



CHAIRPERSON  
Susan Wilson

EXECUTIVE OFFICER  
Jane Adcock

- **Advocacy**
- **Evaluation**
- **Inclusion**

# AB 109 Implementation:

A Follow-up look at how four California Counties continue to meet the challenges of the 2011 Public Safety Realignment Statute

By: Dorinda Wiseman, MSW  
and the Advocacy Committee  
members

MS 2706  
PO Box 997413  
Sacramento, CA 95899-7413  
916.323.4501  
fax 916.319.8030

The California Mental Health Planning Council (Council) is under federal and state mandate to advocate on behalf of adults with severe mental illness and children with severe emotional disturbance and their families. Our majority consumer and family member Council is also statutorily required to advise the Legislature on mental health issues, policies and priorities in California. The Council has long recognized disparity in mental health access, culturally-relevant treatment and the need to include physical health. The Council has advocated for mental health services that will address the issues of access and effective treatment with the attention and intensity they deserve if true recovery and overall wellness are to be attained and retained.

This report is a follow-up to determine what system changes, if any, that occurred in four counties in California, as a result of Assembly Bill 109 (AB 109) Public Safety Realignment (PSR) (Statutes of 2011).

The Council is committed to advocating for those living with mental illness and/or emotional disturbances and shining a light on positive changes to California's public mental health system. This report is an effort to revisit the four counties that were the subject of our prior AB 109 report, "Implementing AB 109: How Four California Counties Met the Challenge of the 2011 Public Safety Realignment in Their Communities." This report is one of the Council's many functions as a federal and state mandated entity.

Welfare and Institutions Code 5772(k)

To assess periodically the effect of realignment of mental health services and any other important changes in the state's mental health system, and to report its findings to the Legislature, the State Department of Health Care Services, local programs, and local boards, as appropriate.

## INTRODUCTION

According to the California Department of Corrections and Rehabilitation Fact Sheet distributed December 19, 2013, the 2011 Public Safety Realignment was “[t]he cornerstone of California’s solution to reduce prison overcrowding, costs, and recidivism.”<sup>1</sup> According to the Fact Sheet, the Realignment funding was “a dedicated and permanent revenue stream.”

In February 2013, the California Mental Health Planning Council (Council) published “Implementing AB 109: How Four California Counties met the Challenge of the 2011 Public Safety Realignment in Their Communities”. This report is being released to provide an update to what is happening now in the four counties.

The original report was the result of multiple face-to-face meetings that occurred in 2012 between the Council and representatives from the Sheriffs, Probation and Behavioral/Mental Health Departments in Los Angeles, San Mateo, Santa Clara, and Stanislaus Counties. The Council was interested in what the Public Safety Realignment (AB 109) implementation meant to the counties, what worked and what did not work.

The 2013 report illustrated the desire of the Counties to move progressively and positively toward increasing public safety, by decreasing crime rates and recidivism, as a result of AB 109. The Counties shared the frustration over the lack of consistent funding and the need for local discretion. In researching information for the 2013 report, we found the majority of AB 109 funding was spent on law enforcement and very little on needed support services for mental health and substance use. The 2013 Report noted the following,

“Counties that have minimal mental health services have no incentives to implement them, and, as the Legislative Analysts’ Office reported – the formula for funding to the counties essentially reward those that have the highest incarceration rates, not those that rely on preventative or rehabilitative measures. (Office, 2012)<sup>6</sup> Counties are only required to report on outcomes, not methods, and that requirement is not attached to any consequence for noncompliance.”

The purpose of this report is to provide a follow-up four (4) years later to the AB 109 activities and practices discussed in the 2013 report and the Counties’ current perception on the status of the AB 109 implementation. It should be acknowledged that for the two reports, the methodology in obtaining information is different. The 2013 report utilized a standard set of questions and face-to-face discussions with the counties. This 2016 report focuses on research and reports obtained from the internet and one-on-one dialogues between Council Staff and representatives of the Sheriff, Probation and Behavioral Health/Mental Health Departments for Los Angeles, San Mateo, Santa Clara, and Stanislaus Counties. The hope is to a) obtain county

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<sup>1</sup> California Department of Corrections and Rehabilitation Fact Sheet - [Link to website 2011 Public Safety Realignment](#)

perspective on the changes initiated by AB 109; b) learn about best practices that have been shared beyond the four counties; c) obtain information on budgetary changes within the county-level systems; and d) any ongoing concerns for which the Planning Council may take up advocacy.

