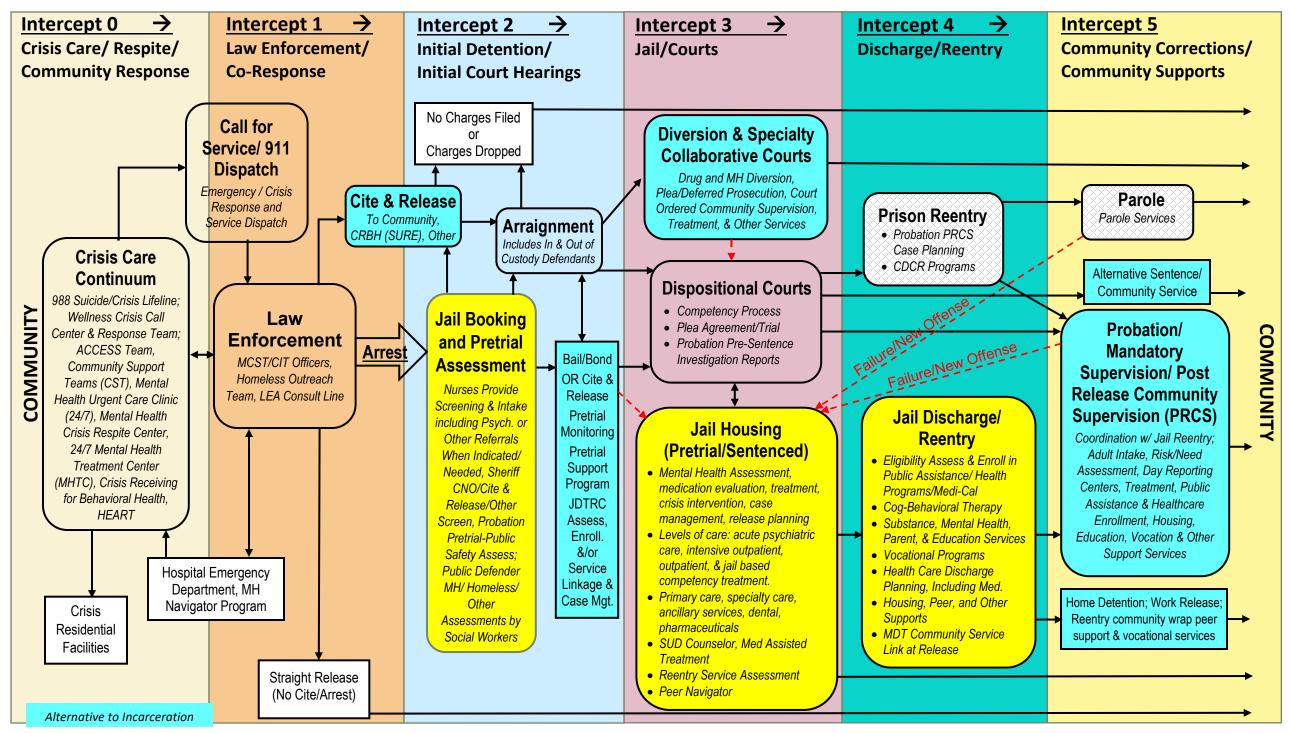
September 2022 Working Draft

Sacramento County Adult Sequential Intercept: Criminal Justice-Behavioral Health Partnerships



