



Behavioral Health
Criminal Justice and Substance Use Disorder and Recovery Services

**Adult Criminal Justice
System of Care**

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■ **Corrections To A Safer Community (CTASC)**

- CTASC is a gatekeeper program that assesses detained individuals in Type II jails who are preparing for community reintegration, facilitates linkage to appropriate community services; including ACJ programs noted below.

■ **Diversion Opportunity for Outpatient Recovery Services (DOORS)**

- DOORS is a pre-trial diversion and competency-based program that provides behavioral health treatment services to individuals classified under AB 1810 and SB 215, which are pre-trial Felony IST persons and also others who are found IST (PC1368) by the court for misdemeanor and felony charges – both populations are deemed safe to treat in a community setting; collaborating with local Diversion Courts, DA and PD, to successfully have current charges removed or to restore competency.

■ **Choosing Healthy Options to Instill Change and Empowerment (CHOICE)**

- CHOICE program serves the adult probation population, specifically the Post Release Community Supervision (PRCS) individuals [Formerly known as AB 109]. Services are offered through this program which are co-located within SB County Probation/Day Reporting Center's and DBH Colton Office; works closely with trained MH Probation Officers. Provides intensive MH and SUD treatment services.

■ **Supervised Treatment After Release (STAR)**

- STAR is a day treatment/outpatient program that offer services to individuals who are overseen through the Mental Health Courts in this County. Collaboration is done between the program and the MH Superior Court Judges, Probation, Attorneys as a treatment team, providing community BH treatment to those who have an extensive history of severe mental illness and multiple incarcerations.

■ **Community Supervised Treatment After Release (CSTAR)**

- CSTAR is a pre-trial diversion program that provides behavioral health outpatient treatment services to individuals as an alternative to jail time. Individuals are aware of their pending criminal charges and are willing to seek this alternative option for receiving care in community treatment setting. Coordination is with Pre-Trial Diversion Courts, PD, DA. This program also serves as a continuation of BH services; as the client transitions to a lower level of care and have resolved criminal charges such as through the STAR Program.

Corrections To A Safer Community (CTASC)



Corrections To A Safer Community (CTASC)

- Integrate individuals living with a serious mental illness/and substance use disorder scheduled for release from County jails to successfully assimilate back into the community.
- CTASC aims to reduce the likelihood of additional criminal behavior beginning at jail intake and extending to after release by identifying and linking them to appropriate behavioral health treatment services.
- Links consumers to services including case management, peer support, alternatives to hospitalization and incarceration, and housing and employment support, as well as to program specific therapeutic interventions within programs that will best suit their needs.
- Identifies if individual meets criteria for any programs in the Adult Criminal Justice programs (i.e. DOORS, STAR, CSTAR), and appropriately links to ensure continued care remains as a priority for successful reintegration for the individual.

Referrals

- Since inception, CTASC has received 2,298 referrals
- In 2019 alone, 587 referrals have been received
- Referral sources:
 - 63% from Correction Mental Health Services
 - 10% Sheriff's Transitional Assistance Re-entry Team (START)
 - 8% from Office of Deputy Public Defender
 - 6% from Probation Dept.
 - 13% from Other (family, CIT, DBH programs, self, Parole)

Client Demographics

- Gender:
 - 69% Male
 - 30% Female
 - 1% Other identified
- Ethnicity:
 - 33% Caucasian
 - 31% African American
 - 28% Latino
 - 8% Other

Program Outcomes

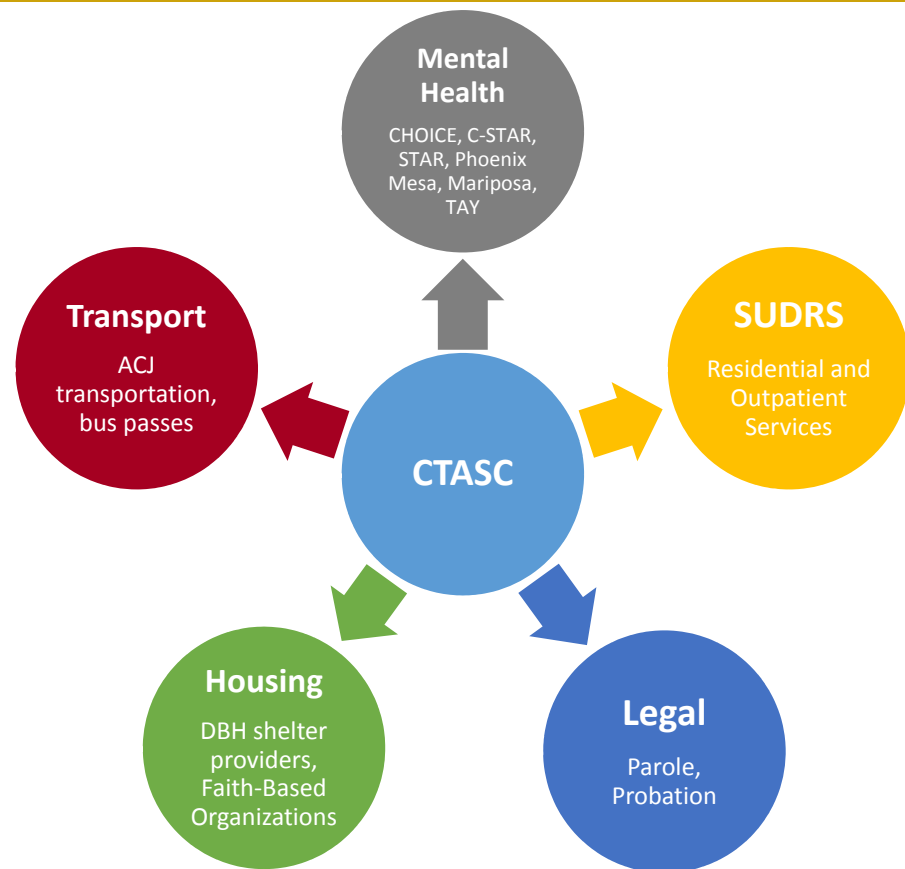
- Reduction in Recidivism
- The following data represents the reduction in recidivism from January 2018 through December 2018:

