# Proposition 47 - CAFES Program

Santa Cruz County Probation Department Two-Year Preliminary Evaluation Report (August 15, 2019 – March 31, 2021)

August 2021





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# Reporting Period: August 15, 2019 - March 31, 2021

### **Executive Summary**

The CAFES (Coordinated Access for Empowering Success) program was launched as a trauma-informed, evidence-based, multi-agency continuum of care model to expand and enhance services for underserved populations, focusing on first-time offenders, those who have been ruled out of specialty mental health treatment services, and those who do not receive funding through other sources such as AB 109 or Drug Medi-Cal. The CAFES project targets a significant gap in Santa Cruz County's services for justice-involved individuals, providing diversion opportunities and/or access to substance use treatment and mental health support, case management, peer support, and housing and employment support. Partners for the CAFES continuum include a robust collaboration between Probation, the District Attorney's Office, Health Services Agency, the Superior Court, community-based organizations, and others as needed. Eligibility for CAFES services is based on the severity of charge for those who are arrested or cited for low-level and non-violent crimes, who have a criminal history with no prior "strikes," and who have identified mental health and substance use needs.

Ultimately, the goal of CAFES is to improve existing systems and collaboration efforts through joint community trainings in order to reduce the number adults who enter the justice system by providing necessary treatment and support before they have committed a serious offense rather than after. By dedicating resources for upstream interventions early in the judicial process, CAFES intends to reduce the likelihood of further downstream engagement in the justice system.

#### Major Findings to Date

Below is a brief summary of major findings in each of the program's goal areas:

#### **Goal 1: Increase Diversion Opportunities**

The Neighborhood Court (NHC) program was implemented, with participant panels/conferences beginning December 2020. As of March 31, 2021, thirty-three percent (33%) of NHC participants successfully completed the program, with another 58% still in process. Among eleven (11) volunteers who were trained to participate as panelists and who completed the post-training survey, one hundred percent (100%) reported increased understanding of restorative justice and improved capacity to implement restorative justice practices as a result of the training.

Goal 2: Reduce Recidivism and Improve Individual and Community Health and Well-Being CAFES authorized as eligible to receive services, one hundred and ninety-seven (197) justice-involved adults between January 1, 2020 to March 31, 2021. Seventy-five (75) individuals were served by the Probation Service Center and one hundred and sixty-seven (167) clients received case management and support services. Among one hundred and ninety (190) clients referred and enrolled in treatment, seventeen percent (17%) completed treatment as of March 31, 2021. Of the one hundred and ninety-seven (197) people authorized for CAFES, eight (8) recidivated (4%), based on the BSCC definition of recidivism. (All eight (8) clients were on formal probation, not assigned to diversion). Individuals screened and deemed to be ineligible for CAFES were referred (and often connected) with alternative funding sources when available.

Goal 3: Improve Existing Systems and Collaboration Efforts for those in Criminal Justice System
Two hundred and fifty-six (256) duplicated staff and volunteers representing a total of eighteen (18)
partner agencies have participated in trainings offered by Encompass Community Services (as of
March 31, 2021). Among one hundred and thirty-six (136) participants who completed the post-



training survey, ninety-three percent (93%) reported increased understanding of the topic as a result of the training. There was representation from 100% of the grant funded agencies and each agency had no less than one representative attend at least one of the community trainings offered. Several agencies were able to accommodate multiple staff attending multiple training topics.

#### **Program Accomplishments**

During this reporting period, the CAFES program successfully launched with program funded staff hired, program activities implemented, and ongoing evaluation underway. Some highlights of the progress that has been made towards the program goals include:

- Neighborhood Courts (NHC) program developed, staffed, and launched. Research was
  conducted and connections were made with established NHC programs in San Francisco
  and Yolo counties. These connections facilitated the utilization and adaptation of their
  materials and best practices to meet local needs. Additional research included identifying
  funding sources to accomplish appropriate local directives to repair victim or community
  harm, as well as build participant capacity. A volunteer panelist training was developed in
  partnership with the District Attorney's Office (DAO), the Conflict Resolution Center (CRC),
  and Encompass Community Services. Conferences have begun taking place and participants
  are successfully completing the program.
- Mental Health diversion has been implemented and Collaborative Courts have been expanded. Increase in service engagement for the pretrial population is reducing potential penalties and creating potential diversion from further system involvement.
- Access to substance use disorder (SUD) treatment has been expanded and services have been enhanced. Non-Medi-Cal funded individuals or those eligible for other specialty funding have greater access to SUD treatment as well as enhanced services at existing treatment providers (for example: clinical support and employment support services at New Life).
- Peer support, system navigation, discharge planning, and service connection have been enhanced and expanded. Program funded positions that support participants/clients have been very active in facilitating these services despite the unexpected barriers that arose due to COVID-19 safety measures.
- Collective trainings have provided ongoing capacity building of all systems partners. The program capacity building activities have led to new and innovative opportunities including the implementation of the Racial Equity Project, which seeks to reduce disparities for those who are system-involved on a larger scale.

#### Challenges

During this reporting period, the CAFES program faced several factors which impeded its progress. Here is an overview of the major factors and how they were addressed:

- COVID-19 and the related safety measures have been by and large the biggest impediment towards progress in meeting program goals. While COVID-19 has continued to delay progress by slowing hiring, assessments, screenings, and connections to services it did not stop these activities.
  - Workflow and staffing changes were experienced by all partners and associated systems as a result of COVID-19. Safety measures inhibited most direct client contact, communication, and meetings, necessitating workarounds and adjustments on many levels. Primarily shifting to remote work and virtual meetings, partners were able to continue to connect, strategize, and move the program forward. Shifting to a telehealth model allowed connection to some individuals who often experience



- transportation challenges (removing one barrier). At the same time, reliance on technology highlighted a new and growing technological gap, particularly with those with unstable housing.
- o Similarly, changes within the related systems also impacted program partners and progress towards goals. For example, lower-level crimes (e.g., simple drug possession, under the influence, misdemeanor property crimes, etc.) were not being booked into the jail as they previously were, and assessments intended to be conducted in court at arraignment or early appearance, shifted to be conducted via telephone and at the jail. A lack of rapid COVID-19 screening delayed or inhibited program placements, particularly in residential settings. Transportation to programs given social distancing efforts was also a new challenge to navigate for all partners. For all these issues, program staff have been responsive and innovative. Utilizing texting, meeting clients outdoors, staggered scheduling and safe drop-in hours provided new ways of bridging connection between program partners and between providers and participants and are just a few of the ways the work has been able to forge ahead.
- The CZU Complex fires that occurred locally in August 2020 impacted the entire
  community, at times compounding challenges already faced. This additional disaster, which
  caused wide-spread evacuations and destruction, impacted clients, staff, and services
  across the County. The impact will likely be long-term, with risk of flooding during the rainy
  season likely to lead to subsequent evacuations. Additionally, limited housing options
  (particularly those affordable to lower income) in Santa Cruz County complicated by the
  growing need of evacuated families or those whose homes were lost.
- The stress of COVID-19, exacerbated by the wildfires, has triggered trauma for staff, participants, and the community at large. For some clients, this resulted in increased symptoms of mental health or substance use disorders to a more acute level all while resources and response time slowed. Program partner, Encompass Community Services, provided virtual spaces for partners to reflect, connect, and support healing. Providers working with clients recognized this need and worked with partners to provide the necessary supports.

#### Conclusion

Despite the major, unexpected challenges that have come up during this first phase of the program, CAFES is actively implementing strategies to reduce downstream engagement in the justice system. This program is forging new partnerships, creating new programs, funding new positions, and actively building the capacity of providers and systems to promote prevention and well-being.

# **Project Background**

The CAFES program intends to serve 450 individuals annually over the four-year grant period. The focus for direct services is on low-level offenders and underserved criminal justice-involved adults with mental health (MH) or substance use disorders (SUDs) who do not qualify for specialized services. CAFES participants may receive one-time interventions or ongoing supportive services. Additionally, building the capacity of community partners by enhancing the quality of existing services and implementing early MH/SUD screenings provides a broader reach to connect many more individuals to appropriate services. CAFES clients are referred to the program by attorneys, judges, Probation staff, Collaborative Court staff, local community-based organizations, and by self-referral. Clients are eligible to participate in restorative justice programs, receive MH treatment, SUD



treatment, case management, peer support, and housing support based on established criteria and assessed need.

The CAFES program supports clients by funding a continuum of diversion and reentry services tailored to their individual MH, SUD, and other basic needs. The combination of these efforts is intended to create long-term and system-wide changes in how adults with MH and SUD needs who commit low-level offenses are treated when they interact with the criminal justice system. The first change is to emphasize prevention by expanding diversion opportunities to address root causes, early intervention, and accelerated services. The second change is to establish an organized continuum of care centered on a hub or "one stop" model (rather than a fragmented set of services), and the third change is to shift the system's attention from punishment toward a focus on community health and well-being including victim/survivor reparation.