| INTERCEPT 0: Crisis Care, | INTERCEPT 1: Law | NTERCEPT 2: Intake, | ▶ INTERCEPT 3: Courts and | ♦ INTERCEPT 4: | INTERCEPT 5: Community |
|--------------------------------------|---------------------------------------|--------------------------------------|--|------------------------------|--|
| Respite and Community | Enforcement Calls and Responses | Booking, Bail Setting/Review, | Incarceration in Jail or Prison | Reentry - Individuals | Corrections - Community corrections |
| Response Continuum - Involves | - Law enforcement and other | Initial Court Hearing - | - Individuals with mental health | transition from | agencies (probation and parole) |
| interventions for people with | emergency service providers | Individuals who have been | or substance use disorders who | detention/incarceration in | provide essential community-based |
| mental and substance use | respond to people with mental and | arrested will go through the | have not yet been diverted at | a jail or prison back to the | supervision, as an arm of the court, to |
| disorders prior to formal | substance use disorders who are in | intake and booking process and | previous intercepts may be held | community. This | individuals released from custody. |
| involvement with the criminal | crisis in the community. In many | will have an initial hearing | in pretrial detention while | intercept requires | People with mental and substance use |
| justice system. Critical | jurisdictions, when a person in | presided over by a judicial | awaiting disposition of their | transition planning with | disorders may be at risk for probation |
| components of this intercept | crisis exhibits illegal behavior, law | official. Important elements of | criminal cases. This intercept | specific considerations to | or parole violations and benefit from |
| include the local continuum of | enforcement officers have the | this intercept include the | centers around diversion of | ensure people with | added supports at this intercept. Use of |
| crisis care services and resources | discretion to place the person under | identification of people with | individuals from the jail or | mental and substance use | validated assessment tools, staff |
| that reduce reliance on emergency | arrest or to divert them to treatment | mental and substance use | prison into programs or services | disorders can access and | training on mental and substance use |
| response, hospitalizations, and | or services. Effective diversion at | disorders being processed and | that allow criminal charges to be | utilize medication and | disorders, and responsive services, |
| law enforcement to serve people | Intercept 1 is supported by training, | booked in the jail, placement of | resolved while also addressing | psychosocial treatment, | such as specialized caseloads, are vital |
| in crisis or with low-acuity | programming, and policies that | people with mental and | the defendant's mental and | housing, healthcare | to reducing unnecessary violations, |
| mental health needs. In | integrate behavioral health care and | substance use disorders into | substance use disorder needs. | coverage, and services | decreasing criminal re-offense, and |
| jurisdictions with fewer | law enforcement to enable and | community-based treatment | The intercept also involves jail- | from the moment of | improving behavioral health outcomes, |
| resources, law enforcement may | promote the diversion of people | after intake or booking at the | and prison-based programming | release and throughout | through enhanced connections to |
| be involved in Intercept 0 | with mental illness away from | jail, and availability of | that supports defendants in a | their reentry back into the | services and coordination of behavioral |
| diversion efforts in a parens | arrest and a subsequent jail stay and | specialized mental health | trauma-informed, evidence- | community. | health treatment and criminal justice |
| patriae, or "guardian," capacity | into community-based services. | caseloads through pretrial | based manner during their | | supervision goals. |
| first responder services. | | service agencies | incarceration. | | |

INVENTORY OF SERVICES

<u>988 Suicide & Crisis Lifeline</u> - Operated by <u>WellSpace Health Crisis Center</u> 24 hours a day, 7 days a week, with support from County Behavioral Health, receives calls from people of all ages who are feeling depressed, hopeless, alone, desperate, and sometimes considering suicide as a way to end their pain. We also respond to calls that involve emergency rescue, such as a suicide in progress, someone on the Foresthill Bridge, or calls patched in from the California Highway Patrol or other law enforcement.

Wellness Crisis Call Center and Response Team (WCCCRT), go-live estimate is late 2022, receives calls from community members requesting behavioral health services or when they are experiencing a mental health crisis. Staff provide immediate, 24/7 crisis intervention and de-escalation services, assess needs and risks, and create safety plans. Clinicians and staff with lived experience can be dispatched to respond immediately to locations throughout the County. WCCCRT will identify and leverage individual strengths and natural supports; coordinate with existing Mental Health Plan (MHP) and Substance Use Prevention and Treatment (SUPT) providers as appropriate; link to services; provide voluntary transport to urgent/emergency resources and access to alternate response teams or emergency responders when necessary. Goals: • Safely de-escalate crises • Provide linkages to accessible culturally responsive behavioral health resources to decrease repeat crises and emergency department visits • Offer a response team that meets the cultural, ethnic and language needs and does not include law enforcement staffing • Ensure model is community-based • Decrease criminalization of mental health and homelessness. **Homeless Encampment and Response Team (HEART)** Staffed with Counselors and Peers, HEART uses a phased approach to help encampment and shelter residents link to needed behavioral health services and support. Through the initial phase where we develop rapport and trust over time. The timeline for these phases can be weeks or years. The team's ultimate goal is to reach linkage phase so that encampment and shelter residents will consent to and can obtain the behavioral services they need.

Mental Health Access Team – The entry point for County mental health services, a Behavioral Health Services (BHS) team of licensed mental health professionals provide Sacramento County residents referrals and/or linkage to authorized specialty mental health services. They determine eligibility for services based on referral information and by conducting a brief phone screening in the individual's primary language. Individuals, caregivers, schools, medical providers, and other concerned adults can refer to the Access Team via phone, fax or US mail.