## **BACKGROUND: CALIFORNIA MENTAL HEALTH PLANNING COUNCIL & PUBLIC SAFETY REALIGNMENT (AB 109)<sup>2</sup>**

The Council provides advocacy and review of the public mental health system and advises the Administration and Legislature on priority issues. Part of its mission is to educate the public and the mental health constituency about the current needs for public mental health services and ways to meet those needs.

California has had a statewide advisory board operating independently from the former State Department of Mental Health since the 1960s, providing public input into mental health policy development and planning for the public mental health system. Previously, as the California Council on Mental Health, the members helped develop and publish the 1<sup>st</sup> California Mental Health Master Plan in 1991. Key elements of system reform identified in the California Mental Health Master Plan were incorporated into the 1991 Realignment Legislation, including the need for county accountability and performance indicator language. In its present form -the California Mental Health Planning Council - was established in state statute in 1993, reflecting its increased responsibilities in monitoring the realigned mental health system, performance outcomes, and funding. The Council was designed to be an objective structure for public input, planning, and evaluation under realigned mental health programs. The Council published its initial findings – *Effects of Realignment on the Delivery of Mental Health Services* –in 1995. The Council also published the 2<sup>nd</sup> California Mental Health Master Plan in 2003, which informed many of the components of the Mental Health Services Act in 2004.

### **AB 109: REALIGNMENT OF 2011**

Unlike the 1991 Realignment, which focused on community mental health systems, just one of the areas of focus of the 2011 Realignment is on Criminal Justice and Rehabilitative services. Both were facilitated by a weak economy. California has struggled for years with prison overcrowding, massive staffing and oversight issues, and lawsuits that have created even higher demands on an already precarious system. As the state limped through one of the worst recessions in the nation's history, the Budget Act of 2011 added to the existing 1991 Realignment funding formula an allocation for the AB 109 Realignment design. It also called for optimized rehabilitative services through leveraged

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<sup>2</sup> *The 2012-13 Budget: The 2011 Realignment of Adult Offenders—An Update* – Legislative Analyst's Office February 2012  
 A [http://www.dhcs.ca.gov/services/MH/Documents/AB%20109%20Imp%20Feb%202013\\_FINAL.pdf](http://www.dhcs.ca.gov/services/MH/Documents/AB%20109%20Imp%20Feb%202013_FINAL.pdf)

resources, but created separate (protected) funding streams for each component. Per the California Department of Corrections and Rehabilitation (CDCR) Fact Sheet<sup>3</sup>,

“AB 109 provides a dedicated and permanent revenue stream to the counties through Vehicle License Fees and a portion of the State sales tax outlined in trailer bills AB 118 and Senate Bill 89. The latter provides revenue to counties for local public safety programs and the former establishes the Local Revenue Fund 2011(Fund) for counties to receive the revenues and appropriate funding for 2011 Public Safety Realignment. This funding became constitutionally guaranteed by California voters under the passage of Proposition 30 in 2012.” (Page 1)

### AB 109 PLANNING

Conservatively, the CDCR estimates that, of the prison population that has been evaluated, nearly 24% have been diagnosed with some form of mental illness. Nationally, six out of 10 inmates have substance use disorders, and it is likely that California’s inmates easily meet, if not exceed, that threshold.

Council members felt that the funding formula of 11% for the intensive rehabilitative services would be insufficient to avoid recidivism in the counties - one of the key stated goals of the legislation. (A complete breakdown on how counties allocated the 2011 funds can be found in Appendix 3.) Due to its concern over the limited funding counties allocated to necessary rehabilitative and support services, the Council sent a letter to the Chief Probation Officer of each county encouraging the county to support, as fully as possible, and/or to expand the rehabilitative services that promote reintegration into their communities in order to meet the mandate (see Appendix 4).