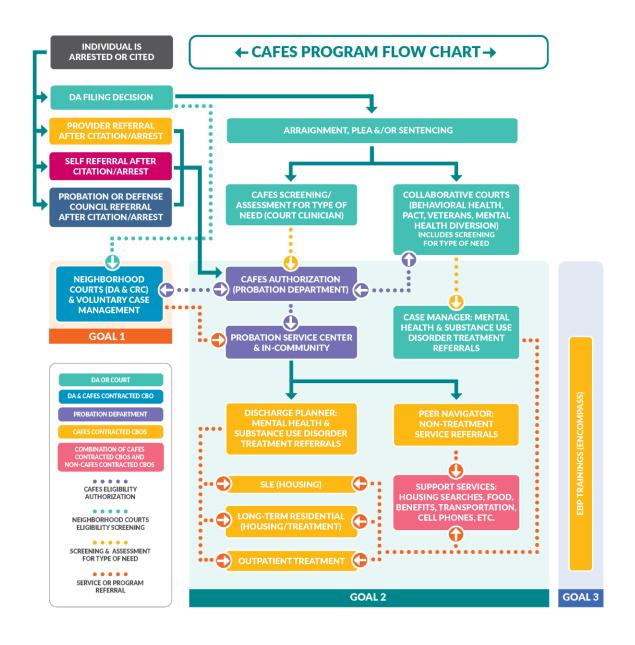
#### **Program Goals**

The three goals of the CAFES program are to 1) increase diversion opportunities to minimize entry into the criminal justice system for low-level crimes related to clients' substance use disorders and mental health needs, 2) reduce recidivism and improve individual and community health and well-being, and 3) improve existing systems and collaboration efforts for those in criminal justice system.

#### Flow Chart of the CAFES Program and Goals

As shown in the CAFES flow chart below, there are many doors into the CAFES program, and once authorized, clients are screened and assessed to determine the pathway to their treatment and support service needs, and then referred and enrolled in the appropriate interventions.





The goals and objectives detailed below are drawn from the workplan submitted with the CAFES proposal and approved by the BSCC. See the Evaluation Results and Discussion section for additional information related to progress on work plan.

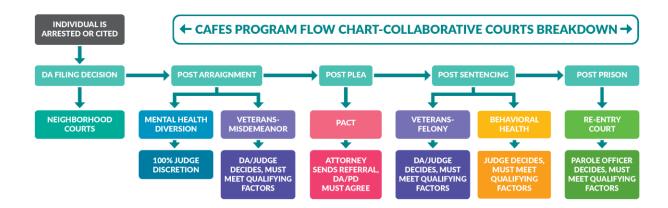
#### **GOAL 1: INCREASE DIVERSION OPPORTUNITIES**

Increase diversion opportunities to minimize entry into the criminal justice system for low-level crimes related to clients' substance use disorders and mental health needs.



# Objective 1.1: Create diversion pathways pre-conviction and/or pre-filing that redirect low-level individuals to appropriate treatment interventions and community resources.

- Create eligibility criteria: District Attorney's Office to create eligibility criteria for potential Neighborhood Court Model opportunities.
- Train RJ/NHC system partners.
- Establish RJ/NHC referral and follow-up procedures.



# Objective 1.2: Implement restorative justice practices to support offender behavior change and repair harm to survivors of crime (i.e., Neighborhood Courts).

- Recruit volunteers for Neighborhood Court.
- Train volunteers.
- Locate NHC sites.
- Support clients to complete NHC or diversion requirements.
- Provide restitution & reparation to crime survivors and/or community (as appropriate).

# GOAL 2: REDUCE RECIDIVISM AND IMPROVE INDIVIDUAL AND COMMUNITY HEALTH AND - WELL-BEING

# Objective 2.1: Divert underserved criminal justice-involved individuals with MH/SUD from further system involvement.

- Provide court-based screening and assessment to determine placement in Collaborative Court or RJ program.
- Initiate RJ programming.

# Objective 2.2: Improve life outcomes for underserved criminal justice-involved individuals with MH/SUD and the survivors of their crimes.

- Provide screening and assessment for MH/SUD, housing and employment needs.
- Discharge planning for clients.
- Provide treatment: culturally responsive, trauma informed, client centered, comprehensive treatments and services.
- Place clients in sober living environments.
- Provide peer support to clients.

# GOAL 3: IMPROVE EXISTING SYSTEMS AND COLLABORATION EFFORTS FOR THOSE IN CRIMINAL JUSTICE SYSTEM



# Objective 3.1: Build the capacity of a multidisciplinary system that addresses the needs of underserved criminal justice-involved individuals with MH/SUD.

- Execute partner CBO contracts.
- Recruit & hire staff.
- Recruit additional Advisory Committee members: Recruit members and set up work groups to implement data-based decision making.
- · Launch community trainings.
- Finalize local evaluation plan, begin data collection, analyze & disseminate findings. .

### **Evaluation Methods and Design**

As part of the evaluation process, the external evaluators, Applied Survey Research (ASR), confirmed key outcomes and developed tools to measure outcomes in accordance with best practices. The program's evaluation employs a mixed-methods design, utilizing quantitative and qualitative data to assess the various overall program measures' progress toward accomplishing outputs and outcomes associated with implementation. Process and outcome measures of the evaluation utilize data from multiple sources and perspectives (case management records, assessments, surveys, key informant interviews).

#### **Key Evaluation Questions**

ASR's evaluation seeks to answer the following overarching questions related to the design, implementation, and outcomes of the CAFES program.

#### Design & Implementation: What has the CAFES program done?

- 1) When and to what degree did program services launch (e.g., new staff hired, protocols and policies created, programs begun)? What circumstances have limited or slowed implementation, if any?
- 2) How many people have been deemed eligible for CAFES and referred to CAFES-funded services? What are their distinguishing characteristics? (e.g., arrest records, pre-filing/preconviction, MH and SUD needs, housing and employment status)
- 3) How has the process of identification, screening, assessment and diversion changed for this client population (in comparison to what was in place before this program)?
- 4) How many clients have participated in each of the services or treatment funded through CAFES? (e.g., restorative justice services, mental health and substance use treatment, case management)
- 5) What kinds of collaborations or partnerships have occurred through CAFES, and how have they contributed to its implementation?
- 6) What amount and types of training have been implemented by Encompass's two community trainers?
- 7) What new or altered policies have been implemented across the County in connection with CAFES?

#### Outcomes: How effective was CAFES in achieving its goals?

1) What percentage of clients (a) completed their court-ordered diversion terms and (b) achieved the goals set with their case manager?



- 2) What changes have occurred for clients in terms of housing, employment, mental health, substance use and other basic needs by the end of their CAFES services?
- 3) How satisfied are clients with the diversion pathway and services they have received?
- 4) What are the key justice-related outcomes among clients after joining CAFES: arrests, incarceration, other violations?
- 5) What has been the impact of CAFES-funded collaborations and training efforts for staff across the County?
- 6) Did the program contribute to better outcomes than might have been expected without it?

#### Creation of a Client Data Collection System

To answer the evaluation questions listed above, ASR worked with Probation and other primary stakeholders to develop a data collection/tracking system to record CAFES-funded services, activities, and outcomes related to the evaluation plan. ASR is analyzing data and reporting progress in implementation and outcomes throughout the program period. The Probation Department also developed an extensive database for all partner agencies to utilize that collects and tracks data related to program implementation.

In the first few months of the program, ASR created documentation to establish the methodology behind each measure, along with its source and the office or entity responsible for collecting and transmitting the data. All clients are required to sign a release of information (ROI) when they agree to join CAFES. Each client is assigned a unique Participant ID in accordance with BSCC guidelines.

Client data is entered by service providers into a Program/Provider Portal that includes all required BSCC measures and custom measures detailed in this plan. All client enrollments in CAFES are tracked in a centralized database, administered by Probation, and designed to generate report files that integrate client-level data which can be exported and used for detailed data analysis as well as quarterly files that are submitted to the BSCC. CAFES client data is captured at each step of the client's pathway.

ASR reviewed the program materials and assessments for each element of the CAFES program to determine what additional assessments or surveys were needed. ASR created data collection tools for Neighborhood Court program partners, the District Attorney's Office (DAO) and the Conflict Resolution Center (CRC), that track participant data.

The client implementation and outcome data will be used to conduct analyses to determine the overall success of CAFES in routing clients to appropriate services and preventing clients from recidivating.

#### **Key Informant Interviews**

In addition to the quantitative data collected from case management records, assessments and surveys, ASR conducted a series of interviews at the beginning of the program. These interviews documented the baseline status of coordination, referrals, and treatment options for the intended population. They also sought to understand the most common barriers to successful coordination and access to treatment and solicit recommendations for how stakeholders within the system believe the CAFES program can reduce those barriers. In addition, ASR sought to understand the impact of COVID-19 on the initiation and implementation of program activities. (See the Evaluation Results and Discussion section for a summary of key informant interviews). In later years, ASR will conduct focus groups and interviews to explore, evaluate and document the impact of the program.



