing a harm reduction approach.
- V. Alternative to incarceration efforts must focus on serving communities that are most vulnerable, including BIPOC and individuals with behavioral health needs, transition age youth, women – particularly Black Women – TGI and LGBTQ+ people.
- VI. Services and interventions are designed and delivered based on an individual's needs and strengths.
- VII. Strategies must be implemented to ensure safe and equitable access to services, resources, and obligations, including transportation, geographic proximity, childcare, etc.
- VIII. Strategies must be data-driven, evidence based best practices, with metrics of success to include the impact of strategies on individual and community health, reducing the jail population, improving racial equity, and enhancing public safety.
- IX. Strategies must prioritize addressing the root-causes of economic, racial and gender inequity; poverty and houselessness; criminalization and incarceration; and other forms of interpersonal and systemic harm.
- X. Implementation of Public Safety Realignment in Los Angeles County is in alignment with the 2011 Public Safety Realignment mandates and other relevant statutes and interpreted in the broadest manner to effectuate the overarching principles recognized herein.

#### Custody and Reentry

- I. Reentry planning and preparation starts as soon as someone is in custody.
- II. Individuals are removed from custody as soon as possible with appropriate supports.
- III. Community-based organizations play a primary role in within- and post-custody reentry preparation and support.

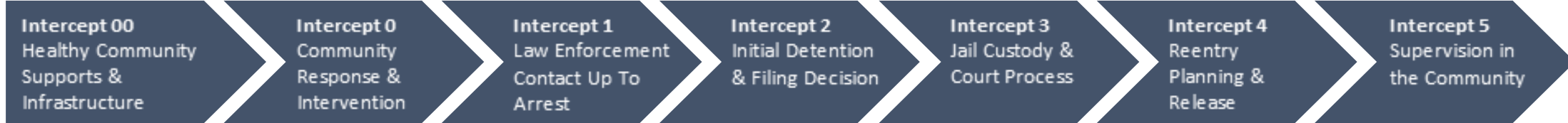
## Post-Release Community Supervision

- I. Pre-release planning, including identification of individualized service needs and establishment of benefits, is a critical component of the PRCS program.
- II. The PRCS model prioritizes an integrated care plan that includes evidence-based supervision practices, treatment, and wrap-around supportive services.
- III. The PRCS model addresses individualized needs in order to support reentry and community reintegration and enhance public safety.
- IV. Individuals should continue to be provided needed treatment and services beyond their supervision period.
- V. Prerelease planning, service delivery, and release should prioritize self- and community-determination.
- VI. Consistent, accessible, publicly transparent, robust, and funded data collection and reporting should be conducted to establish a baseline, track outcomes, improve outcomes, and determine if there are any unintended outcomes, and should be reviewed on a regularly established basis (e.g., monthly/annually). Data tracking metrics should include reductions in the jail population and in racial, gender, and geographic disparities.
- VII. Consistent with the overall PRCS supervision model, responses to violations -- including the revocation process -- prioritize a client's connection or re-connection to treatment services.
- VIII. To ensure long-term community stability, develop multiple opportunities throughout the revocation path to provide access to support and services.



## Diversion / Alternatives to Incarceration Intercept Model

**ATI Office**  
**Intercept Model,**  
**2021**



# Diversion / Alternatives to Incarceration

## Principles and Recommendations

<b>Intercept 00 - Healthy Community Supports &amp; Infrastructure</b>	
<b>Objective: To build a robust community-based network of behavioral health supports, housing, employment, transportation, and other resources to help prevent people from entering or reentering jails</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
1. Resource and support communities to meet their own needs so that they can grow and thrive, without law enforcement or criminal legal system intervention	a. Community-based Service and Resource Hubs - e.g. DOORS Reentry Center (JCOD); Restorative Care Villages (BOS/DHS/DMH)
2. Youth Development Resources	a. (Youth Justice Reimagined)
3. Safe transportation, housing, safe child care, access to all medical care, free and appropriate public education, diagnosis and support, access to green space and healthy food, employment	
4. Services in the community are delivered by individuals with lived experience that represent the intersections and identities of those impacted in a culturally humble way.	a. Fund and expand community peace-keeper programs that utilize a peer-based model and employ impacted individuals outside of law enforcement; Trans-led gender-affirming education and family support
<b>Intercept 0 - Community Response &amp; Intervention</b>	
<b>Objective: Consistent with community safety, reduce the number of people having contact with law enforcement, by focusing on individual and community wellness and development of strengths and responding to the needs of individuals in crisis</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
5. Provide direct hand-off to services for people in lieu of arrest	a. Law Enforcement Assisted Diversion (ODR)
6. Create real-time inventory of available services, accessible to individuals, families seeking support, and service providers, and law enforcement where relevant	a. Assessment and Referral App (JCOD)
7. Provide robust, community-based, non-law enforcement responses to those in behavioral health crisis, preferably through those with lived experience	a. Alternative Crisis Response; community-based emergency response (e.g. Community Alternatives to 911); Multi Disciplinary Team (MDT) and Psychiatric Mobile Response Teams (PMRT)
8. Provide harm reduction services for those struggling with substance use disorders	a. Harm Reduction Training/Overdose Education and Naloxone Distribution (ODR)
9. Youth Development and Diversion Resources	a. (Youth Justice Reimagined)
<b>Intercept 1 - Law Enforcement Contact Up to Arrest</b>	
<b>Objective: Consistent with community safety, reduce the number of people from entering the jail system, regardless of charges, with a focus on their strengths and needs</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
10. Provide direct hand-off to services for people in lieu of arrest	a. Law Enforcement Assisted Diversion (ODR)
11. In situations where behavioral health crisis situation requires law enforcement, it should be a co-response with a clinical and specially trained law enforcement officer.	a. Mental Evaluation Team (LASD/DMH)
<b>Intercept 2 - Initial Detention &amp; Filing Decision</b>	
<b>Objective: Presumption of pretrial release to decentralized community-based services, housing and resources, in an effort consistent with community safety, stability of the individual, and improved health and wellness outcomes</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
12. Reduce the number of people with mental health, homeless and other vulnerabilities from entering the jail system	a. Prefiling diversion program (JCOD)
13. Develop a strengths- and needs-based system of pre-trial release through an independent, cross-functional entity, situated outside of law enforcement, to coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions	a. community-based pretrial service providers (e.g. CASA); access to legal defense counsel; access to participatory defense in the community
14. Decriminalize quality of life and survival crimes	a. Alternative stabilizing housing supports and behavioral health supports, including safe consumption housing; prosecution filing decisions (e.g. prosecutors can reduce or eliminate filing on survival crimes)