- The Mental Health Access Team determines level of service needed and links the individual with a culturally and linguistically appropriate provider. In accordance with confidentiality regulations, the Mental Health Access Team will inform the referring party that the individual has been linked with a provider agency. The Sacramento County contracted provider will contact the individual and/or caregiver to set up an appointment after the Access Team has authorized services.
- Available Services:
 • Crisis intervention Mental health assessments Therapy and/or rehabilitation services Intensive Home Based Services Skills building and support groups Case management •
 Intensive Care coordination Linkage to housing services Linkage to community resources Medication support Early Childhood Mental Health Services for Youth with coexisting Mental Health and
 Alcohol/Substance Abuse Disorders

Substance Use Prevention & Treatment (SUPT) Services treatment services to youth and adults who are struggling with a substance use disorder. A preliminary assessment is conducted by clinical staff to determine treatment needs and level of care to support recovery. Over-the-phone assessment and referral to an appropriate treatment provider is available M-F, 8:00 am – 5:00 pm at (916) 874-9754 or (888) 881-4881, and after hours at (888) 881-4881.

Laura's Law/Assisted Outpatient Treatment (AOT) is a court ordered outpatient service for adults, ages 18 years and older, who have a serious mental illness and a history of (a) psychiatric hospitalizations, (b) jailings, or (c) acts, threats or attempts of serious violent behavior towards themselves or others. Consumers must first be offered voluntary treatment within the past 10 days. It is estimated to begin taking referrals in January 2023 to go live in February 2023, where a Full Service Partnership (FSP) model will be applied.

Forensic Full Service Partnership (FSP) – El Hogar's Community Justice Support Program FSP will apply a Multi System Team (MST) model for interagency and community collaboration in mental health service to justice involved individuals experiencing Serious Mental Illness (SMI). Currently a Multi-disciplinary Team (MDT) model is used. Services include peer support, medication support, intensive case coordination, support with benefits acquisitions, housing support, therapy, skill building sessions and groups.

The <u>Community Support Team</u> (<u>CST</u>) operated by Behavioral Health Services, Monday through Friday, 8:00 am – 5:00 pm. The collaborative team includes, licensed mental health counselors, peer and family support specialists, and other professional staff providing community-based flexible services to serve all age groups experiencing mental health distress, including those at risk for suicide, and the individual's family members and/or caregivers. Services can include assessment, crisis intervention, safety planning, and linkage to ongoing services and supports. The goal of CST is to provide services in a culturally and linguistically competent manner while promoting recovery, resiliency and wellbeing resulting in decreased use of crisis services and/or acute care hospitalization services; decreased risk for suicide; increased knowledge of available resources and supports; and increased personal connection and active involvement within the community.

Mental Health Urgent Care Clinic (MHUCC) beginning in late 2022, will operate 24 hours a day, 7 days a week. It's is a walk-in clinic for individuals experiencing a mental health and /or co-occurring substance abuse crisis. The MHUCC is a client-centered program that focuses on providing immediate relief to individuals and families in distress. The program intends to avert psychiatric emergency room visits and involuntary hospitalizations. The goal of MHUCC is to foster recovery for individuals and families through the promotion of hope and wellness. As a walk-in clinic, the MHUCC welcomes anyone experiencing mental health-distress regardless of age and ability to pay. *This program is funded by the Sacramento County Division of Behavioral Health Services through the voter-approved Proposition 63, Mental Health Services Act (MHSA)* A safe space for individuals and families, peer support and on the- spot counseling Crisis interventions, psychiatric evaluations and clinical assessments Referrals and linkages to community resources Brief medication management services (excluding controlled substances)

Mental Health Crisis Respite Center – Operated by Hope Cooperative/TLCS, provides twenty-four (24)-hour/seven (7) days a week mental health crisis respite care in a warm and supportive community based setting to eligible TAY (18+), adults, and older adults who are experiencing overwhelming stress due to life circumstance resulting in a mental health crisis. Services include screening, resource linkage, crisis response and care management up to twenty-three (23)-hours. The program has the capacity to serve up to ten (10) individuals at any given time. (*Abiding Hope and MH Respite Program also available*) Crisis Residential Facilities – Short-term residential treatment programs that operate in a structured home-like setting twenty-four hours a day, seven days a week. Eligible consumers may be served through the CRP for up to 30 days. These programs embrace peer facilitated activities that are culturally responsive. CRPs are designed for individuals, age 18 and up, who meet psychiatric inpatient admission criteria or are at risk of admission due to an acute psychiatric crisis, but can instead be served appropriately and voluntarily in a community setting. Beginning with an in-depth clinical assessment and development of an individual service plan, crisis residential program staff will work with consumers to identify achievable goals including a crisis plan and a Wellness Recovery Action Plan (WRAP).