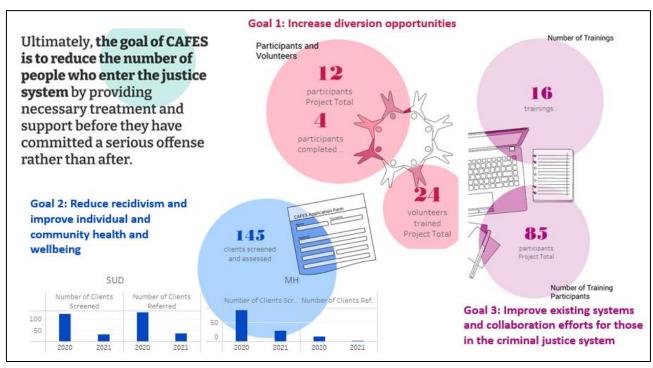
#### **CBO Training Surveys**

As needed, ASR worked with Encompass Community Services to review the trainings planned for partner CBOs and developed pre- and post-training assessments. ASR also worked with CRC to develop pre- and post- training surveys to document learnings.

#### Data Dashboards & Reports

A program dashboard has been developed to report on the progress of CAFES implementation and outcomes. Infographics depicting the process and outcome indicators from the local evaluation plan will be accessible on a Tableau dashboard to program partners. Although development was delayed due to lack of sufficient data (because of COVID-19), the dashboard is in its final stages of completion. The dashboard contains four sections: an introduction to the CAFES program, and sections for each of the three CAFES goal areas. The photo below shows a sampling of dashboard data points, showing how it was designed to tell the story of this innovative and complex program.

The dashboard is interactive: via drop down menus and 'pop-up' graphics, users can look at quarterly and/or annual breakdowns for a variety of different indicators in each of the goals. Designed to show the paths a client or participant takes through the CAFES program; each page brings the data to life as a roadmap or story. Once complete, the dashboard will be updated quarterly.



In addition to the data dashboard development, ASR has been producing quarterly reports on evaluation activities for the Probation Department.

## **Criteria for Participant Eligibility**

CAFES was launched to close a gap in services for Santa Cruz County adults who are first-time offenders, or those committing low-level offences, who need mental health, substance use and other related services that had been inaccessible prior to Prop 47. Eligibility for CAFES services is based on the criminal history, mental health and substance use related needs, and severity of recent offenses of people arrested or cited for various low-level offenses.



#### **Eligibility for Neighborhood Court**

The Neighborhood Court serves adults who meet the following criteria:

- Have been cited or arrested for a low-level (nonviolent) offense. Eligible offenses include burglary, larceny, motor vehicle theft, arson, simple assaults, forgery/counterfeiting, fraud, embezzlement, stolen property, vandalism, weapons, prostitution/commercialized vice, sex offenses, driving under the influence, liquor laws, drunkenness, disorderly conduct, vagrancy, and other offenses.
- 2. Have no criminal history (applies to early period of NHC). In later years, the NHC will expand to include those with a limited crime record and no prior "strikes."
- 3. Agree to take responsibility for the incident.
- 4. Are willing to pay restitution, if warranted.

#### Eligibility for Other CAFES-Linked Services

Adults are eligible for CAFES services if they meet the following criteria:

- Have been cited or arrested for a low-level (nonviolent) offense and referred to Neighborhood Court or eligible for Mental Health Diversion (pursuant to AB 1810). Eligible offenses include burglary, larceny, motor vehicle theft, arson, simple assaults, forgery/counterfeiting, fraud, embezzlement, stolen property, vandalism, weapons, prostitution/commercialized vice, sex offenses, driving under the influence, liquor laws, drunkenness, disorderly conduct, vagrancy, and other offenses.
- 2. Are eligible for any Collaborative Court, and not eligible for services via AB 109 funds.
- 3. Are currently under supervision/monitoring by the Probation Department (pretrial or formal probation) and have an identified MH/SUD need.

#### **Process & Outcome Measures**

ASR is collecting the following measures to answer the key evaluation questions related to CAFES implementation.

PF	ROCESS MEASURE	SOURCE	HOW COLLECTED
	ES System Referral and Authorization cedures Established		
1.	NHC process established	DAO/CRC	
2.	Number of NHC sites, by location*	DAO/CRC	Program records
	Number of NHC volunteers trained, by* • Location • Age • Primary language • Zip code	DAO/CRC	Program records
	Number of NHC participants, by* • Age • Primary language • Zip code	DAO/CRC	Program records
	Other CBO processes in place for CAFES clients	All CAFES partner CBOs	Program records



6.	Number of people authorized to CAFES, by*  • Referral source  • Primary offense  • Eligibility criteria  • Age  • Race/ethnicity  • Gender	DAO, CC, Probation	Probation database
7.	Number of clients screened & assessed*	CC, Probation, service/treatment providers	Probation database
8.	Number of occurrences of clients screened and assessed, by*  • Assessor  • MH/SUD/Diversion assessment/screening	CC, Probation, service/treatment providers	Probation database
Re	ferrals and Entry in Programs/Services		
9.	Number of clients assigned court diversion, by type*	DAO, CC, HSA	CC's and HSA's records
10	Number of clients referred to and entered NHC	DAO/CRC	DA's office records
11	Number of clients referred to Collaborative Courts, by court type	cc	CC's office records
12	Number of clients served by the Probation Service Center	Probation	Probation database
13	Number of clients receiving case management & support services*	Probation, CBOs	Probation database
14	Number of occurrences of case management & support services, by type*	Probation, CBOs	Probation database
15	Number of clients referred and enrolled in treatment, by type*	CBOs (e.g., Encompass, New Life)	Probation database
16	Average number of days enrolled in treatment, by type*	CBOs (e.g., Encompass, New Life)	Probation database
17	Number receiving peer support; average duration of support.	CBOs	Probation database
18	Average time between system processing points	DAO, CC, Probation, CBOs	Probation database
Co	mmunity/CBO Trainings		
1.	Number of trainings, by type	Encompass	Program records
2.	Number of training participants*	Encompass	Program records
3.	Number of partner agencies participating in trainings*	Encompass	Program records
C	OUTCOME MEASURE	SOURCE	



Sh	ort Term		
1.	Percentage of participants who successfully completed the NHC program	DAO/CRC	DA's office records
2.	Types of agreements/activities that participants were assigned in order to complete the NHC program*	DAO/CRC	DA's office and program records
3.	Percentage of NHC volunteers with increased understanding due to panelist training*	DAO/CRC	Program records
4.	Percentage of NHC volunteers with improved capacity to implement Restorative Justice practices due to panelist training*	DAO/CRC	Program records
5.	Percentage of clients who successfully completed court diversion, by type*	СС	DA's office and CC's records
6.	Percentage of clients who completed treatment, by type*	CBOs: MH and SUD service providers, DAO/CRC	Probation database
7.	Percentage of clients with improved housing status	CBOs: case managers	Probation database
8.	Percentage of clients maintaining or acquiring new jobs	CBOs: case managers	Probation database
9.	Clients with improved access to benefits, by type	CBOs: case managers	Program records
10.	Jail bed days: fewer days six months after joining CAFES than six months prior.	Sheriff's Office	Jail records
11.	Training participants with increased understanding of topic, after training	Encompass	Program records
Long Term			
12.	Reduction in Recidivism: Percentage of clients who re-offend after joining CAFES (using local and BSCC definitions). Indicators: a) Reduced arrests & citations b) Reduced misdemeanor bookings & convictions c) Reduced felony bookings & convictions d) Reduced local & state prison sentences	Sheriff's Office, DAO, Superior Court	
13.	Overall reduction in adults with assessed MH/SUD needs entering criminal justice system.	CC, HSA, DAO	
14.	Improved capacity of CBO partners to address MH and SUD needs of criminal justice-involved clients.	CBOs (focus groups, interviews)	
15.	Policy shifts implemented in connection with CAFES	All CAFES partners	



#### **Difficulties with Data Collection**

With any program of this size and complexity, there will be challenges with data collection. Below are some of the issues experienced since the launch of the CAFES program, as well as those more specific to streamlining client data collection via a centralized database, and from multiple data sources.