15. Create a safe landing space directly across from custody release points to provide shelter and services upon exit; decentralized and accessible for folks returning to their home of origin	a. DOORS Reentry Center (JCOD); Expanded transitional model with housing supports (JPRC); Build a system / platform to coordinate transportation for people reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court
	b. Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release

**Intercept 3 - Jail Custody & Court Process**

**Objective: Establish up-front strength, needs, and behavioral health assessments and robust diversion and release capacity to community-based systems of care, for people whose justice system involvement is driven by unmet behavioral health, physical health, and other clinical needs, and other particularly vulnerable populations**

Principle	Programmatic/Strategic Recommendation
16. Assess and identify as early as possible, those with behavioral health needs who are eligible for diversion and release, and divert to community-based services and supports, as early as possible	a. AB1810 Pretrial Mental Health Diversion; Misdemeanor Incompetent to Stand Trial (ODR); Felony Incompetent to Stand Trial (ODR); Department of State Hospitals Diversion (ODR)
17. Assess and identify as early as possible, those who may be eligible for diversion and release, and divert to community-based services and supports, as early as possible	a. Community-based pretrial services (JCOD/ODR); Rapid Diversion (JCOD); Reentry Intensive Case Management System (JCOD)
18. Develop a strengths- and needs-based system of pre-trial release through an independent, cross-functional entity, situated outside of law enforcement, to coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions	a. Community-based pretrial service providers (e.g. CASA); access to legal defense counsel; access to participatory defense in the community
19. Create a safe landing space directly across from custody release points to provide shelter and services upon exit; decentralized and accessible for folks returning to their home of origin	a. DOORS Reentry Center (JCOD); Expanded transitional model with housing supports (JPRC); Build a system / platform to coordinate transportation for people reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court
	b. Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release

**Intercept 4 - Reentry & Release**

**Objective: Ensure early release planning for all people coming out of jails and prisons to LA County, and continuity of support and peer navigation to services and supports to ensure stability and success for individuals returning to their communities**

Principle	Programmatic/Strategic Recommendation
20. Begin release planning upon entry into jail, and improve care coordination for release, to support the success of individuals upon release	a. Care Transitions (DHS-CHS)/Reentry Intensive Case Management System (JCOD)
21. Create a safe landing space directly across from custody release points to provide shelter and services upon exit; decentralized and accessible for folks returning to their home of origin	a. DOORS Reentry Center (JCOD); Expanded transitional model with housing supports (JPRC); Build a system / platform to coordinate transportation for people reentering communities, grant the right to be taken back to the place of arrest, fund CBOs led by impacted people to provide these services, and provide peer navigators that can support clients with transportation to and from court
	b. Create community-based localized care reentry sites to support reentering individuals by distributing care kits (containing masks, medication, transportation cards, etc.) and connecting them with resources and support during the critical 48-72 hours immediately after release
22. Support employment development and supports, especially for those with behavioral health needs, TGI, and other marginalized individuals	a. SECTOR (JCOD); community-based workforce development
23. Allow people to finish serving the last few years of their realignment sentence in the community	a. Returning Home Well LA

24. Provide opportunities for community-based reentry sites; Split sentencing with an opportunity to serve the end of sentences in a community-based setting	
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25. Provide safe transportation to everyone leaving custody	a. Platform to connect the individual to the service provider that provides transportation
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**Intercept 5 - Supervision in the Community**

**Objective: Reduce the demands and length of supervision, and improve access to supportive services by connection to peer navigators to improve health and safety outcomes**

Principle	Programmatic/Strategic Recommendation
26. Promote the principles of Harm Reduction Reduce the number of supervision check-ins, reduce and potentially eliminate technical violations, and reduce and potentially eliminate the issuance of bench warrants for people who incur technical violations on community supervision; Reduce the role of Probation and increase the transitioning of individuals to community-based supports and providers	a. (Probation)

27. Improve connection to community-based services and resources through peer navigation for those on supervision, with continuity post-supervision	a. Reentry Intensive Case Management System (JCOD)
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# Custody and Reentry Model