The Legislative Analyst’s Office has reported that the counties appeared to be allocating funds in the following pattern:

- 38% to the sheriff’s department, primarily for jail operations
- 32% to the probation department, primarily for supervision and programs
- 11% for programs and services provided by other agencies, such as substance abuse and mental health treatment, housing assistance, and employment services
- 9% for other services, including district attorney and public defender costs

<sup>3</sup> [California Department of Corrections and Rehabilitation fact sheet website link](#)

The Community Corrections Partnership (CCP) was part of Assembly Bill 117 (Chapter 39, Statutes of 2011) a companion bill to AB 109, was passed as part of the 2011-2012 budget. The statute required a “partnership between local public safety entities and the county to provide and expand the use of community-based supports for low-level offender populations. Each county’s Local CCP, as established in paragraph (2) of subdivision (b) of Section 1230, should play a critical role in developing programs and ensuring appropriate outcomes for low-level offenders.”<sup>4</sup> The implementing language of AB 109 detailed the intent and types of services that the realigned dollars were to fund. However, while the mandating language stated that the funds “shall” be used for providing rehabilitative services, the language describing the *types* of services converted to the more discretionary “may include” the following:

*(3) Funds allocated to probation pursuant to this act **shall** be used to provide supervision **and rehabilitative services** for adult felony offenders subject to probation, and shall be spent on evidence-based community corrections practices and programs, as defined in subdivision (d) of Section 1229, which **may** include, but are not limited to, the following:*

*(D) Expanding the availability of evidence-based rehabilitation programs including, but not limited to, drug and alcohol treatment, mental health treatment, anger management, cognitive behavior programs, and job training and employment services.*

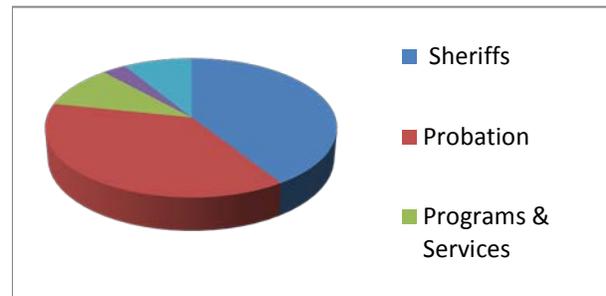
#### **California Penal Code: Section 1230 (3) (D)**

The CCPs were created with the concept/framework of allowing local governments to develop correctional supervision programs, in order to allow for flexibility for each county’s individual need(s). Given the permissive phrasing of the California Penal Code Section 1230 (3)(D), the Council was very interested in knowing how the mental health and substance use disorders needs in these populations would be met, both in 2012 and in 2016.

#### **2012: The AB 109 Forums**

The Council held forums at their meetings in April and June of 2012. The first forum focused on Los Angeles County and a comprehensive overview of each department’s (Sheriff, Probation, and Mental Health Department) role and their implementation

**\*How CCPs allocated first-year AB 109 Funding:**



\*Based on the 20 counties whose plans are on

[Web link to CalRealignment.org](http://CalRealignment.org) as of October 15, 2012

<sup>4</sup> Assembly Bill No. 117, Criminal Justice realignment, Chapter 39 (2011) [Web link to AB 117 text](#)

process. In an effort to get a broader cross section of county experiences, the Council invited three more counties to present at its June meeting -Santa Clara, San Mateo, and Stanislaus counties also provided representation from their Sheriff, Probation and Mental Health Departments. All participants were asked to respond to the following structured questions, followed by extemporaneous questions from Council members and the audience.

1. Please describe the successes/challenges of the collaboration process.
2. What is the perspective of what the Department envisions AB 109 to be like in five (5) years?
3. What/how have your County budgets shifted/adapted to the collaborative efforts?
4. What innovations/programs do you consider *successful*?
5. What surprised the Department about collaborating for this endeavor?
6. What would the Department like communicated to the legislature?

### **2016: The AB 109 Updates**

For the update four years later, the original counties, Los Angeles, Santa Clara, San Mateo and Stanislaus, were requested to participate in conference calls and/or provide written responses to the same six questions. This process differed from the initial report in that there was no face-to-face contact with the Council.

This year, staff also obtained information provided by the Board of State and Community Correction (BSCC) regarding implementation of the 2011 Criminal Justice Realignment. The BSCC is legislatively mandated to provide an annual report to the Governor and Legislature regarding each county's CCP implementation plan. The BSCC has conducted surveys of the counties each year since 2012.

“Each county was asked to provide information about the implementation of its Fiscal Year (FY) 2014-2015 CCP Plan, progress in achieving outcome measures, programs and services, and funding priorities and plans for FY 2015-16 allocation of funds AB 93, Chapter 10, Statutes of 2015). All 58 counties responded to this survey providing varying detail on local goals, outcome measures, fiscal information, and local best practices.