- System partners experienced a learning curve in understanding and implementing a new webbased database to streamline the collection of CAFES client data:
  - With all program partners utilizing different case management systems, Probation collaborated with the County IT department to create a web-based database for partners to communicate about and report on CAFES client information to Probation.
  - Previously, the Probation Program Manager reviewed and verified all data entered by program partners into spreadsheets and transferred data to the BSCC Smart Sheet (used to track services while the web-based database was being developed).
  - Currently, all data entered into the CAFES database is reviewed by the Probation Program
    Manager prior to submission to the BSCC Smartsheet. Follow up is conducted with any
    questions to program partner staff or providers, and feedback is provided by Probation on
    any inconsistencies or corrections needed.
- There were challenges following up with program partners to obtain additional client data not tracked in CAFES database and arranging for the "warm hand off" of data.
- Tracking clients (duplicated and unduplicated) across multiple data sources presented challenges.

### **Successful Program Completion**

Overall, CAFES clients will be considered to have successfully completed the program if they achieve any of the following outcomes:

- Diversion Neighborhood Court: Pre-filing case "no-filed" or pre-conviction case "dismissed;" Mental Health Diversion: Pre-filing case "no-filed" or pre-conviction case "dismissed."
- 2. Mental Health (MH)/Substance Use Disorder (SUD) Program Completion of client's self-identified goals for their MH/SUD treatment plan.

## **Analysis of the Long-Term Effect of CAFES on Recidivism**

If the policies, services, and trainings carried out through the CAFES program are successful, then it is expected that the number of clients who re-offend or enter the criminal justice system will decline. Rather than entering the justice system, such individuals would achieve greater health and well-being through a combination of mental health and substance use treatment, housing, and employment navigation, and/or other related supports for their individual needs. These pre-CAFES individuals are assumed to have had fewer resources accessible to them than those whose cases began after CAFES launched and thus, according to the logic behind CAFES, posed a greater risk of re-offending.

To estimate the overall net effect of CAFES on countywide shifts in recidivism and entry into the justice system for the final evaluation report, ASR had planned to compare diversion and justice outcomes of CAFES-eligible individuals between 2020 and 2022 with those of a similar group of individuals arraigned prior to 2020 and not sentenced to jail. However, ASR and Probation are



<sup>\*</sup> Indicates a change from the original evaluation plan. See the Changes to the Evaluation Plan section for more information on changes to the evaluation plan.

reviewing the feasibility given the impacts of COVID-19 and validity of comparison. If deemed appropriate, ASR will continue with the comparison as outlined below. If not ASR will work with Probation to submit a revision to the Local Evaluation Plan outlining an alternative plan to analyze the long-term effect of CAFES on recidivism.

The validity of this comparison may be weakened by the presence of non-CAFES related developments during the grant period that affect who becomes involved in the justice system and how their cases are handled. Not all these concurrent developments may be fully accounted for as they are happening during the program; some may not be visible until after the grant ends. However, the evaluation will highlight and seek to account for any factors outside of CAFES that could potentially impact the completion of services and recidivism rates during the grant period. The analysis will also apply statistical methods to control for differences in the pre- and post-CAFES sample populations that may predict recidivism (e.g., a regression model with independent variables that include CAFES status, initial offense category, criminal history, age, and other health conditions).

With those caveats in mind, this evaluation will compare individuals with similar sets of offenses and criminal histories prior to and after CAFES services launched and will infer the effect of those services based on changes in justice.

The CAFES treatment group will consist of adults who meet the following eligibility criteria for between **2020 – 2022**:

The Neighborhood Court shall serve adults who meet the following proposed criteria:

- Have been cited or arrested for a low-level, nonviolent offense. Initial eligible offenses
  include burglary, larceny, motor vehicle theft, arson, simple assaults, forgery / counterfeiting,
  fraud, embezzlement, stolen property, vandalism, weapons, prostitution / commercialized
  vice, sex offenses, driving under the influence, liquor laws, drunkenness, disorderly conduct,
  vagrancy, and other offenses.
- 2. Have no criminal history (applies to early period of NHC). In later years, the NHC will expand to include those with a limited crime record and no prior "strikes."
- 3. Agree to take responsibility for the incident.
- 4. Are willing to pay restitution, if warranted.
- 5. Not eligible for AB 109 funding or Behavioral Health System of Care services.

Adults will be eligible for all other CAFES services if they meet the following criteria:

- 1. Have been cited or arrested for a low-level (nonviolent) offense and referred to Neighborhood Court or eligible for Mental Health Diversion (pursuant to AB 1810).
- 2. Are eligible for any Collaborative Court, and not eligible for services via AB 109 funds.
- 3. Are currently under supervision / monitoring by the Probation Department (pretrial or formal probation) and have an identified mental health/substance use disorder need.
- 4. Not eligible for AB 109 funding or Behavioral Health System of Care services.

The pre-CAFES comparison group will consist of adults with similar eligibility components for between **2017 – 2019**.

Outcome Measures to be analyzed for participant and comparison groups:

- 1. Percentage who were offered and completed diversion terms.
- 2. Percentage arrested within one year of their initial offense.



- 3. Percentage booked on misdemeanor charges within one year of their initial offense.
- 4. Percentage booked on felony charges within one year of their initial offense.
- 5. Percentage convicted of a misdemeanor offense within one year of their initial offense.
- 6. Percentage convicted of a felony within one year of their initial offense.
- 7. Percentage sentenced to jail within one year of their initial offense.

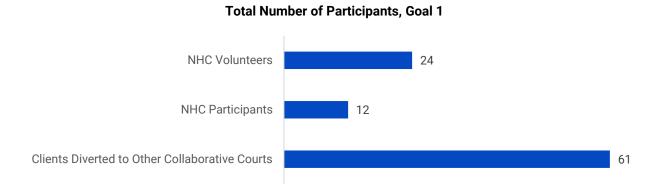
The analysis is intended to assess the overall net effect of CAFES on recidivism for people with low-level offenses, little to no prior criminal history, and those underserved by existing resources yet involved in the criminal justice system. The specific effects of each type of CAFES-based intervention may be difficult to estimate because CAFES is a blend of new services (i.e., Neighborhood Courts, Court Clinician) and additional resources to enhance services that existed prior to CAFES (i.e., mental health treatment, substance use treatment, case management), and many clients will likely participate in multiple CAFES-funded services.

#### **Evaluation Results and Discussion**

While COVID-19 and the Shelter-in-Place restrictions slowed assessments, screenings, and connection to services, it did not stop these nor other program activities. The Probation Department and program partners adapted and found flexible and creative ways to ensure program activities continued. Despite the many challenges of 2020, participants were assigned to and completed Collaborative Courts, volunteers were trained and participated as panelists in the Neighborhood Court (NHC) program, clients accessed treatment and supports, and program partners received training that will improve how they support and serve criminal justice system-involved individuals. See the Preliminary Data section for specific information on the data gathered for each goal area.

The following information outlines the demographic characteristics or participant information for each of the three goal areas.

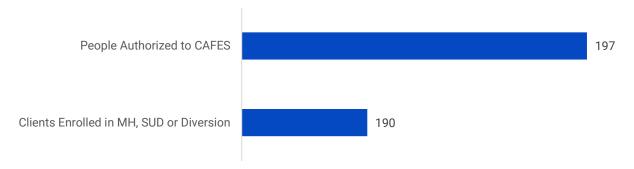
**Goal 1**: Of the twenty-four (24) Neighborhood Court volunteers who were trained to participate as panelists, half (12) were in the over 56-year-old age group, and all (100%) reported that their primary language was English. Of the twelve (12) CAFES participants, the majority (7) were between the ages of 18 and 24 and nearly all (92%) spoke English as their primary language.



**Goal 2:** Of the one hundred and ninety-seven (197) people authorized to CAFES, eighty-one (81) were between the ages of 25 and 35. Fifty-two percent (52% or 97) were White, forty percent (40% or 79) were Hispanic, Latino or Spanish, and seventy-seven percent (77% or 151) were male.



#### **Total Number of CAFES Clients, Goal 2**



**Goal 3:** Two hundred and fifty-six (256) duplicated staff and volunteers from eighteen (18) partner agencies received training from Encompass Community Services as of March 31, 2021. Demographic data was not collected for training participants.

#### **Progress Towards Reducing Recidivism**

**BSCC Definition of Recidivism:** Conviction of a new felony or misdemeanor committed within three (3) years of release from custody or committed within three (3) years of placement on supervision for a previous criminal conviction.

As stated earlier, for the final evaluation report, ASR will compare diversion and justice outcomes of CAFES-eligible individuals between 2020 and 2022 with those of a similar group of individuals arraigned prior to 2020 and not sentenced to jail. These pre-CAFES individuals are assumed to have had fewer resources accessible to them than those whose cases began after CAFES launched and thus, according to the logic behind CAFES, posed a greater risk of re-offending.

Although ASR has not completed a comparison for this report, we do know that of the one hundred and ninety-seven (197) people authorized to CAFES, eight (8) have recidivated (4%). The Probation Department also sees anecdotally that lower-level crimes are not being booked into the jail at the rate as before the initiation of the CAFES program. However, we also know that arrests, citations, and court processes have slowed significantly due to COVID-19. Considering all these factors, it is too early to document the CAFES program's progress towards reducing recidivism.