<u>Crisis Receiving for Behavioral Health (CRBH)</u>, formerly Substance Use Respite & Engagement (SURE) Program – Operated by WellSpace Health 24 hours a day 7 days a week at 631 H St., behind the Main Jail. CRBH provides short-term (4-12 hour) recovery, detox, and recuperation from effect of acute alcohol/drug intoxication or behavioral health crisis. Staffed by healthcare professionals to provide medical monitoring, SUD counseling, and connections to supportive services and transportation to service partner or home after completion of short-term recovery. Clients are referred by partner agencies, no walk-ins. Capacity currently 20, planned expansion to 40.

Sacramento County Mental Health Treatment Center (MHTC) – Provides short term comprehensive acute inpatient mental health services, 24/7, for adults 18 and older experiencing a mental health crisis and/or condition. The County's Intake Stabilization Unit (ISU), adjacent to the MHTC campus' 50 inpatient psychiatric beds, provides up to 23-hour crisis stabilization and intensive services in a safe

environment. The ISU responds to hospital ED staff and law enforcement calls 24/7, provides direct access from the mobile crisis support teams and SB82 triage navigator program, and receives adults and minors that have been medically cleared for 24/7 crisis stabilization services.

911 Dispatch – Different 911 call centers serve different jurisdictions within the county. They include one operated by the California Highway Patrol and 6 by local LEA's, with the Sheriff's Office and Sacramento Police Department operating the two largest. Computer aided dispatch is utilized for deployment of appropriate responders, including dispatch of Mobile Crisis Support Teams/Co-Responders, where available. Law Enforcement Consult Line (LECL) – Is available for officers responding to 911 calls in the community on clients who are experiencing a mental health crisis. They are encouraged to call the Mental Health Treatment Center's Intake Stabilization Unit (ISU) to consult on these clients for resource assistance they might need to work with the client. Officers may bring clients directly from the community for mental health services and crisis stabilization to the ISU if the client meets Welfare & Institutions Code 5150 criteria of Danger to Self (DTS), Danger to Others (DTO) or Gravely Disabled (GD). A designated LEA telephone line (875-1170) has been established on the ISU for these purposes.

Mobile Crisis Support Teams (MCSTs) – licensed clinicians embedded with law enforcement to respond to mental health crisis related calls for service (in the process of expanding from 9 to 11 teams for Behavioral Health Service (BHS) partnership with the Sacramento Sheriff Department-North Division, Sacramento Sheriff Department-Central Division, Citrus Heights Police Department, Folsom Police Department, Elk Grove Police Department, and the Rancho Cordova Police Department currently and adding Galt Police Department and the Los Rios Police Department, where Officers/Deputies are trained in Crisis Intervention Training (CIT) to respond to persons experiencing mental health crisis. Teams responding to mental health crisis aim to reduce risks and threats to self or others. They build upon individual, family, community, and self-identified strengths and skills to divert individuals from unnecessary incarceration or hospitalization. They assist with making connections to and navigating service systems for access to ongoing mental health support. Authorized mental health providers support de-escalation, safety planning and ongoing care. MCSTs also educate key individuals, family members or natural supports on how to improve health and wellness.