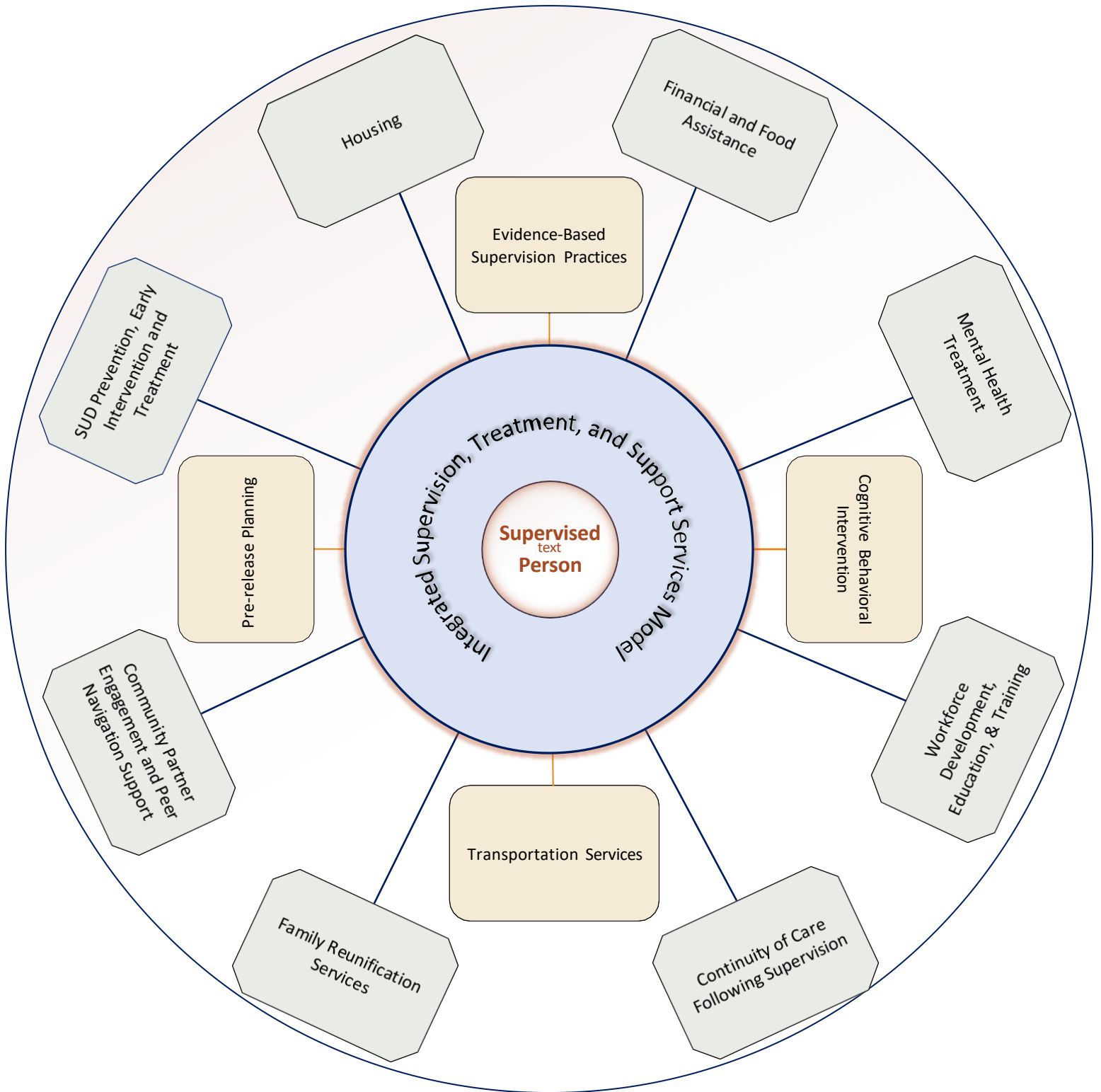


## Custody and Reentry Principles and Recommendations

Custody	
Principle	Programmatic/Strategic Recommendation
1. County jail facilities provide a safe and secure housing environment for incarcerated individuals.	
2. Incarcerated individuals have the opportunity to participate in meaningful programming leading to credits.	a. LASD to provide programming including fire camp, Education Based Incarceration (EBI), conservation credit, inmate worker credits, Life Skills and Career Technical Education
3. Gender-responsive services are available to individuals in custody who identify as female.	a. Trauma-informed programming, visitation room (ABC room) for mothers and children, and expansion of services for pregnant and parenting women including prenatal education, doula services and lactation support
4. Healthcare services in jail are delivered in a manner which is inclusive, compassionate, excellent, innovative, and accountable to individuals in the county jail and facilitates continuity of their care upon release.	a. Correctional Health Services to provide high quality physical health, mental health, substance use treatment, and dental care, meeting or exceeding community-level standards of care
5. Evidence-based substance use disorder treatment programming should be available to individuals during their time in custody.	a. Medication for Addiction Treatment (MAT) and START program should be implemented to scale.
6. Incorporate restorative justice programming into custody setting that is led by community-based organizations	
7. Prioritize in-custody workforce development efforts that focus on high road training and employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency and support individuals in a responsive, holistic way	a. Support and expand efforts like the Career Center at the Century Regional Detention Facility where incarcerated individuals receive certification training in Construction, Hospitality and Technology both as pre-release and post-release training
Reentry	
Principle	Programmatic/Strategic Recommendation
8. Release planning and connection to reentry and community supports should begin as early as possible in custody.	a. Assessment provided soon after arrival that includes strengths, needs, trauma history, family/community supports, and current/prior providers, ideally by a person of the same community with lived experience
9. Involve family member(s), current/prior treatment provider(s) in the community, Probation and defense attorney in reentry planning, as appropriate and with consent of the client	a. Provide opportunities for in-person or virtual in-reach, including assessment interviews or engagement in custody by the identified community treatment provider and/or Probation, if pending release to supervision
10. County and community partners work to identify individuals who may be diverted from jail to alternative to custody programs and/or community-based care.	a. ODR to provide community-based restoration for misdemeanor and felony defendants found incompetent to stand trial (MIST and FIST)
	b. Court-ordered releases to SUD or MH treatment
	c. Rapid Diversion Program (JCOD)
	d. Returning Home Well LA
	e. ODR Housing Program
11. Maximize direct warm handoffs directly from jail to receiving community-based providers	a. Arrange conditional and coordinated releases directly to providers
	b. Provide assistance with transportation to destination upon release
12. All incarcerated individuals should have a safe place to stay upon release.	a. Provide interim housing through Probation-contracted services, DHS Housing for Health, LAHSA or other housing providers
13. Ensuring continuity of care with medical, mental health and SUD treatment upon release is essential to health and well-being	a. Schedule appointments with primary care provider, mental health and/or SUD provider in community prior to release
	b. Provide assistance in applying for or reinstating Medi-Cal benefits
	c. Provide 30-day supply of essential medications at release
14. Efforts to provide individuals with vital documents and enroll in eligible public services are critical to support reentry.	a. Provide assistance in obtaining CA ID, birth certificate, Social Security card, and/or other needed documents