#### **Progress Towards Goals**

As seen in the below table, despite the challenges of the COVID-19 pandemic, the CAFES program is on course to achieve the goals and objectives in the workplan. All objectives have either been completed or are ongoing and on track.

#### Impacts of COVID-19

The COVID-19 pandemic had a significant impact on the initiative of the CAFES program and altered the implementation of strategies and activities. During the Shelter-in-Place, COVID-19 delayed progress and inhibited direct client contact, communication, and meetings, necessitating workarounds and adjustments on many levels. Lack of rapid COVID-19 screening delayed or inhibited program placements, particularly in residential settings. Due to many organizational closures or reduction in services, screening/assessment, referral, and placement processes took significantly longer than prior to COVID-19 – leading to delays in adjudication and/or lengthier jail stays. Transportation to programs given social distancing efforts was also a challenge to navigate for all partners. The stress of COVID-19 triggered trauma for some clients, which increased



symptoms for MH/SUD clients to a more acute level (while resources and response times slowed). In addition, due to the pandemic and Public Health guidelines/restrictions, the NHC volunteer panelist trainings and conferences could not take place in person and were all held via Zoom. Hiring program staff during the pandemic was a challenge, and as a result, some positions remained open longer than anticipated. The inability to meet in person due to the COVID-19 pandemic had some impact on collaborations and slowed workflows/processes.

In addition to the COVID-19 crisis, and resulting local fiscal crisis, the CZU Complex fires in Santa Cruz County caused wide-spread evacuations in August and September of 2020. This additional disaster impacted CAFES clients, program partner staff, and services across the County.

See table below for additional challenges affecting the progress of CAFES goals and objectives.

#### **CAFES Workplan**

Diversion pathways p			Increase diversion opportunities to minimize entry into the criminal justice system for low-level crimes related to client's MH/SUD.		
low-level individuals resources.	Diversion pathways pre-conviction and/or pre-filing will be created to redirect low-level individuals to appropriate treatment interventions and community resources.				
at support the	-	Timeli	ne		
ojectives	partners	Start Date	End Date		
ffice to create notential Model opportunities. Neighborhood Court ning for system	*DAO  *CBO, DAO	Completed			
ners erral and follow-up procedures blished for RJ/NHC participation  *CBO, DAO, CPM, CCPM  Completed					
		ed to support offer	nder behavior		
at support the	Responsible staff/	Timeli	ne		
ojectives	partners	Start Date	End Date		
Neighborhood Court ecruitment ing for volunteers s established te established requirements nmunity receive aration when	*CBO  *CBO, DAO  *CBO, DAO  *CBOs, DAO, Evaluator	Ongoing Ongoing In process Ongoing Ongoing			
	at support the jectives  fice to create otential Model opportunities. Neighborhood Court ing for system  approcedures HC participation  Restorative justice prachange and repair har at support the jectives  Neighborhood Court ecruitment ing for volunteers is established te established requirements inmunity receive	Responsible staff/ partners  fice to create otential Model opportunities. Neighborhood Court ing for system  Procedures HC participation Restorative justice practices will be implemented to change and repair harm to survivors of crime.  Responsible staff/ CCPM  Restorative justice practices will be implemented to survivors of crime.  Responsible staff/ partners  Responsible staff/ partners  *CBO *CBO *CBO *CBO *CBO, DAO *C	rest support the jectives rice to create otential Model opportunities. Neighborhood Court ing for system restorative justice practices will be implemented to support offer change and repair harm to survivors of crime.  Responsible staff/ Completed requirements are established requirements munity receive responsible staff/ CBO, DAO restorative justice practices will be implemented to support offer change and repair harm to survivors of crime.  Responsible staff/ Timeli Start Date recruitment recruitment responsible staff/ CBO requirements requirements requirements requirements recruitment recruitment requirements requirements requirements requirements recruitment recruitment requirements requirements requirements requirements requirements requirements recruitment recruitment requirements		

#### **Progress:**

Activities for Objective 1.1 have been completed.

Activities for Objective 1.2 are in place and ongoing. To date, training and conferences have been held via Zoom. Program partners are identifying neutral sites to utilize once it is safe to meet in person.

Challenges (aside from COVID-19):



Due to timing of outreach and recruitment of NHC panelists, the goal of 30% Latinx volunteers was not met within the first group of applicants and trainees.

The court had challenges clarifying the referral process and communications with attorneys on understanding how to internally proceed with MH Diversion due to the legal complexities of responsibility for each step in the process. The court has had some challenges educating clients on what specifically MH Diversion entails and that participating in treatment is a requirement of participation.

(2) Goal:	Reduce recidivism and improve individual and community health and well-being.			
Objective 2.1:	Underserved criminal justice-involved individuals with MH/SUD will be diverted from further system involvement.			
Program activities the	at support the	Responsible staff/	Timelii	ne
identified goal and ob	ojectives	partners	Start Date	End Date
*Participants receive assessment in courts Collaborative Court o Justice program.	& are placed in	*CC & CCCM	Ongoing	
*Restorative Justice   been initiated.		*CCPM, CC-CM, DAO, RJC	Completed	
<b>Objective 2.2:</b> Life outcomes will be improved for underserved criminal justice-involve individuals with MH/SUD and the survivors of their crimes.			tice-involved	
Program activities that support the		Responsible staff/	Timeline	
identified goal and ob	ojectives	partners	Start Date	End Date
*Participants receive screening & assessment for MH/SUD, housing, employment.		*CCM, CCCM, CC	Ongoing	
*Participants receive *Participants begin of trauma informed, clie	ulturally responsive, ent centered,	*DP *CCM, CCCM, EN, HN, Clinicians	Ongoing Ongoing	
comprehensive treati *Participants are plac *Participants receive	ced in SLEs.	*CBOs *PN	Ongoing Ongoing	

#### **Progress:**

Activities for Objective 2.1 have been completed or have been initiated and are ongoing. Activities for Objective 2.2 have been initiated and are ongoing.

#### **Challenges (aside from COVID-19):**

AB1950 became effective January 1, 2021, and was deemed retroactive, which has had a significant impact on workload and client services. AB1950 has decreased the amount of time individuals are on probation, which led to some participant's probation expiring prior to successful completion of court ordered programs and case plans.

A shortage in SLE options, compounded by COVID-19 exposures and outbreaks, created difficulties with this type of placement. Program partners are working to identify additional options.

71	3 7 1
(3) Goal:	Improve existing systems and collaboration efforts for those in criminal justice
	system.
Objective 3.1:	Build the capacity of a multidisciplinary system that addresses needs of
	underserved criminal justice-involved individuals with MH/SUD.



Program activities that support the	Responsible staff/	Timeline	
identified goal and objectives	partners	Start Date	End Date
*Execute partner CBO contracts.  *Recruit & hire staff.  *Recruit additional Advisory members and set up work groups to implement databased decision making.	*CPM, CCPM & CBOs *all agencies *CPM & CCPM	Completed Completed & O In-process	ngoing
*Launch Community Trainings. *Finalize local evaluation plan, begin data collection, analyze & disseminate finding.	*CT *Evaluator	Ongoing Completed	

#### **Progress:**

Activities for Objective 3.1 have been completed or have been initiated and are ongoing.

#### Challenges (aside from COVID-19):

Delay in bringing Janus aboard following the Budget Modification approval limited treatment funding temporarily.

### **Results of Baseline Key Informant Interviews**

Between September and December 2020 ASR completed twenty-five (25) baseline interviews with CAFES leadership and line staff to document baseline status of coordination, referrals, and treatment options for the intended population. The interviews also discussed COVID-19 responses, and the short-term and potentially long-term program shifts that were made as a result.