Homeless Outreach Team (HOT) – The mission of the Sacramento County Sheriff's Homeless Outreach Team (HOT) is to engage homeless individuals with services, along with enforcement when necessary, in order to make a positive impact in the community. The men and women of the Homeless Outreach Team utilize unique and innovative "outside the box" approaches to connect homeless individuals and families with critical services. HOT has formed and fostered partnerships with State and County agencies, as well as faith-based and private organizations, to provide service to homeless people in need. Jail Diversion Treatment and Resource Center (JDTRC) – Opened December 2021, this comprehensive resource center is for Misdemeanor Mental Health Diversion Court participants 18 years and older who are living with mental illness and/or co-occurring substance use disorder, and/or suffering from trauma. Located in close proximity to the Main Jail and Sacramento Superior Court, services include mental health evaluations and linkage to services, onsite therapeutic classes, referrals to community-based service providers, contact with a probation office, and onsite meetings with legal representation. Sheriff's Jail Intake – Staff provide additional screening during booking to identify detainees who qualify for and can be safely released on their "own recognizance" (OR) without being placed in housing units, typically within 24 hours of booking. This type of pretrial release is known as a "Quick" release. Sheriff's intake staff also identify defendants eligible for the Chronic Nuisance Offender (CNO) Program. Booking officers refer eligible defendant to the District Attorney's Office for participation in this specialty court program provides housing, treatment and other services as an alternative to jail.

Adult Correctional Health (ACH) – Provides physical health and mental health services for incarcerated adults in the jail system. This is a county operated service working in partnership with Sacramento Sheriff's Office (SSO). ACH has several contracted providers including UC Davis for onsite mental health services. Other healthcare contracts include specialty and ancillary care services. Registered nurses (RNs) complete a receiving screening/intake on arrestees who are booked and housed. Dependent on patient needs, there is a range of medical services (primary care, specialty care, dental, pharmacy, & ancillary services) provided to patients (onsite/offsite). RNs refer individuals to onsite mental health staff and can request urgent assessments when needed. Psychiatric consultation is available 24/7 at both jail facilities. Psychiatric services include evaluations, medication management, crisis intervention, treatment, case management and limited discharge planning. Services include acute psychiatric care, intensive outpatient, outpatient, and jail based competency. ACH also has a contract with WellSpace Health for on-site Substance Use Disorder (SUD) Counselors to provide assessment, education, counseling, and community linkage at the Main Jail. ACH collaborates with system partners such as Behavioral Health, Collaborative Courts, etc. Medication Assisted Treatment (MAT) services are also provided when clinically indicated. There is a discharge planning team that provides health care linkage for patients post-release. This includes discharge planning services for patients with chronic health conditions, SMI, and SUD. Discharge planning is a phase in process. Medications are currently provided to the sentenced population post-release. Staff have not yet begun the medication pilot for the presentence population.

<u>Probation Pretrial Program</u> - Assessment, Recommendations to Court, and Monitoring – Focused on identifying detainees who can be safely released to the community pending trial, without regard to ability to post bail. Under this program, Probation Officers apply the Public Safety Assessment, a validated risk assessment tool, and provide pretrial reports to Superior Court that include risk scores and detention or release recommendations, including recommended monitoring levels and conditions. Those released for pretrial monitoring may be provided further assessment and linkage to health and support services, court reminder telephone calls, office visits, community visits and GPS monitoring.

Public Defender Pretrial Support Program - Social workers embedded in the Public Defender's Office conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, housing and other support services, and provide ongoing case management support after release.

Public Defender, Conflict Criminal Defender and the District Attorney Review – Working together along with the Court and Behavioral Health experts, they identify defendants who are eligible and appropriate for diversion or collaborative court programs that provide community-based treatment and other services. Additionally, specialized attorneys work to ensure appropriate actions and services for LPS and Murphy's Conservatorship (defendant subject to a pending indictment or information for a serious and violent felony and found to present a substantial danger of physical harm to others), mentally disordered offenders, sexually violent predators, and for mental incompetence/insanity extensions.

Drug Diversion (PC 1000) – Under Penal Code Section 1000, defendants who meet criteria: (1) Within five years prior, defendant has not been convicted for any offense involving controlled substances other than offenses listed under PC 1000. (2) The offense charged did not involve a crime of violence or threatened violence. (3) There is no evidence of a contemporaneous violation relating to narcotics or restricted dangerous drugs other than a violation of the offenses listed under PC 1000. (4) Defendant has no prior felony conviction within five years prior. Drug diversion program clients enter a plea of not guilty and waives the right to a trial by jury and proceedings are suspended during participation in a 12- 18 month drug treatment program. If the individual does not complete the program or is convicted of specified crimes the Court may terminate diversion and reinstate the criminal proceedings. Charges are dismissed if the individual successfully completes diversion.