Since Realignment, each county has taken a unique style to developing its local public safety approach. Diverse approaches, include funding allocations, target populations, community stakeholders, and goals, are described throughout the report. The remainder of the report includes Individual County Profiles and an Appendix consisting of a Glossary of Terms and the FY 2015-16 CCP survey. ((BSCC), 2016)”

The BSCC published the [2011 Public Safety Realignment Act: Fourth Annual Report on the Implementation of Community Corrections Partnership Plans, July 2016 \(web link\)](#). The primary function of this report was to provide state leaders and the public with an understanding on how realignment allocations were utilized at the local level. This

year's report covers "a range of topics, including CCP membership, Fiscal Year (FY) 2014-15 and FY 2015-16 Realignment allocations, and goals and objectives. For the first time, this year's survey included optional questions regarding the counties processes for determining program evaluation and local capacity to offer services." The BSCC report provides a "high-level overview" of implementation efforts at the local level. There are no conclusions explicitly made regarding pressing concerns or illumination of promising practices. The Council was able to glean concrete budget and service provision for each county represented in this report.

In the following section, the four counties (Los Angeles, San Mateo, Santa Clara and Stanislaus) provide their current perspectives on how the implementation of AB 109 has impacted their communities. Additionally, the counties also provide a glimpse into the culture of change in how service is provided to individuals involved with the criminal justice system that are also impacted by mental illness.

### **1. Please describe the challenges/successes of the collaboration.**

The Counties were asked to provide insight on any barriers faced and successes achieved with implementation of AB 109. Many of the counties voiced challenges regarding employment, information gathering and sharing, service providers and quality of services and resources available to the AB 109 population. As in the 2012 report, the counties continue to see many of the individuals in this population having complex issues. The counties continue to state they work collaboratively with county and contracted support services to assist this population.

Employment - There is a lack of employment options for individuals with criminal histories. Los Angeles County Probation indicated, "We have an effort soon to try and remedy some of those barriers. We have a contract with Health Rite 360."

Data is not easily shared or accessible across county departments or within the state across jurisdictional lines. Los Angeles County Probation stated, "There is not a common data base about this population. The case management system does not exist at this time." Santa Clara County advised that a challenge from the beginning has been "data collection" and "the sharing of information" across agencies. Santa Clara County is looking "at San Diego's referral system" as a possible option. Santa Clara County also stated, the assessment tool Law Enforcement utilized was unfamiliar to those working in mental health. Thus, there was a learning curve for the Mental Health professionals to learn new jargon in order to make appropriate assessments, based on the Criminal Justice assessment tools.

Population – A CDCR Fact Sheet delineates the type of offender to participate in the AB 109 Realignment process. "AB 109 allows non-violent, non-serious, and non-sex offenders to serve their sentence in county jails instead of state prisons." The Counties resoundingly advised of the use of the *non-violent, non-serious* in

many of their cases **only** pertained to the current offense for many offenders being released under the program. The Counties stated that many of those being released had significant criminal histories that would not be deemed as “non-violent” if the prior criminal offenses/convictions were used in the assessment.

Service Providers - The lack of service providers willing to deal with this population, including those completing their parole, is of great concern. The Counties acknowledged the limited number of services that are available to individuals while on parole. However, the Counties also advised of having success with many individuals and would like to see the successes go beyond parole. The continuity of care beyond the parole period is often in question as the number of providers in the community that willingly work with this population are not in abundance.

There were successes voiced during the discussions. The successes were varied, yet all counties indicated increases in communication and collaboration between county agencies. Additionally, there was the thread of commonality between the counties in their desire to provide *optimal* services that will result in successful outcomes for this population. Further, there is an ongoing need to provide consistent and accurate bi-directional information between Community-Based Organizations (CBOs), external county partners and the State Prisons. Communication was discussed as both an on-going barrier and a measure of success. The barriers continue when the counties discussed their inability to **directly** share information regarding an individual’s complete health due to the Health Insurance Portability and Accountability Act (HIPAA). Some counties have developed Behavioral Health Teams within their criminal justice systems and have endeavored to work with their correctional counterparts within team-oriented settings. Many of these teams are co-located, both inside and outside of penal facilities.