THEMES	
Barriers to services or constraints for CAFES participants six (6) months into COVID-19	Among providers who had not started seeing clients when COVID-19 started:  • Gaps in technology access and/or use among clients
	<ul><li>Client outreach challenges</li><li>Lack of funding (for housing, residential treatment, SLEs)</li></ul>
	Among providers already seeing clients when COVID-19 started:
	<ul> <li>Multiple crises at once</li> <li>Lack of funding (for housing, residential treatment, SLEs)</li> <li>Lack of trust/loss of personal connection between client and provider</li> </ul>
	All
	<ul> <li>Limitations on resources/services available to clients</li> <li>Hiring delays</li> </ul>



Impact of COVID-19 on program implementation	<ul> <li>Shift to virtual interactions and telehealth</li> <li>Slowed screening/referral processes</li> <li>Slowed/limited access to potential clients</li> <li>Less frequent contact with clients</li> </ul>
Changes in how CAFES participants are being served as a result of COVID-19	Shift to virtual interactions and telehealth     Limitations on resources/services available to clients upon reentry to community
Aside from COVID-19, circumstances that have limited or slowed CAFES program implementation	<ul> <li>Hiring delays</li> <li>Budget cuts/shifts in funding</li> <li>Fires</li> </ul>
Unexpected systems or structural changes related to CAFES work	Staff adjusting to working remotely     Shift in how and when providers interface with clients/less frequent contact with clients
Additional questions/comments	Need for better/more frequent communication between partners and leadership

SELECT QUOTES FROM KEY INFORMANT INTERVIEWS			
SUCCESSES	CHALLENGES		
• "The Probation Service Center serves as a way that they can contact us. We are dealing with a large homeless population that is not equipped to have case management via phone or telehealth. They can be hard to locate and connect with. This is our most vulnerable population, and this program is a good fit."	<ul> <li>"Not having housing makes it harder to get buy-in for participation."</li> <li>"Because of the shift to virtual, CAFES is exclusive to people who have a phone and know how to use it; people who have a connection and access."</li> </ul>		
• "It is very cool to offer telehealth services to clients. Being able to meet them where they are and when they are available and ready."	<ul> <li>"Connection, trust building, and human interactions are challenging with no in person meetings available."</li> </ul>		
<ul> <li>"It is better – assessments are better. Access is better because referrals and assessments are done over the phone – a barrier has been removed. I hope this process stays after COVID-19 because it works better for my caseload."</li> </ul>	"Because the grant has so many moving parts, communication is hard, difficult to get everyone on the same page (probation officers, peer navigators, and other frontline staff may have different understanding about grant limitations)."		
<ul> <li>"New ways of communicating that have been very helpful. Texting is a part of the communications now – allows for quick responses which is very productive."</li> </ul>	"Some things are lost because communicating is in a limited manner, this job requires you to be collaborative and		
<ul> <li>"Sentencing of clients in the legal system are more favorable if they have a referral and/or have been assessed and placed into some level of treatment. This produces clients that are more successful. They also have a higher chance of staying on track with the SUD and/or MH goals."</li> </ul>	multidisciplinary. I interact with less staff, resulting in more misinformation or lack of information which becomes challenging."		



### **Summary of Preliminary Process and Outcome Evaluation Results**

Data instruments and tools, including the data collection tools and pre- and post-training surveys described above, were developed to assess progress towards the following process and outcome measures. Some outcome measures will only be reported in the final evaluation report. See the Changes to the Evaluation Plan section for more information on changes to the evaluation plan.

PROCESS MEASURE	
CAFES System Referral and Authorization Procedures Established	
NHC process established	Completed
Number of NHC sites, by location*	N/A
Number of NHC volunteers trained* (see Preliminary Data section for breakdown)	24
Number of NHC participants* (see Preliminary Data section for breakdown)	12
Number of people authorized to CAFES* (see Preliminary Data section for breakdown)	197
Number of clients screened & assessed* (see Preliminary Data section for breakdown)	145
Number of occurrences of clients screened and assessed* (see Preliminary Data section for breakdown)	277
Referrals and Entry in Programs/Services	
Number of clients assigned court diversion, by type* (see Preliminary Data section for breakdown)	73
Number of clients referred to and entered NHC	Included in final evaluation report
Number of clients referred to Collaborative Courts, by court type	Included in final evaluation report
Number of CAFES clients served by the Probation Service Center	75
Number of clients receiving case management & support services*	167
Number of occurrences of case management & support services, by type* (see Preliminary Data section for breakdown)	587
Number of clients referred and enrolled in treatment, by type* (see Preliminary Data section for breakdown)	190
Average number of days enrolled in treatment, by type* (see Preliminary Data section for breakdown)	207
Number of clients receiving peer support; average duration of support	Included in final evaluation report
Average time between system processing points	Included in final evaluation report



Community/CB0 Trainings	
Number of trainings, by type (see Preliminary Data section for breakdown)	16
Number of training participants*	256 (duplicated)
Number of partner agencies participating in trainings*	18

OUTCOME MEASURES	
Short Term	
Percentage of clients who successfully completed NHC	33% (4/12)
Types of agreements/activities that participants were assigned in order to complete the NHC program*	See Preliminary Data section
Percentage of NHC volunteers with increased understanding due to panelist training*	100% (11/11)
Percentage of NHC volunteers with improved capacity to implement Restorative Justice practices due to panelist training*	100% (11/11)
Percentage who successfully completed court diversion, by type* (see Preliminary Data section for breakdown)	40% (29/73)
Percentage of clients who completed treatment, by type* (see Preliminary Data section for breakdown)	17% (33/190)
Percentage of clients with improved housing status	10% (2/20)
Percentage of clients maintaining or acquiring new jobs	45% (10/22)
Clients with improved access to benefits, by type*	Included in final evaluation report
Jail bed days: fewer days six months after joining CAFES than six months prior	Included in final evaluation report
Training participants with increased understanding of topic, after training*	93% (127/136)
Long Term	
Reduction in Recidivism: Percentage of clients who re-offend after joining CAFES	4% (8/197)
<ul> <li>Reduced arrests &amp; citations</li> <li>Reduced misdemeanors bookings &amp; convictions</li> <li>Reduced felony bookings &amp; convictions</li> </ul>	(breakdown included in final evaluation report)



Reduced local & state prison sentences	
Overall reduction in adults with assessed MH/SUD needs entering criminal justice system	Included in final evaluation report
Improved capacity of CBO partners to address MH and SUD needs of criminal justice-involved clients	Included in final evaluation report
Policy shifts implemented in connection with CAFES	Included in final evaluation report

<sup>\*</sup> Indicates a change from the original evaluation plan. See the Changes to the Evaluation Plan section for more information on changes to the evaluation plan.

### **Preliminary Data**

## **CAFES Goal 1: Increase Diversion Opportunities**

Increase diversion opportunities to minimize entry into the criminal justice system for low-level crimes related to clients' substance use disorders and mental health needs.

Objective 1.1: Create diversion pathways pre-conviction and/or pre-filing that redirect low-level individuals to appropriate treatment interventions and community resources.

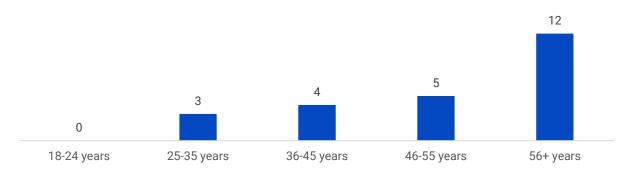
Objective 1.2: Implement restorative justice practices to support offender behavior change and repair harm to survivors of crime (i.e., Neighborhood Courts).

#### **NEIGHBORHOOD COURTS PROGRAM**

#### **NEIGHBORHOOD COURT VOLUNTEERS**

As of March 2021, twenty-four (24) Neighborhood Court (NHC) volunteer panelists had been trained. Due to COVID-19 restrictions, all trainings have been held remotely via Zoom. There is no data on "number of NHC sites, by location" as a result. Of the twenty-four (24) NHC volunteers who were trained to participate as panelists, half (12) were in the over 56-year-old age group and 100% reported that their primary language was English.

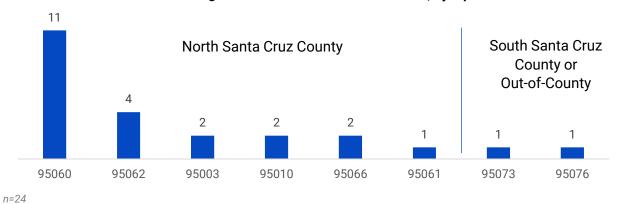
#### Number of Neighborhood Court Volunteers Trained, by Age



n=24

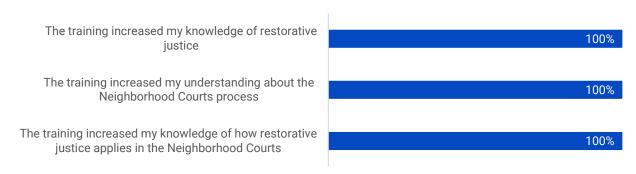






As part of the panelist training, volunteers were given a post-training survey to measure their understanding of restorative justice principles and their capacity to implement the restorative justice practices they learned about.

#### Neighborhood Court Volunteer Post-Training Survey Respondents Answering 'Agree' or 'Strongly Agree'



n=11

#### Neighborhood Court Volunteer Post-Training Survey Respondents Answering 'Agree' or 'Strongly Agree'



n=11

#### NEIGHBORHOOD COURT CONFERENCES AND PARTICIPANTS

As of March 2021, twelve (12) Neighborhood Court (NHC) conferences had been held for twelve (12) participants. Two (2) conferences were held in the last quarter of 2020, and ten (10) were held in the first quarter of 2021. Due to COVID-19 restrictions, all conferences have been held remotely via Zoom. There is no data on "number of NHC sites, by location" as a result. The majority of participants (7) were between the ages of 18 and 24 and nearly all (92%) spoke English as their primary language. The majority of NHC participants (8) come from North Santa Cruz County. As of



the end of March 2021, four (4) NHC participants had successfully completed the program, seven (7) were still in process, and one (1) had chosen not to continue.