Mental Health Diversion (Terms differ for Misdemeanor & Felony Defendants) – Superior Court may grant Mental Health Diversion to defendants eligible pursuant to Penal Code Section 1001.36, charged with specified crimes, suffering from a qualifying mental health disorder, where a qualified expert determines nexus between mental health symptoms and criminal behavior, and the defendant does not pose an unreasonable risk of danger to public safety. To participate, a qualifying individual enters a plea of not guilty and waives the right to a speedy trial, and proceedings are suspended in order for the individual to complete a mental health treatment program within 12 or 24 months, dependent upon offense. Processes established by Sacramento Superior Court.

| Title | Who It's For | What It Includes | Length | Capacity | Agencies Involved |
|---|--|---|-----------------|----------|---|
| Misdemeanor Mental Health Diversion | Defendants facing misdemeanor charges and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36. | Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender's Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed. | 6-12 months | No Cap | Court, Public Defender, District Attorney, Health Services, Human Assistance |
| Felony Mental Health Diversion Felony | Defendants facing felony charges and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36. | Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender's Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed. | 12-24 months | No Cap | Court, Public Defender, District Attorney, Health Services, Human Assistance |

Sheriff's Alternative Sentencing Program (ASP), Work Project, & Home Detention – provides an opportunity for people to work community service hours in lieu of paying fines, allows certain sentenced individuals the ability to work in their community in lieu of serving time in jail, and provides home detention alternative to jail for sentenced individuals to support their family, employment and education goals. Sheriff's Reentry Services – Rehabilitative vocational, educational, and treatment services that aim to reduce recidivism and prepare offenders for successful community reintegration. Evidence based assessment tools are utilized to determine program placement. Upon release from custody, ongoing program services are available in the community for up to a year.

Medi-Cal Pre-Release (in custody) enrollment through the Department of Human Assistance (DHA) will be expanded in January 2023.

Adult Day Reporting Centers (ADRC's) – Probation operates three ADRC locations with intensive on-site and community supervision for individuals 18 and over and who have been assessed as having a highrisk to reoffend. Depending on client needs, the phased program lasts 9 to 12 months. ADRC includes: cognitive-behavioral treatment classes; referrals to community-based organizations; job skill assessments; vocational training; group, individual or family counseling; educational services including assessment, GED preparation and testing; emergency housing; family support services; pro-social activities; and participation in the Community Outreach Program to provide restitution to victims. Adult Correctional Health RNs onsite for screening and referral to health care services. *Additional service options not County operated, but available for justice-involved people*: *Turning Point Community Programs*- *Mental Health Urgent Care Clinic & 3 Crisis Residential Facilities - 2 with 15 beds each and 1 with 12 beds. Abiding Hope Respite House w; Bender Court Crisis Residential »; Crisis Residential Program (CRP) w; Flexible Integrated Treatment (FIT) w; Integrated Services Agency (ISA) w; Mental Health Urgent Care Clinic (MHUCC) w; Pathways to Success After Homelessness w; Regional Support Team (RST) w; Therapeutic Behavioral Services (TBS) w; Transitional Support Services w; SMART- SACRAMENTO MULTIPLE ADVOCATE RESOURCE TEAM at El Hogar's Guest House Homeless Clinic- a voluntary outpatient behavioral health clinic to helps adults struggling with mental health and/or substance abuse challenges who are homeless. Guest House provides access to mental health and supportive services. Staff use a strengths-based approach to help consumers regain control of their lives with: • Medication Support • Entitlement Support (GA, SSI, SSDI, etc.) • Linkage to Primary Health Care • Individual Therapy • Support Groups • Case Management • Advocacy • Connections Lounge* **NEW SERVICES 2023:** Enhanced Care Management (ECM) and Community Supports (CS) are foundational components under the State's new California Advancing and Innovating Medi-Cal (CalAIM) initiative. ECM is a whole-person, interdisciplinary approach to comprehensive care management that addresses the clinical and non-clinical needs of high-cost, high-need managed care members across multiple delivery systems. CS are non-traditional support services that are provided "in-lieu" of more costly services, including hospitalizations and nursing facility stays that are covered by Medi-Cal. Sacramento County is working to implement ECM and CS expansion for justice involved individuals, upon release from jail, in July 2023. Additional health service resource information is available <u>here</u>. **NOTE:** Ongoing staffing crisis for health professional positions has impacted go-live/start-up, current and expansion plans and operations for many of the <u>behavioral health services available</u>.