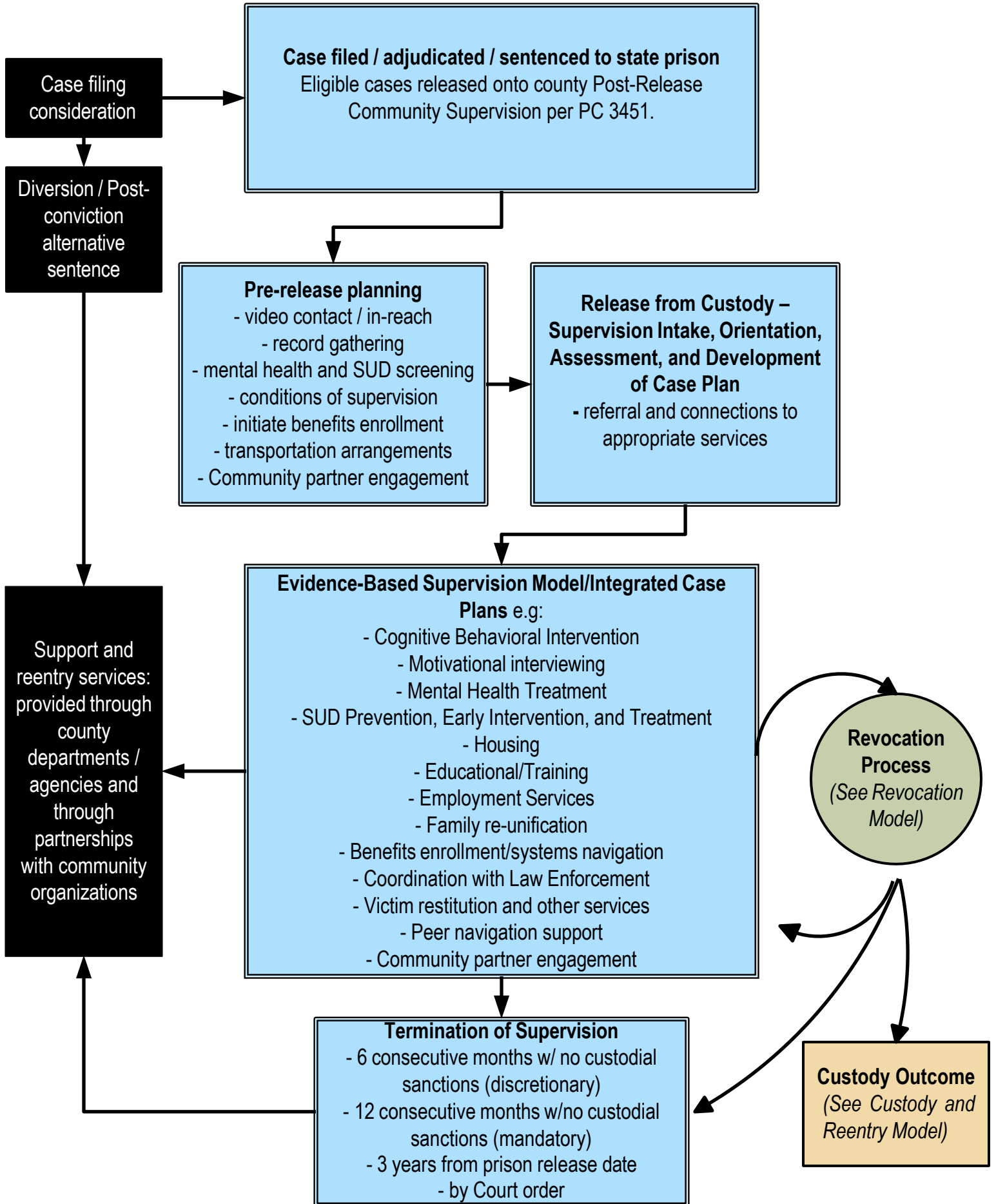
<i>(continued from #14 above)</i>	b. Provide assistance in applying for or reinstating GR, CalFresh food benefits, SSI/SSDI, Medi-Cal and/or other applicable benefits
15. Prioritize workforce development efforts that focus on high road training and employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency and support individuals in a responsive, holistic way	a. Identify opportunities to support re-entry job seekers through training stipends, intensive case management, system integration like the INVEST program (between DEO and Probation), and other housing/work financial supports
16. Engage and educate employers on the value of hiring justice-involved individuals, concentrating on high growth industries	a. Support and enhance the County's Fair Chance campaign that educates employers on the State's Fair Chance law, but also encourages employers to sign on to the Fair Chance pledge and hire from the reentry population
17. Ensure reentry needs and strengths in all domains are considered in the comprehensive release plan	a. Develop comprehensive reentry plans in collaboration with individual in jail, to include (as needed) housing, medical care, mental health treatment, SUD treatment, family/community/social support (including family reunification if applicable), transportation, Medi-Cal, financial and food support, and needed documents
18. Ongoing case management, navigation or peer support from a credible messenger in the community with lived experience	a. Provide linkage upon release to a community health worker, peer support, or other reentry provider with lived experience of prior incarceration