#### **Number of Neighborhood Court Participants, by Age**



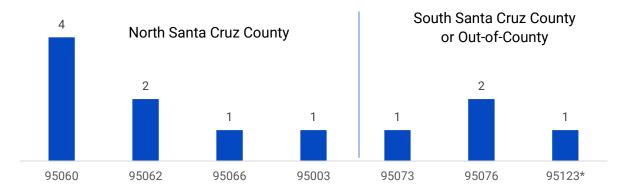
n=12

#### Number of Neighborhood Court Participants, by Primary Language



n=12

#### Number of Neighborhood Court Participants, by Zip Code



n=12

\*95123 zip code is in San Jose, CA.

As part of the Neighborhood Court process, participants work with volunteer panelists and program staff to develop agreements that are part of the restitution for their offense. Below are examples of the types of agreements that participants have made.

#### **Examples of Participant Agreements:**

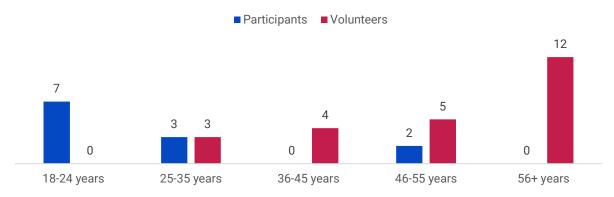


- Write an apology letter to victim
- Write a reflective essay
- Write letters to younger siblings sharing about their experience and why they should avoid the behaviors
- Community service or volunteer time
- Attendance and participation in self help support groups (NA, AA etc.)
- Creation of an educational video or slide show about what they learned, shared with others
- Watch educational videos
- Identify stress relieving activities and initiate participation (exercise class, yoga, etc.)
- Commit to doing chores around the house

#### COMPARISON OF NEIGHBORHOOD COURT VOLUNTEERS AND PARTICIPANTS

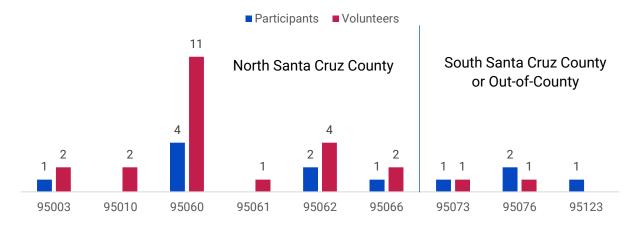
The majority (10) of Neighborhood Court participants were under the age of 35, while the majority (17) of Neighborhood Court volunteer panelists were over the age of 46.

#### Number of Neighborhood Court Participants and Volunteers, by Age



Participants n=12, Volunteers n=24

#### Number of Neighborhood Court Participants and Volunteers, by Zip Code



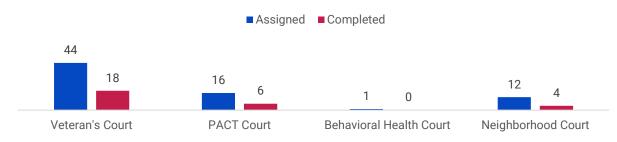
Participants n=12, Volunteers n=24 \*95123 zip code is in San Jose, CA.



#### **DIVERSION TO COLLABORATIVE COURTS**

As an additional effort to create long-term and system-wide changes in how adults with mental health and substance use needs are treated when they interact with the criminal justice system, diversion opportunities into Collaborative Courts have been expanded. As of March 31, 2021, seventy-three (73) clients assessed through the CAFES funded clinician had been assigned to one of the Collaborative Courts, with twenty-eight (28) completing successfully (38%).

# Number of Clients Assigned Court Diversion and Completing Court Diversion, by Type



Veteran's Court n=44, Pact Court n=16, Behavioral Health Court n=1, Neighborhood Court n=12 Note: No CAFES authorized clients were diverted to Veteran's Court, PACT Court or Behavioral Health Court. The CAFES funded position served the clients assigned to Collaborative Courts.

# CAFES Goal 2: Reduce Recidivism and Improve Individual and Community Health and Well-Being

Objective 2.1: Divert underserved criminal justice-involved individuals with MH/SUD from further system involvement.

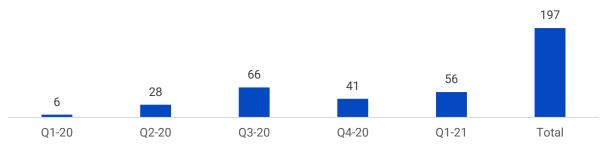
Objective 2.2: Improve life outcomes for underserved criminal justice-involved individuals with MH/SUD and the survivors of their crimes.

#### **AUTHORIZATION INTO THE CAFES PROGRAM**

#### CAFES REFERRAL SOURCES AND DEMOGRAPHICS OF AUTHORIZED PARTICPANTS

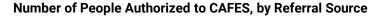
As of March 30, 2021, one hundred and ninety-seven (197) people were authorized to participate in the CAFES program. Of all the possible referral sources, the Probation Department was the most common with two hundred and thirty-five (235) referrals. Note: Referral sources do not equal the unduplicated number of authorized clients (197) because some clients were referred by multiple sources.

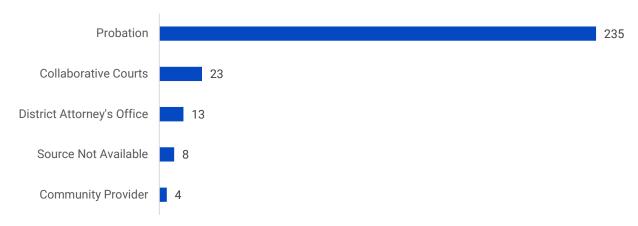
#### **Number of People Authorized to CAFES**





n=197

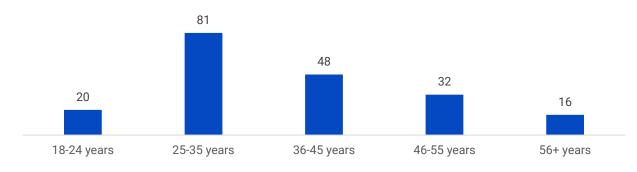




n=283 Note: N does not add up to the unduplicated number of authorized clients (197) because some clients were referred by multiple sources.

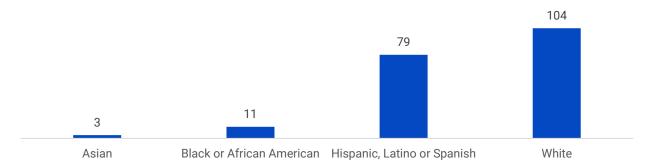
Eighty-one (81) of authorized CAFES clients were between the ages of 25 and 25. Fifty-two percent (52% or 97) were White, forty percent (40% or 79) were Hispanic, Latino or Spanish, and seventy-seven percent (77% or 151) were male.

#### Number of People Authorized to CAFES, by Age



n=197

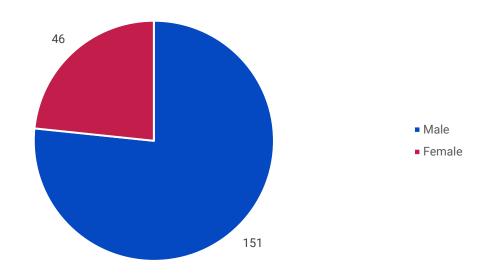
#### Number of People Authorized to CAFES, by Race/Ethnicity





n=197





n=197

#### PRIMARY OFFENSES AND ELIGIBILITY OF AUTHORIZED CLIENTS

"Other offenses" (36) and "simple assaults" (31) were the two most cited primary offenses that made a client eligible for the CAFES program. One hundred and nine (109) clients were eligible for the CAFES program because of substance-use disorder (SUD) alone. Fifty-eight (58) were eligible because of both SUD and mental health (MH).