Sacramento County Collaborative and Specialized Courts

| Title | Who It's For | What It Includes | Length | Capacity | Agencies Involved |
|---|---|--|---------------------------|-----------|--|
| Recovery Treatment Court (formerly Drug Court) | Defendants charged with non-violent drug possession, violations of probation, and certain drug-related and property crimes. | Residential and outpatient services including detoxification, substance misuse, mental health treatment, relapse prevention, and reentry services; drug testing, case management, housing, and therapeutic (yoga, nutrition, mind-body) services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated or the case may be dismissed. | 10 - 18 months | 80 - 125 | Court, Probation, Attorneys, Dept. of Health Services, Dept. of Human Assistance, and Service Providers |
| Drug Diversion – PC 1000 | Defendants charged with simple possession and first time drug offenses. | Individual assessments to determine level of treatment needs and linkage to appropriate treatment services. Self-help support groups and random drug testing for 6 months. Upon completion, charges may be dismissed. | 18 months - 2 years | 800 plus | Court, Substance Use Prevention and Treatment, Attorneys, and Service Providers |
| Mental Health Treatment Court (MHTC) | Non-violent defendants diagnosed with specified mental health disorders or co-occurring mental and substance use disorders, approved for participation by the DA's Office. | Residential and outpatient services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Full Service Partnership supports such as housing, employment, education and transportation. Random drug/alcohol testing. Upon completion, suspended jail time is lifted, probation may be terminated, and the case may be dismissed. | 12 - 18 months | 150 - 200 | Court, Attorneys, Dept. of Health Services, Probation, and Mental Health and Substance Use Treatment Service Providers |
| Prop 36 Court | Defendants charged with non-violent drug possession and transportation for personal use. | Report to Probation for drug/alcohol/mental health screening and treatment referral. Four "fee for service" multi-disciplinary sites are available for detoxification, residential, outpatient, methadone, sober living, vocation, family counseling, literacy, and communication skills services. 12 weeks intensive outpatient services, 12 weeks aftercare, and proof of completion required. Upon completion, plea is withdrawn and case dismissed, terminating probation. | 6 months | 100 | Court, Attorneys, Substance Use Prevention and Treatment, and Service Providers |
| DUI Treatment Court (DUITC) | Individuals charged with a VC 23152 (DUI), who have three prior DUI misdemeanor convictions within a 10 year period. | Residential and outpatient services including detoxification, substance misuse, relapse prevention, drug testing, and case management services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated early. | 12 - 18 months | 50 | Court, Attorneys, Dept. of Health Services, Probation, and Service Providers |
| Veterans Treatment Court (VTC) | Veterans charged with offenses related to issues from US Military service. No sex, arson or gang offenses. | Any combination of residential and/or outpatient treatment including case management, Veteran mentoring, substance abuse and mental health services, and random drug/alcohol testing by VA and Probation. Upon completion, case is dismissed and sealed, unless other agreement specified. | 12 - 18 months | 30 | Court, Probation. Attorneys, and Veterans Affairs |
| Reentry Court | Defendants charged with non-violent drug and property offenses eligible for County Jail Prison (CJP) or State Prison. | Program services may begin in custody and upon release include participation in Probation's Adult Day Reporting Center (ADRC), housing, education, vocation/employment, individual and group counseling, and connection to county medical, general and CalFresh services. Upon completion, term of probation is reduced and CJP time is vacated or permanently suspended. | 12 - 18 months | 50 | Court, Probation, Sheriff's Office, Attorneys, and Substance Use Prevention and Treatment |
| ReSET Court (Reducing Sexual Exploitation & Trafficking) | Defendants charged with prostitution or prostitution related offenses; may have other misdemeanor charges. | Prostitution diversion program services include health and wellness education, HIV testing, group and individual counseling, trauma based therapy, wraparound, life skills and peer mentoring services. Upon completion, the initial plea is withdrawn and the case is dismissed. | 3 - 6 months | 100 - 120 | Court, Attorneys, Community Against Sexual Harm (CASH), and Substance Use Prevention and Treatment |