# Post-Release Community Supervision Model





# POST-RELEASE COMMUNITY SUPERVISION (PRCS) – PC 3451



# Post-Release Community Supervision

## Principles and Recommendations

Pre-Release and Early Transition Planning	
Principle	Programmatic/Strategic Recommendation
1. Pre-release planning and community transition support are critical elements of PRCS and community-based service support.	a. The County's Pre-Release Center (PRC), in partnership with independent community-based organizations, screens the incoming PRCS case for mental health, substance use disorder, physical health, housing, and other responsibility needs to ensure appropriate services are rendered.
	b. Pre-release benefits enrollment processes support the timely delivery of needed services and shall include independent community-based partners.
	c. Strategies to address transportation needs should prioritize independent community-based service providers.
Evidence-Based Supervision Practices	
Principle	Programmatic/Strategic Recommendation
2. PRCS and community-based service provision goals of promoting the successful reentry of clients and enhancing public safety are accomplished through the incorporation of evidence-based practices and strategies that are rooted in community-based holistic approaches.	a. Holistic and innovative evidence-based approaches
	b. Validated assessment tools are utilized to identify needs and strengths and develop case plans, including: harm reduction strategies to address in order to reduce recidivism, mental health treatment needs, SUD treatment needs, and other support service needs.
3. Individualized Interventions	a. The level of case management and supervision service correspond to an individual's identified needs and strengths in collaboration with independent community-based organizations. Supervision case plans are developed at the beginning of the supervision period with community-based partners that identifies support that correspond to the client's needs and strengths.
	b. Supervision services are prioritized for clients that are at high need. Per statute, clients that make significant progress towards the completion of their case plan goals and have no custodial sanctions are considered for an early earned discharge.
	c. The County currently contracts with community-based organizations for the following services: substance use disorder, mental health treatment, employment, housing, and system navigation. The County should contract directly with community-based organizations independently of law enforcement body.
Public Safety	
Principle	Programmatic/Strategic Recommendation
4. Addressing client accountability when necessary can promote positive long-term behavior change and support public safety, in collaboration with independent community-based organizations.	a. Probation coordinates with independent community-based organizations and collaborates with local law enforcement and participates in co-located teams in order to address unmet needs that present public safety concerns
Substance Use Disorder (SUD) Treatment Services	
Principle	Programmatic/Strategic Recommendation
5. Substance use disorder (SUD) services are accessible and connect individuals to the right services, at the right time, in the right setting, for the right duration.	a. Ensure that justice involved individuals have access to SUD services via multiple entryways (SASH, CENS, SBAT, direct treatment provider)
	b. Collaborate with partners to provide access to SUD services at Probation Offices and court locations
	c. Monitor efficiency and efficacy of entryways to SUD services
6. SUD services are comprehensive across the lifespan and on a continuum of improved health, wellness, and recovery.	a. Evidence-based SUD prevention, early intervention, treatment, and recovery support services are available to justice-involved individuals, both during and after supervision.
	b. The pathway to recovery is not a linear process and may include one or more service components and episodes between and/or within the following: withdrawal management, outpatient, residential, recovery bridge housing, medication assisted treatment, harm reduction, and recovery support services.
	c. SUD services are client-entered and personalized to ensure the right level and duration of treatment and are based on an individual's continual growth to improve the quality of their life.
	d. Leverage existing resources (e.g., AB 109, other local, state, and federal funds) to support SUD services that are not reimbursable by Drug MediCal, but necessary to ensure continuity of SUD services to justice-involved individuals
7. SUD services are culturally humble and influenced and responsive to personal belief systems.	a. SUD services are provided by a culturally, racially, and gender diverse workforce of SUD registered and certified counselors, and licensed professions, including peer support services by individuals with a diversity of lived experience.

(continued from #7 above)

- b. SUD counselors are trained to work with justice-involved populations, including trained on trauma-informed evidence-based approaches.
- c. SUD workforce is trained on SUD trends and other restorative justice and health equity topics and practices.
- d. SUD services are made available in all of LA County's threshold languages, directly or by interpretation services.
- e. SUD services are available throughout LA County, including communities most impacted by the justice system.