| # of Cases | # of Bookings 1 Year Prior to CTASC | # of Bookings 1 Year After CTASC | Reduction in Overall Bookings |
|------------|-------------------------------------|----------------------------------|-------------------------------|
| 202 | 662 | 368 | 44% |

- Recidivism rates for participants linked in 2018 were assessed. The evaluation period was 12 months prior and 12 months after CTASC participation:

| # of Cases | # of Bookings 1 Year Prior to CTASC | # of Bookings 1 Year After CTASC | Reduction in Overall Bookings |
|------------|-------------------------------------|----------------------------------|-------------------------------|
| 60 | 313 | 206 | 34% |

- Approximately 80% of active referrals are seen within 7 business days of receipt of referral.
- Re-entry plans aim to address the various needs of the client based on the intake assessment completed.
- This is possible through collaborations with:
 - Sheriff's Dept.
 - Probation Dept.
 - Office of Deputy Public Defender
 - Parole
 - Dept. of Behavioral Health



- CTASC received a referral for a 36 year old female who was in need of housing, mental health services, and substance use disorder services.
- Through collaboration, the client was linked to CHOICE in San Bernardino and placed in emergency shelter.
- This client remains in services through CHOICE, has gainful employment, remains in recovery, and is working toward permanent independent housing.
- She has had **NO** arrests since her participation with CTASC and linkage to CHOICE.

Diversion Opportunity for Outpatient Recovery Services (DOORS)



- The Department of Behavioral Health (DBH), along with key criminal justice partners in San Bernardino County, and with pending a contract with the California Department State Hospital (DSH), collaboratively established a diversion program known as the Diversion Opportunity for Outpatient Recovery Services (DOORS).
- This program mirrors relevant evidence-based practices for providing fundamental behavioral health treatment care to adults with a serious mental illness or co-occurring disorders (Mental Health [MH] with Substance Use Disorder [SUD]) that are involved in the criminal justice system.
- Two tracks for this program:
 - Mental Health Diversion
 - Incompetent to Stand Trial

Mental Health Pre-Trial Diversion AB 1810, SB 215, PC 1001.35, PC1001.36

MH Pretrial Diversion (PC1001.36)

Referrals come from Public Defender's Office directly to DBH

DSH Diversion (AB1810)

1. Sub-population of the MH Diversion legislation
2. More narrow focus than the other diversion programs
3. Competency not addressed by the court but may be concerned for potential risk of meeting criteria of IST
4. Referred to DBH for assessment
5. DBH staff completes an Assessment for risk/eligibility to for receiving treatment in an outpatient community setting
6. Individual is accepted or deemed not appropriate for outpatient level of care
7. If not accepted, referral back to the courts with justification for non-acceptance

Misdemeanant IST (MIST)

1. Referrals come from the Criminal Court to DBH
2. DBH designee evaluates for inpatient or community outpatient placement to obtain restoration of competency training

Felony IST

1. Referrals come from the Criminal Court to CONREP for evaluation
2. Referrals will come through CONREP to DOORS for community outpatient placement to obtain restoration of competency training

Referrals

- DOORS has received 89 referrals since July 2018
- Referral sources:
 - 77% from Office of Deputy Public Defender
 - 4% from Private Attorneys
 - 19% from CMHS or Family

Client Demographics

- Gender:
 - 82% Male
 - 18% Female
- Ethnicity:
 - 27% Caucasian
 - 30% African American
 - 24% Latino
 - 18% Other or Unknown