| Chronic Offender Rehabilitation Effort (CORE, previously CNO) Program | Misdemeanor offenders within District Attorney Community Prosecution areas with at least 10 arrests, citations, and/or bench warrants within 12 months. | Residential placement is offered in lieu of jail time, which is stayed pending successful completion of program services. Substance abuse and mental health assessment and treatment services provided by County and community-based providers. Homeless and related social, health and fiscal services also available. Upon completion, sentence is modified per terms of an original plea agreement. | 90 days | 20 - 40 | Court, Attorneys, County Substance Use Prevention and Treatment, Sac Steps Forward, and Service Providers |
|---|--|--|-----------------|------------------------------------|---|
| City Alcohol Related Treatment (CART) | Individuals with 5 alcohol-related City Code citations and/or arrests in the past 18 months, need housing, and are in-custody for a violation of probation. | As a term of probation, 30 days of residential alcohol treatment services at Volunteers of America (VOA) in lieu of a 30 day jail sentence. Upon completion, the 30 day jail sentence is permanently stayed. | 30 days | 80 | Sac City Attorney, Sacramento Police Dept., VOA, Sac Housing and Redevelopment Agency |
| Serial Inebriate Program (SIP) | Individuals found to be publicly intoxicated-PC 647(f) and have 15 or more alcohol related county, city or service contacts (arrest/ citation/detox/fire/hospital) within the prior 12 months. | Placement in Volunteers of America (VOA) comprehensive alcohol treatment program with transport from jail to VOA. Services available include Narcotics Anonymous, Alcoholics Anonymous, life skills, post-placement housing, employment training, and other services. Upon completion of treatment, outstanding warrants are cleared and offenses are dismissed in the interests of justice, except if victim restitution is owed or DMV issues cannot be waived. | 90 days | 10 | Sutter Health, Court, Sacramento Police Dept., Sheriff's Office, Attorneys, Sac Downtown Partnership, and VOA |
| Loaves and Fishes Court (for Homeless) | Homeless low level traffic and misdemeanor offenders (trespassing, drinking in public, etc.) who cannot afford to pay court fines and fees. | On-site consultation at Loaves and Fishes Legal Clinic, with the Public Defender's Office. Legal remedies through the Court include resolving infraction cases through participation in community-based services, such as clean and sober living facilities and/or mental health treatment. In addition it allows individuals to work off debt from tickets and fines by doing community service hours. Completion of community services hours may result in the case being dismissed. | 3 - 6 months | 800 cases processed annually | Court, District Attorney, Public Defender, Loaves and Fishes |

Limited Term Grant Programs

| Title | Who It's For | What It Includes | Length | Capacity | Agencies Involved |
|---|---|--|-----------------|----------------------|---|
| Expungement/Record Modification (HHAP Grant funds end June 2023) | Individuals experiencing homelessness with a criminal record. | Assessment of criminal records and filing petitions to clear and modify records to remove barriers criminal records create with housing, employment, education, and professional licenses. | 90 days | No capacity Limit | Public Defender, District Attorney, Probation, Court, HEAP partners, Loaves and Fishes |
| Public Defender Pretrial Support Program *Launched 4/2020 (Partially funded by Fed & State Grants) | Adults in custody and/or released pretrial pending criminal charges and suffering from mental illness. Support services also available to assist Probation's Pretrial Monitoring Clients, as needed. | Social workers embedded in the Public Defender's Office conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, housing and other support services, and provide ongoing case management support after release. Discharge support from the Exodus Project for individuals released from jail and linked to a Public Defender Social Worker includes transportation, cell phones, access to charging stations, food, clothing, and peer mentorship. | 0-6 months | No Cap | Courts, District Attorney, Public Defender, Health Services, Probation, Exodus Project (Contracted CBO) |
| DSH Felony Mental Health Diversion *Launched March 2021 (Grant funds end June 2023) | Defendants facing felony charges and diagnosed with schizophrenia, schizoaffective, or bipolar disorder; likely to become Incompetent to Stand Trial (IST) or found IST; and approved for participation by the Court under PC 1001.36. | <u>Telecare's EMPOWER program</u> includes clinical forensic and housing assessments, outpatient and/or residential services with case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, ongoing specialized mental health services, transportation, employment and education support. Housing provided to 50% of the clients. Social Worker Services provided through the Public Defender's Office. Each participant will have psychiatrist, MD, nurse practitioner, case manager, peer recovery coach, attorney, and social worker. Upon completion, case dismissed. | 12-24 months | 100 | Court, Public Defender, District Attorney, Health Services, Human Assistance, Telecare (Contracted Treatment Provider) |