**Mental Health Treatment Services**

Principle	Programmatic/Strategic Recommendation
8. Proactive outreach and engagement of clients	a. Meeting clients where they feel most comfortable and engaging them, including jail in-reach prior to release and participating in video-conferencing with clients in CDCR
9. Access to all levels of care, including mental health and co-occurring services	a. Mental health assessments, linkage, and specialty mental health services such as intensive outpatient, enriched residential (ERS) and co-occurring substance abuse (COIN) services provided by community-based organizations to help individuals achieve hope, recovery and wellbeing
10. Collaboration and integration of care with AB109 partner agencies	a. Collaboration and communication with all partner agencies and departments to facilitate integrated care for clients, including co-location of staff
11. Provide ancillary services and supports	a. Providing a full continuum of care tailored to meet individual needs, including establishment of benefits and linkage to a broad array of services and supports
12. Ensuring providers have the necessary evidence-based training	a. Offering relevant trainings to providers in order to improve the skill set needed to engage clients
13. Assisting client to remain engaged in services following termination of supervision	a. Working with providers to provide continuity of care for engaged clients

**Employment Services**

Principle	Programmatic/Strategic Recommendation
14. Prioritize workforce development efforts that focus on high road training and employment opportunities that lead to career pathways, family-sustaining wages and self-sufficiency	a. Support and expand efforts like the Career Center at the Century Regional Detention Facility where incarcerated people receive certification training in construction, hospitality and technology as part of pre-release planning that will continue with post-release training and employment
15. Engage and educate employers on the value of hiring justice-involved individuals, concentrating on high growth industries	a. Support and enhance programming that supports hiring justice-involved individuals by community-based organizations, as well as the County's Fair Chance campaign that educates employers on the State's Fair Chance law, but also encourages employers to sign on to the Fair Chance pledge and hire from the reentry population
16. Understanding the complex array of barriers the re-entry population faces, ensure financial and case management supports are responsive to the re-entry population's needs	a. Identify opportunities to support re-entry job seekers through training stipends, intensive case management, system integration like existing community-based organizations, as well as the INVEST program (between DEO and Probation), and other housing/work financial supports
17. For parenting re-entry adults, engage the family through youth programming to assist in the prevention of continuing justice-involvement	a. Identify opportunities to serve children of justice-involved through youth work experience and education programs to help break the cycle of justice system involvement

**Community Partnerships and Equitable Access to Services**

Principle	Programmatic/Strategic Recommendation
18. The County and community partners collaborate to provide access to support services – during supervision and supporting independent community-based services after supervision.	a. Housing
	b. Peer navigation services and credible messenger support
	c. Transportation services
	d. Family re-unification
	e. Financial and food assistance