Perception - The Los Angeles County Probation staff who were interviewed continually referred to “the individual” as opposed to ‘parolee, felon or criminal’ in their discussion of where their efforts have taken them. The significance of the use of such personalized language illustrates how the Department has made a commitment to view ex-offenders as members of the community, as opposed to ‘criminals, parolees or felons.’ Santa Clara County’s Probation and Sheriff’s Department requesting the Mental Health Department to “support their clients” evidenced another tangible aspect of change and growth. The shift in recognizing the value in bringing the mental health providers to serve this population was essential, as the inclusion of mental health did not occur prior to AB 109 implementation efforts.

Accountability - Another critical success mentioned, “There is a lot more accountability.” This accountability is valued as a means to improve relationships, communication and perception both internally and externally in the counties in *how business is done*, not only with this population, but with all of its citizens.

Relationship - According to Javier Aguirre, Director of Re-Entry, Office of Re-Entry in Santa Clara County, the success can be measured in the “on-going relationships between departments” within the county. The total Santa Clara County budget is “leveraged with other funds, to include General Fund, Sales Tax, a two million grant from the state” and a supportive Board of Supervisors. “Over the years, the percentage of Treatment Services funding has increased and the percentage to Sheriff and Probation has decreased.” Prior to AB 109 realignment implementation, the budget for law enforcement would have received the lion’s share of funding, in comparison to treatment services.

Duplication of Data collection – each county expressed issues of their efforts to collect data, issues with how duplicative much of their data collection efforts have become and/or the language translation needed with the various professions involved with data collection. One such example was the assessment tool. Dependent on which agency was the lead, the jargon of that profession was used. To address this, some counties chose to train the staff of the non-lead agency; other counties have attempted to work collaboratively on the assessment tool in order to meet evaluation and program needs.

## **2. What is the perspective of what the Department envisions AB 109 to be like in five (5) years?**

The Los Angeles County participants stated they want “to continue with collaborative relationships.” There is also the desire to continue to see the mental health entities working with substance use and increasing “specialized programs for co-occurring treatment needs.” They would like to continue and to increase working with the Court and the Court Linkage Program; continued provider training for individuals and community providers working with this population; Jail In-Reach (Community Readiness Group) to increase the number of individuals participating prior to their release; continued “creative” innovative programs; and centralized access to care through Medicaid expansion, due to the Affordable Care Act (ACA).

According to San Mateo County’s Chief Probation Officer, Chief Keene, “Currently, there is a downward trend in the number of offenders released from state prison into their own communities, and it is anticipated that this trend will be sustained for a while. What we are looking at, as a Department, is the increase in those that commit crimes and reenter the criminal justice system, so even more transitional services such as housing and employment are needed. Also, with the continued rise in home prices in the bay area, more and more of our clients are becoming transient with no permanent place or keys to call home, which makes it difficult for the probation officers to supervise them. More attention should be focused on providing more affordable permanent, not just transitional, housing units to this population.” When this basic need is fulfilled, it provides a foundation upon which the rest of their successes can build.

Behavioral Health Director Tullys, of Santa Clara County, advised that AB 109 funding would remain an integral component to their behavioral health funding. She also indicated they hope to increase their Peer Support Workers “into our staffing mix. There will be a lot of strategic forward-looking thinking [funding], a lot of diversion programs” and engagement in the National STEP-UP Initiative. Director of Re-Entry, Aguirre advised their county was in the process of developing/conducting a five-year evaluation of AB 109 efforts. It is anticipated that the results of the evaluation will inform planning for the next five years.

Los Angeles Chief Probation Officer Bingham advised that within five years, this will be the “new normal. This is embedded in the Criminal Justice model.” With every experience, connection and collaboration, the County, is “refining” how services are delivered. Additionally, he foresees a more “fine-tuned” approach. Chief Bingham advised that more legislation is moving us away from incarceration and toward, an increase in specialized service delivery and increased use of Evidence-Based practices.

### **3. What/how have your budgets shifted/adapted to the collaborative efforts?**

Chief Keene, et al. advised, “In order to address client and collaboration needs, the Probation Department has increased the number of staff supporting the AB 109 unit by adding more Deputy Probation Officers, including a Senior Deputy Probation Officer as well as fiscal and data analyst staff. The Department has also implemented some evidence based programs such as journaling to assist clients in their successful reintegration into their communities.”