Services Include

- a. Medication support and management
- b. Therapy (individual, group, family as indicated)
- c. Coaching/guiding/counseling/teaching to enhance coping skills
- d. Skill-based Groups (Anger Management, Seeking Safety, Moral Recognition Therapy)
- e. Substance Use Disorder Treatment
- f. Restoration of Competency Training (Only for Felony and Misdemeanor IST population treated in this program)
- g. Provide other ancillary supportive services such as housing (short-term, independent living)

CSTAR Program
Behavioral Health Diversion
(Also know as MH Diversion)



Purpose of Mental Health Diversion

- CSTAR Program aims to divert adults with a serious mental illness or co-occurring disorders (Mental Health [MH] and Substance Use Disorder [SUD]) who are involved in the criminal justice system. These individuals are provided an opportunity to receive outpatient mental health services instead of serving a jail or prison sentence.
- Mental Health Diversion is based on recent legislature including AB1810 and PC1001.36.
- Upon successful completion of Mental Health Diversion, the participant's legal matter may be dismissed.

- Since July 2018, 87 referrals for the CSTAR have been received.
- Of these, 9 were granted Mental Health Diversion terms by the court and 7 continue to participate in services.
 - The other 2 participants have gone AWOL since being granted Mental Health Diversion.
- Two-thirds of Mental Health Diversion participants identify as male; the remaining one-third of participants identify as female.
- The ethnic background of participants is as follows:
 - 33% Caucasian
 - 22% African American
 - 33% Latino
 - 11% Other

■ Mental Health Court Treatment Team:

- Commissioner/Judge
- District Attorney
- Probation
- Public Defender
- Sheriff (in-custody)
- DBH Treatment Staff
- Telecare/Valleystar
- District Attorney

Requirements:

- Mental Health Diagnosis (tier 3)
- History of recidivism

- This team works collaboratively, meeting weekly in Judges Chambers, to identify and discuss cases that would be eligible for Mental Health Court diversion. Referrals are assessed and once accepted into the program required to attend extensive day treatment programming, followed by a ACJ wrap around team both in community and in treatment. Occasional follow up court dates to determine progress are required. Minimum of 18 months in the treatment portion of the program.
- Outcome: Charges can be reduced or dismissed if all program components are completed successfully

- Program Referrals and other Statistical Data (2014-2017)
 - Total referrals: 345
(Rancho Cucamonga, San Bernardino, Victorville Courts):
 - Hospital Admission Decreases
 - Hospital Admission rates: 75%
 - Jail Days: 87.6%
- S.T.A.R. Program Graduates
 - Total graduates: 259 since 2007
(San Bernardino/Rancho Cucamonga Courts)
 - Total graduates: **93** since 2011
(Victorville Court)

***Data based on available information from prior reports**

- **Day Reporting Centers (DRC) and CHOICE Clinics:**
 - There are four CHOICE Clinics Co-located at the Probation Locations.
 - Of the four two include Outpatient Substance Use Disorder Certified Programs
 - Barstow
 - Fontana
 - San Bernardino
 - Victorville

- **CHOICE and Probation collaborate in a number of ways including:**
 - Weekly and/or Bi-weekly Case Staffing Conferences between DBH and probation staff
 - Emails and phone calls as needed to provide updates on client treatment and participation
 - Monthly Multi Disciplinary Treatment (MDT) Meetings and/or as needed
 - Monthly stat reports reflecting screenings, assessments and group participation
 - On-going communication about effective client care, Program updates and/or mandates

Mental Health Diversion Treatment Team:

- Commissioner/Judge
- District Attorney
Mental Health Diagnosis (tier 3)
- Public Defender
Sheriff (in-custody)
- DBH Treatment Staff

- This team works collaboratively to identify cases eligible for Mental Health Diversion. Referrals are assessed and treatment recommendations are submitted for approval. Once accepted into the program, clients are required to participate in intensive outpatient services, followed by an ACJ wrap-around team for up to 2 years.

Requirements

- Qualified mental health expert opines that individual suffers from mental disorder
- Mental disorder was a significant factor in commission of the offense
- Individual consents to Diversion and waives right to speedy trial
- Individual does not pose an unreasonable risk of danger to public safety

Outcomes

- Criminal charges dismissed upon successful completion and arrest deemed never to have occurred

- DBH and the Public Defender's office collaborate in a number of ways including:
 - Public Defenders and Social Service Practitioners (SSPs) identifying and referring individuals to Corrections to a Safer Community (CTASC) or Diversion Opportunities for Outpatient Recovery Services (DOORS)
 - Weekly teleconferences between CTASC and the SSPs from the Public Defender's office
 - Emails and phone calls as needed to develop and execute identified re-entry plans
 - Providing progress reports for DOORS clients to assigned Public Defender
 - Weekly case consultation between Supervised Treatment After Release (STAR) and the assigned Mental Health Court (MHC) Public Defender

For additional questions regarding this content please contact:

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