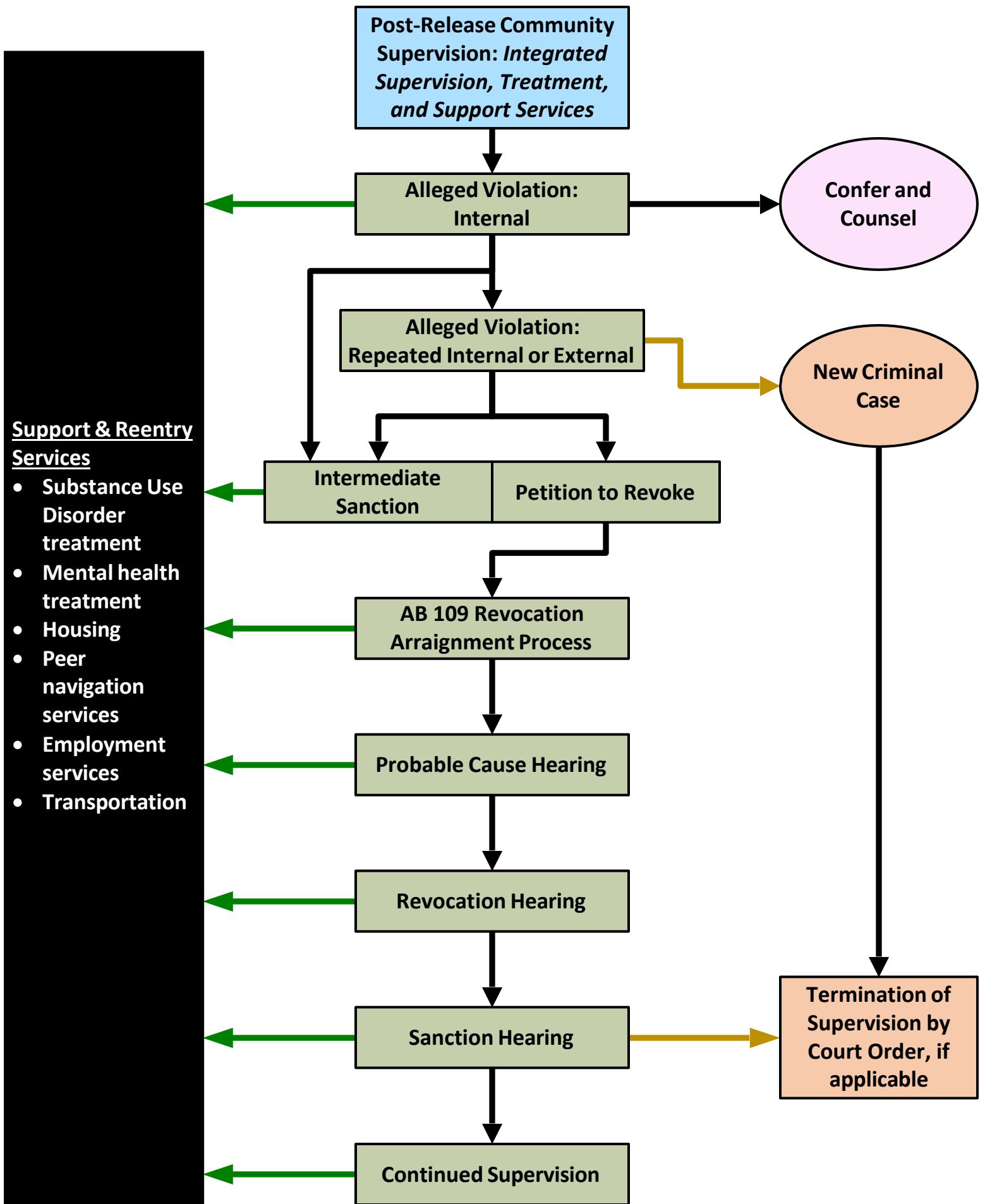
**Violations and Revocation Process**

**EBP Principles**

Principle	Programmatic/Strategic Recommendation
1. Responding to the root causes of harm and unmet needs in a swift, culturally humble and sensitive, and fair way reduces supervision violations and law violations especially when used in conjunction with the use of positive reinforcement to respond to positive behaviors. Responding to needs in an equitable and positive way reinforces the vision of care first in a revocation model.	a. Probation-developed policies grounded in holistic harm reduction and community-based principles to guide DPOs in their responses to client behaviors, needs, and strengths

<b>Alternatives to Custody</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
2. Reliance on custodial sanctions alone is ineffective in reducing recidivism	a. Probation's Response Grid uses graduated responses based on the client's needs and strengths to determine the response. Responses prioritize reconnection to services, and revocations are only recommended for clients that have needs that could not be met through any other community-based services and should be a last resort.
<b>Ensuring Public Safety</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
3. Ensuring public safety is a critical role of the Probation Department. Public safety prioritizes the needs of the client, their family, and survivor(s).	a. Addressing client accountability in partnership with independent community-based organizations, when necessary and appropriate, contributes to an increase in public safety.
<b>Coordinated Delivery of Services</b>	
<b>Principle</b>	<b>Programmatic/Strategic Recommendation</b>
4. Individuals who face revocation often present with very high and complex needs. As a result, the availability and delivery of services through the revocation process should be specifically designed to address those high needs.	a. The availability of co-located assessments and service linkages prioritizing community-based providers at the Court is critical for complex needs such as: co-occurring residential treatment, housing and mental health housing, skilled nursing facility placement, and SUD treatment services, including Medication for Addiction Treatment (MAT).
5. Strategies and supports delivered by independent community-based providers that help individuals meet their supervision obligations can help improve their outcomes and reduce violation incidences.	a. Peer navigation services/credible messengers
	b. Transportation support
	c. Use of existing community-led strategies (e.g., PRIT, ATI, MCI closure report, etc.), as well as the development of strategies and partnerships, prioritizing independent community-based providers, to help individuals meet applicable registration requirements

# Violation/Revocation Model



Part II:  
Fiscal Year (FY) 2024-2025  
Public Safety Realignment  
Funding Allocation

## Fiscal Year 2024-2025 Public Safety Realignment Funding Allocation

Where funds were allocated to:	Amount
Alternate Public Defender	\$7,785,000
Auditor-Controller	\$254,000
Board of Supervisors	\$4,061,000
Chief Executive Office	\$20,253,000
District Attorney	\$10,723,000
Economic Opportunity	\$1,815,000
Fire District	\$4,036,000
Health Services (includes Office of Diversion & Re-Entry)	\$166,147,000
Justice, Care and Opportunities	\$31,058,000
Mental Health	\$42,834,000
Probation	\$131,990,000
Public Defender	\$16,986,000
Public Health	\$15,906,000
Sheriff	\$319,530,000
Trial Court Operations	\$49,000
Youth Development	\$30,371,000
<b>Total Allocation:</b>	<b>\$803,798,000</b>

Part III:  
Fiscal Year (FY) 2024-2025  
Community Corrections Plan  
Goals, Objectives, and Outcome  
Measures



**Goal 1: Enhance the County’s Post Release Community Supervision (PRCS) and pre-release processes to facilitate case planning, linkages to services, and reentry**

Objective 1	Continue and grow the Pre-Release Video Conferencing (PRVC) program for individuals pending release from state prison to PRCS
Objective 2	Expand DMH and DPH-SAPC behavioral health efforts to assess Post-release Supervised Persons (PSPs) in custody in order to facilitate a seamless connection to community-based services upon release
Objective 3	Expand partnerships and formal agreements between agencies to improve transportation services for Post-Release Supervised Persons (PSPs), ensuring reliable access to probation offices, treatment providers, court appointments, residences, and other essential locations
Objective 4	Enhance the Medi-Cal enrollment process based on the implementation of the California Advancing and Innovating Medi-Cal (CalAIM) pre-release initiative
Outcome Measure 1	Increase the number of PRVC contacts with individuals being released to Los Angeles County on PRCS to include all AB109 partner agencies, as appropriate, in order to support pre-release planning efforts
Outcome Measure 2	The number of clients contacted through jail in-reach efforts by probation and the number of clients successfully screened and linked to community-based mental health and SUD services by DMH and DPH-SAPC
Outcome Measure 3	The number of formal agreements established to implement transportation procedures, and track delivery of transportation services provided
Outcome Measure 4	The number of persons in custody exiting custody with approved Medi-Cal