The Los Angeles County AB 109 efforts are reported on and provided to their Board of Supervisors on a continual basis. The Countywide Criminal Justice Coordination Committee submits their “Public Safety Realignment Implementation” report.<sup>5</sup> The report summarizes the prior fiscal quarter and the activities of the Probation Department, Department of Public Health-Substance Abuse Prevention and Control (DPH-SAPC), Department of Mental Health (DMH), Department of Health Services (DHS) Sheriff’s Department-Parole Compliance Team (PCT), Sheriff’s Department-Custody Operations, District Attorney’s Office and Other Updates. The January 2016 Update included information on the Probation Department’s “Request for Services (RFS) solicitation to launch the AB 109 evaluation study.”

Santa Clara County advised their budgets were leveraged with other funds (e.g. General Fund, sales tax, \$2 million state grant, etc.) in their prior year AB 109 budgets. Director Tullys stated that there is new and other funding available “to create more treatment facilities.”

According to Michael Wilson, LMFT, Forensic Manager, Stanislaus County Behavioral Health and Recovery Services (BHRS), Stanislaus County began their AB 109 efforts “strong and we’ve continued to grow.” Mr. Wilson advised the mental health budget is

<sup>5</sup> [Countywide Criminal Justice Coordination Committee report January 2016 link](#)

approximately 2 million per year. This is an “approximate allocation from the AB 109 Budget to provide behavioral health services (both mental health and substance abuse services) for the AB 109 efforts.” Stanislaus County seeks to continue improving their efforts and will utilize outcomes to determine best practices. The county has a crime analyst paid position and incorporates booking data from the Sheriff’s Department into their reports.

#### **4. What innovations/programs do you consider *successful*?**

Ms. Marx of Los Angeles County advised there are Mental Health Teams that Probation has organized that “go out to Mental Health sites,” and there are four new Forensic Full-Service partnerships. Additionally, under SB 82, Los Angeles County has been awarded funding for four new Urgent Care and 35 Crisis Residential programs.

Per Chief Keene, et al., “In January 2015, the County re-opened the David Lewis Community Reentry Center in East Palo Alto. This Center serves as a hub for services focused on those coming from prison and back into their communities, in an area with the highest need in the County. Each service component offered in the Center is evidence-based or a best practice and shown to be important to changing lives and reducing recidivism.

Santa Clara County identified its Re-Entry Center and an “array of [outpatient] programs” that have been funded by AB 109 funding. Director Tullys advised there is a connection with faith-based organizations and there will be an expansion of services to faith-based centers within the next five years. Director Tullys lauded the partnerships, established by Behavioral Health, have made many of these collaborations possible. The county is leveraging AB 109 and Mental Health funding. Director Aguirre cited the success of entering into the jails and correctional facilities. This connection allows for access/contact with AB 109 participants, prior to release, further augmenting the potential for success.

In San Mateo County, multi-disciplinary team meetings coordinate these transitions. Emergency support and benefits enrollment will address immediate and pressing physical needs, such as food, shelter, clothing, etc. Employment services, health care, mental health and substance use treatment, housing, family reunification, cognitive therapies, and education will address the root causes and triggers of criminal behavior. Delivered and monitored in a unified system, they provide a strong foundation upon which county residents returning from incarceration can rebuild their lives. Staff from the San Mateo County Health System's Behavioral Health and Recovery Services Division are currently working with the California Department of Corrections and Rehabilitation to provide the same services mentioned to those on parole.

Stanislaus County is quite proud of their innovative programs. Mr. Wilson spoke of the working relationship with Probation that is quite positive and beneficial. He also mentioned the following as examples of success: Large Wrap-Around Program; Full

Service Partnership; Housing First Model; and Monthly Restorative (Community) meetings.

### **5. What surprised the Department about collaborating for this endeavor?**

Ms. Marx advised the Mental Health workers' interaction with Probation Officers have developed into "good working relationships with providers." She also stated that this effort has helped with bridging some of the community barriers of offering services 'outside-of-the-box.'

