ODR UPDATES: ALTERNATIVE TO INCARCERATION (ATI) STRATEGIES

Strategies	Foundational Recommendations	ODR's Work and Partnership Updates January 2025
Strategy 1 Expand and scale community-based holistic care and services through sustainable and equitable community capacity building and service coordination (Intercept 0 and Infrastructure).	2. Create and expand decentralized, coordinated service hubs (ex: MLK Behavioral Health Center) in strategic locations across the 8 Service Planning Areas (especially SPA 1, 3, and 7) where people, their families, and support network can seek referral and/or immediate admission 24 hours a day to a spectrum of trauma-informed services that include but are not limited to mental health including Psychiatric Urgent Care Centers; supportive housing via a coordinated entry system; and substance use disorder services such as withdrawal management, medication-assisted treatment (MAT) and recovery intake centers (i.e., sobering centers).	
	20. Expand or refine affordable successful housing models designed for and tailored to justice-involved individuals with mental health and/or substance use disorder needs, specifically: (a) short-term treatment inclusive of acute inpatient, AB 109 and forensic inpatient (FIP) and IMD subacute beds;(b) interim housing inclusive of clubhouse living with supportive employment, recovery bridge housing and sober living; and (c) permanent subsidized housing inclusive of independent living and board and care facilities.	Increased P3/P4 acute/subacute bed portfolio; Submitted PSRT proposals to fund the launch of a field based Contingency Management Pilot and Crisis Response Team,
	108. Increase employment and retention of Community Health Workers (CHWs) to expand service capacity, cultural competency, and client/provider trust, by: (a) hiring, training and professionally advancing CHWs with lived experience of the justice system and/or who identify as LGBQ+, TGI, and/or cisgender women; (b) creating pathways for CHWs to move up to full-time, salaried County jobs with benefits; and (c) including continual evaluation and improvements made to ensure the CHW program is effective in building this innovative workforce.	Secured funding and seeking job applicants for Coordinator of Lived Experience Council.
	31. Remove barriers to treatment, employment, and affordable housing, including recovery housing, based on stigmatization and discrimination due to record of past convictions through local and state legislative intervention or updating County policies.	
	12. Support and broaden implementation of community-based harm reduction strategies for individuals with mental health, substance use disorders, and/or individuals who use alcohol/drugs, including but not limited to, sustained prescribing of psychiatric medications and MAT.	Training series completed by ODR Addiction Medicine Consulting MD for ODR personnel and ongoing supports for community prescribers of MAT