**Goal 2: Enhance the Correctional Health Services (CHS) intake screening process and expand access to treatment**

Objective 1	Ensure that within 24 hours of intake, each person in custody is screened in the reception center by a registered nurse to identify urgent or emergent medical and mental health needs
Objective 2	Ensure that each person in custody in the reception center who is identified as having emergent or urgent mental health needs is evaluated by a Qualified Mental Health Professional (QMHP) as soon as possible but no more than four hours from the time of identification
Objective 3	Create a process at intake to identify individuals who report an opiate use disorder
Objective 4	Implement a program for patients with opiate use disorders to increase access to Medication Assisted Treatment (MAT) for inmates
Outcome Measure 1	Average length of time from custody intake to screening by a registered nurse
Outcome Measure 2	The percentage of persons in custody with an emergent or urgent mental health need who are evaluated within four hours of identification
Outcome Measure 3	The number of justice-involved individuals who report opiate use disorder during intake
Outcome Measure 4	The percentage of eligible patients who are offered medication assisted treatment while in custody

**Goal 3: Reduce the mental health population in the County jail system**

Objective 1	Enhance and support the Office of Diversion and Reentry's (ODR) delivery of housing and intensive case management services to individuals with mental health disorders diverted from the jail
Objective 2	Continue implementation and operationalization of the County's Alternative Crisis Response (ACR) system and expand the number of mobile crisis response teams to provide 24/7 service and to assess and ensure timely response
Objective 3	Continue to expand and deploy Psychiatric Social Workers (PSW's) in defense agencies to serve clients facing potential custody sentences and to support them in diversion, reentry, and rehabilitation programs/efforts
Objective 4	Enhance the continuum of community-based services available so that individuals touched by the justice system can access high quality care at the appropriate level of service
Outcome Measure 1	The number of individuals supported in the ODR Housing Program, including the number of new clients served in FY 24-25.
Outcome Measure 2	Percentage of mobile crisis response team field response NOT requiring law enforcement involvement
Outcome Measure 3	The number of mobile crisis response teams deployed and the average response time
Outcome Measure 4	Number of individuals diverted from incarceration with the assistance of the PSW program and assisted with reentry efforts through the PSW program
Outcome Measure 5	Assessment of PSW caseload and staffing levels

Part IV:  
PSRT Members and  
Designated Alternates

**Public Safety Realignment Team  
Members / Designated Alternates**

<b>Agency</b>	<b>Member</b>	<b>Title</b>	<b>Designated Alternate</b>	<b>Title</b>
Probation Department (Chair)	Guillermo Viera Rosa	Chief Probation Officer	Kimberly Epps	Chief Deputy
Superior Court	The Honorable Yvette Verastegui	Supervising Judge	The Honorable Jeffrey S. Cohen-Laurie	Site Judge, Central Arraignment Courthouse
Sheriff's Department	The Honorable Robert Luna	Sheriff	Paula Tokar	Assistant Sheriff
District Attorney's Office	The Honorable Nathan Hochman	District Attorney	James Garrison	Assistant District Attorney
Public Defender's Office	Ricardo Garcia	Public Defender	John Mathews	Chief of Staff
Alternate Public Defender's Office	Erika Anzoategui	Alternate Public Defender	Samuel Abrahamian	Division Chief
Chief Executive Office	Fesia Davenport	Chief Executive Officer	Brian Hoffman	Manager, CEO
Department of Mental Health	Dr. Lisa Wong	Director, DMH	Dr. Karen Streich	Mental Health Clinical Program Mgr.
Department of Public Health - Substance Abuse Prevention and Control (SAPC)	Dr. Gary Tsai	Director, DPH-SAPC	Yanira Lima	Branch Chief
Department of Economic Opportunity (DEO)	Kelly LoBianco	Director, DEO	Irene Pelayo	Program Manager, Workforce Development
Department of Public Social Services	Dr. Jackie Contreras	Director, DPSS	Sherri Cheatham	Chief, Medi-Cal & In-Home Supportive Services Program Division
Department of Health Services	Dr. Christina Ghaly	Director, DHS	Rhonda Bean-Apata	Chief Operations Officer
Office of Diversion and Reentry	Dr. Jennifer Hunt	Director, ODR	Ryan Izell	Deputy Director
Justice, Care, and Opportunities Department	The Honorable Songhai Armstead	Director, JCOD	Ronnette Ramos	Division Director
Anti-Racism, Diversity, and Inclusion Initiative	D'Artagnan Scorza	Executive Director	Heather Jue Northover	Principal Analyst
Los Angeles County Office of Education (LACOE)	Dr. Debra Duardo	Superintendent of Schools	Dr. Erin Simon	Associate Superintendent
Los Angeles Police Department	Jim McDonnell	Chief, LAPD	Alan Hamilton	Deputy Chief
County Police Chiefs Association	Darren Arakawa	President, County Police Chiefs Association	<i>Pending</i>	
Community Based Organization	Troy Vaughn	Executive Director, Los Angeles Regional Reentry Partnership	Joseph Paul	
Appointee, Supervisorial District 1	Ivette Alé-Ferlito	Executive Director, La Defensa	Fabian Garcia	
Appointee, Supervisorial District 2	Vacant	Deputy Director, Anti-Recidivism Coalition	Nicole Brown	
Appointee, Supervisorial District 3	Marisa Arrona	Local Safety Solutions Project Director, Californians for Safety and Justice	Jacky Guerrero	
Appointee, Supervisorial District 4	Jose Osuna	Housing Justice Manager, Brilliant Corners	Kyle Blake	
Appointee, Supervisorial District 5	Josh McCurry	Executive Director, Flintridge Center	Gerald Freeny	
Victim Advocacy Organization	Itzel Bonilla			