Chief Keene, et al. of San Mateo County indicated, "San Mateo County has always prided itself in its collaborative nature, even before the onset of AB 109. Departments within the county, as well as the community, have historically worked together to achieve solutions and bring resources to its neighborhoods. The onset of AB109 has only strengthened the collaborative nature of the County, we continue to learn from each other, and share resources that will help our clients have the best results to become productive members of their own communities. We have gained more in-depth knowledge of other departments' programs, such as behavioral health and the human services agency and have implemented various Memorandums of Understanding to ensure that there is a continued delivery of services including counseling, health coverage and employment services."

Chief Bingham was asked if there was one thing to be done differently with AB 109, what he would suggest. He advised a "forewarning on the type of individuals and their illness" would have been helpful. He advised of a large population of individuals with respirators, who were medically fragile, or in wheelchairs, etc. that added additional complexities to the work to be done.

According to Director Aguirre, he was not surprised with the level of collaboration. "We have a strong Chief Operating Officer (COO)...brought everyone together." Due to the strong leadership, Director Aguirre believes there was "better understanding of who we were working with" when AB 109 efforts began. He did advise there was a learning curve from the Mental Health staff as they were not used to the same screening tool as their law enforcement colleagues. Due to the difference in jargon, there were some adaptations to be made with the screening tool.

Director Tullys further advised there are continuous improvements to be made. She advised that the "next big step" is dealing with the post-custody population and diversion programs. There are facilities that need to be "upgraded" to accommodate substance use residential and co-occurring residential programs. She advised their goal is to "keep people out of jail." The one issue that did surprise the county was the number, intensity and complexity of medical issues among the AB 109 population. This concern was voiced during the 2012 forums, as well as, by Los Angeles County four (4) years following the initial Council forum on the impact of AB 109 Realignment.

## 6. What would the Department like communicated to the Legislature?

Ms. Marx would like to see dedicated funding for beds. Due to the changes in the Criminal Justice System since 2010, there has been an increased demand on the resources that are impacted by non-AB 109 populations. For example, the Restore to Competency 1370/Conservatorship needs have dramatically increased; the IMD length of stay has increased as there are limited or no placements available for aftercare or step-down services; the type and severity of issues has increased the complexity of needs for the population.

San Mateo County stated there needs to be “[m]ore technical and funding assistance for a larger data collection and analysis on this population. Since there is a need to provide a whole picture of how this population moves throughout our communities, there is a need to conduct a regional, if not statewide, study on how this population has done since their release from prison.”

Director Tullys of Santa Clara advised the “funding has changed lives and is meeting people’s behavioral health needs. Santa Clara County has an “extraordinary funding stream to do important work.” Director Aguirre advised the focus is on the “need for treatment.” There are barriers associated with treatment capacity, the housing market, permanent supportive housing, however the county is committed to providing integrated services for all of its citizens.

Stanislaus County advised there needs to be more unified definitions for ‘recidivism’ and ‘homelessness statuses’. If there were more “firm definitions and operational definitions,” there would possibly be less confusion. Mr. Wilson also mentioned if the State advised what it was looking for regarding outcome specifics that could appeal to broader research and national issues.

## CONCLUSION

In the 2012 report, the Council wanted “to ensure that the Administration and counties do not lose sight of the primary goal of the Criminal Justice Realignment, which is to reduce recidivism, preferably by investing in rehabilitative services. (Murphy, 2012)” There was great concern that the efforts of the 2011 Realignment could further stigmatize individuals suffering with mental illness, as public misconceptions about mental illness and involvement with the criminal justice system has been exacerbated by numerous high-profile mass shootings<sup>6</sup>. The media continues to portray the perpetrators of such acts as violent criminals with mental illness, which thus caused them to act in heinous ways. As noted in a presentation at the Forensic Mental Health Association of California Conference, 2016, people with mental illness are “more likely to be victims of crime than perpetrators” of a crime (Barnhorst, 2016).

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<sup>6</sup> [Mass Shootings and the mental Health System - link](#)

The Council's 2012 report identified the following recommendations:

- Health Conditions: Physical, Mental, and Substance Use Disorder - The Administration needs to clarify permissible funding sources to counties so they can provide the services for this often aging and "high needs" population. The Council also cautions against an over-reliance on Medi-Cal and county Low Income Health Programs, whose needs assessments and service plans were based on numbers that preceded the Post-Release Supervision population.
- Training Needs for Community Partners - POST-Training should include educating street level police officers and first responders on available services for parolees. Additionally, school personnel should be trained on recognizing and referring for trauma services for children of incarcerated and post-release individuals.
- Related Supportive Services - Community Corrections Partnership panel should include a parolee who has successfully rehabilitated and a family member so that proposed services can be considered from informed perspectives.

Based upon the information gleaned and concerns expressed during the contact with the counties in 2016, there remains treatment and service continuity for individuals with complex health (physical, mental and/or substance use disorders) concerns. Additionally, there is an ever increasing population of geriatric individuals with complex needs associated with health and age. Due to the braiding of funding in many counties, there seems to be a reliance on federal and state grants/aid to fund various aspects of health treatment. Regarding the need for training community partners, there was specific attention given to first responders and school personnel. In speaking with the counties four years later, the community partners that are needing education are the service providers serving and treating this population. The experiences of incarcerated persons are vastly different from many other cultural groups. The 2012 report also included a recommendation for a parolee should be included on the Community Corrections Partnership panels. This paper did not focus on the Community Corrections Partnerships, however it appears the counties are working towards further integration of persons with lived experience to function in greater roles, in this endeavor to reduce recidivism, and for those individuals with mental illness that also have criminal justice histories.

The overarching themes that emerged in this report, from the conversations with these four (4) counties, was a sense of hope, collaboration and a need for increased communication, data, as well as, sufficient financing.

**Communication:** many of the counties expressed the need for transparent and efficient communication between the State and counties, as well as, intra-county communications. Many individuals in this population are transient for varying reasons.

**Data:** many of the counties expressed a need to share important information regarding the client; however, HIPAA regulations have hindered many well-meaning efforts. Many

county partners are finding ways to work through the barriers. There is also a desire to share information across county lines throughout the state, when necessary. Many clients move throughout the state and resources are inconsistent in availability and efficacy. Lastly, data needs to be collected with common data elements. There are many repetitive data collection efforts that increase the workload, and are obtaining redundant information. Can the data requests be streamlined?

Sufficient financing: there was a resounding request for sufficient funding for programs, to include transitional/supportive efforts, housing options, vocational, and educational services, etc. The overwhelming need for supportive services and treatment and housing cannot be met with the present funding levels, regardless of the source(s).

For a more concise snapshot of the counties highlighted in this white paper, please click on the link below to the *2011 Public Safety Realignment Act: Fourth Annual report on the Implementation of Community Corrections Partnership (July 2016)*. The report contains information regarding County goals, objectives, budgets, programs and responses to survey questions. [Click for link to the BSCC 2011 Public Safety Realignment Act 2016 report](#)

Los Angeles County - pages 98-105      San Mateo County - pages 216-223  
Santa Clara County - pages 230-240      Stanislaus County - pages 272-280

#### Glossary of website links:

California Department of Corrections and Rehabilitation Fact Sheet:  
<http://www.cdcr.ca.gov/realignment/docs/Realignment-Fact-Sheet.pdf>

CalRealignment.org A project of Californians for Safety and Justice  
<http://www.safeandjust.org/CalRealignment>

California Legislative Information: AB 117 Criminal justice realignment. (2011-2012)  
[http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill\\_id=201120120AB117](http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201120120AB117)

Board of State and Community Corrections (BSCC) 2011 Public Safety Realignment Act 2016 report:  
<http://www.bscc.ca.gov/downloads/Fourth%20Annual%20Report%20on%20the%20Implementation%20of%20Community%20Corrections%20Partnership%20Plans.pdf>

County of Los Angeles Countywide Criminal Justice Coordination Committee  
<http://ccjcc.lacounty.gov/LinkClick.aspx?fileticket=xDhBfvDb6YY%3d&portalid=11>

Mass Shootings and the Mental Health System – Amy Barnhorst, MD, University of California – Davis, Department of Psychiatry  
<http://www.fmhac.net/Assets/Documents/2016/Handouts/Barnhorst%20Slides.pdf>

## References

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- Barnhorst, A. M. (2016). *Mass Shootings and the Mental Health System*. Monterey, California: University of California, Davis.
- Murphy, A. (2012). *AB 109 Implementation The First year: How Four California Counties Met the Challenge of the 2011 Public Safety Realignment in Their Communities*. Sacramento, California: California Mental Health Planning Council.
- Office, L. A. (2012, February). *The 2012-13 Budget: The 2011 Realignment of Adult Offenders - An Update*. Retrieved 2012