#### NUMBER OF PEOPLE AUTHORIZED TO CAFES, BY PRIMARY OFFENSE

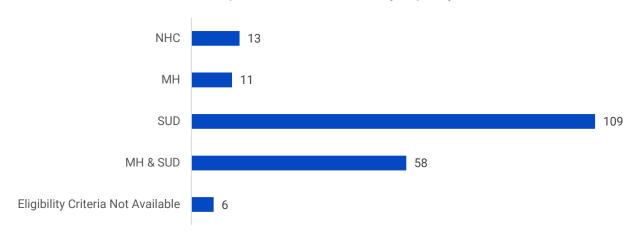
PRIMARY OFFENSE	Q1-20	Q2-20	Q3-20	Q4-20	Q1-21	TOTAL
Arson	0	0	1	1	1	3
Burglary	0	0	3	3	3	9
Disorderly Conduct	0	0	1	0	2	3
DUI	0	0	9	2	6	17
Drug Offenses	0	1	3	2	3	9
Drunkenness	0	1	0	2	0	3
Family/Children Offenses	0	3	7	3	5	18
Fraud	1	1	1	0	1	4
Larceny	0	1	2	5	5	13
Liquor Laws	0	0	0	0	1	1
Motor Vehicle Theft	0	2	1	0	3	6
Sex Offenses	0	1	0	1	0	2
Simple Assaults	0	7	10	6	8	31
Stolen Property	0	0	2	3	1	6



Vandalism	0	3	2	4	4	13
Weapons	0	2	5	6	0	13
Other Offenses*	2	5	13	3	13	36
Primary Offense Not Available	3	1	6	0	0	10
TOTAL	6	28	66	41	56	197

n=197

#### Number of People Authorized to CAFES, by Eligibility Criteria



n=197

#### TREATMENT AND SERVICES FOR AUTHORIZED CAFES CLIENTS

#### SCREENING AND ASSESSMENT FOR TYPE OF NEED

The majority (152) of clients were screened and assessed for substance use disorder (SUD). Encompass Community Services screened and assessed nearly all (194) of CAFES clients.

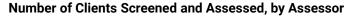


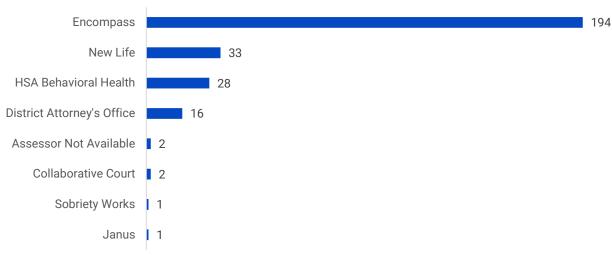




<sup>\* &</sup>quot;Other offenses" includes resisting, violation of protective orders, exhibition of speed, trespass, hit and run, evading, threats, and false ID to law enforcement.

Note: N does not add up to the unduplicated number of clients (197) because some clients were screened/assessed multiple times.



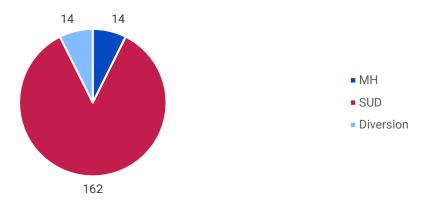


n=277
Note: N does not add up to the unduplicated number of clients (197) because some clients were screened/assessed multiple times.

#### REFERRAL AND ENROLLMENT INTO TREATMENT

The majority (162) of clients were referred to and enrolled in substance use disorder (SUD) treatment. The average number of days in outpatient SUD treatment was two hundred and eighty-one (281) and the average number of days in residential SUD treatment was two hundred and nineteen (219). A total of thirty-three (33) clients completed treatment as of March 31, 2021.

#### Number of Clients Referred and Enrolled in Treatment, by Type

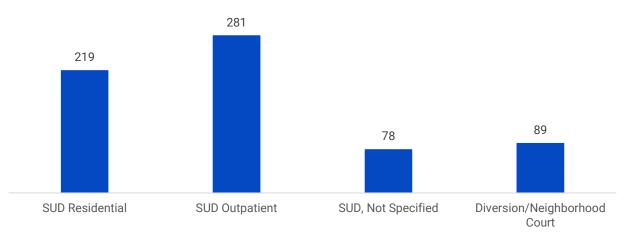


n=190

Note: N does not add up to the unduplicated number of clients (197) because not all clients were referred to and enrolled in treatment.

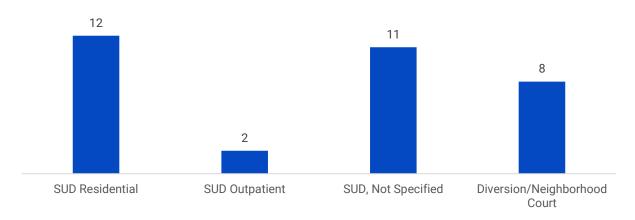






n=190 Note: N does not add up to the unduplicated number of clients (197) because not all clients were referred to and enrolled in treatment.

#### **Number of Clients Completing Treatment, by Type**



n=33

#### CASE MANAGEMENT AND SUPPORT SERVICES

CAFES clients are assisted at both the Probation Service Center and at community-based partner agencies, by discharge planners and peer navigators. Discharge planners and peer navigators served one hundred and sixty-seven (167) clients, and the Probation Service Center served seventy-five (75) CAFES clients. There were two hundred and forty-seven (247) occurrences of case management, with housing support (128) and employment services (115) having the next highest occurrences. Ten (10) clients maintained or acquired new jobs and two (2) had improved housing. Note: Housing and employment data was not available for all clients who enrolled and completed treatment. The housing status and employment improvement graph below represents the outcomes of clients with data available.

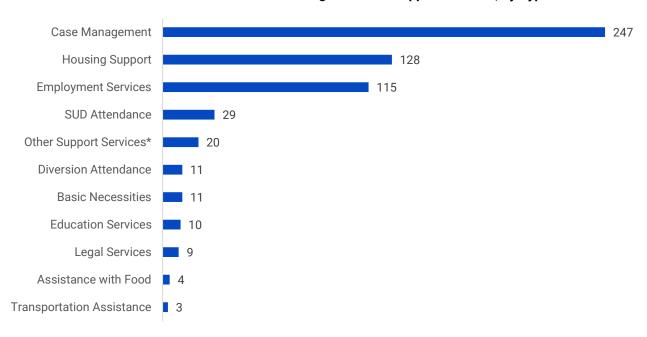


#### Number of Clients Receiving Additional Support, by Location/Source



n=242 Note: N does not add up to the unduplicated number of clients (197) because some clients may have been served by both sources.

#### Number of Occurences of Case Management and Support Services, by Type

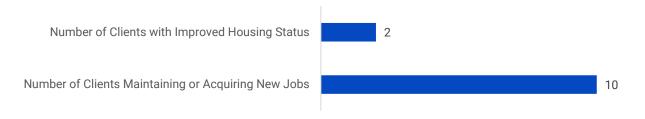


n=587 occurrences

Note: N does not add up to the unduplicated number of clients (197) because some clients received multiple services.

\*"Other Support Services" include: assistance filling out paperwork, intake and treatment planning, check-in/follow-up, hygiene kits and

#### **Housing Status and Employment Improvement**



Clients with housing data available n=20, Clients with employment data available n=22

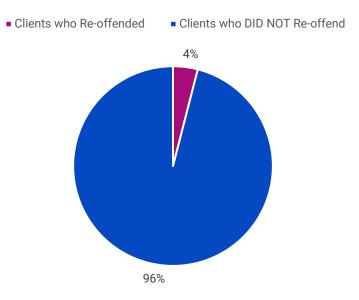


<sup>\*&</sup>quot;Other Support Services" include: assistance filling out paperwork, intake and treatment planning, check-in/follow-up, hygiene kits and clothing, DMV and legal assistance, Medi-Cal coordination, outside agency referrals

#### **RECIDIVISM**

Of the one hundred and ninety-seven (197) clients in the CAFES program, eight (8) clients reoffended within seven (7) months of their first date of service, a four percent (4%) recidivism rate.

# Percentage of CAFES Clients Who Re-offended within 7 Months of First Date of Service



n=197

# CAFES Goal 3: Improve Existing Systems and Collaboration Efforts for Those in Criminal Justice System

Objective 3.1: Build the capacity of a multidisciplinary system that addresses the needs of underserved criminal justice-involved individuals with MH/SUD.

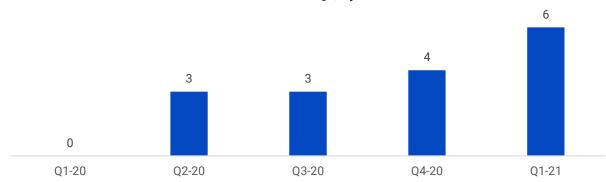
#### **PARTNER AGENCY TRAININGS**

Two hundred and fifty-six (256) duplicated staff and volunteers representing a total of eighteen (18) partner agencies have participated in trainings offered by Encompass Community Services (as of March 31, 2021). Every CAFES funded agency had at least one staff/volunteer attended at least one community training, with some agencies showing a high level of participation from multiple staff



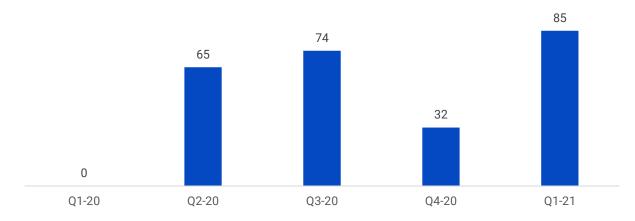
#### members/volunteers at multiple trainings.

#### **Number of Trainings, by Quarter**



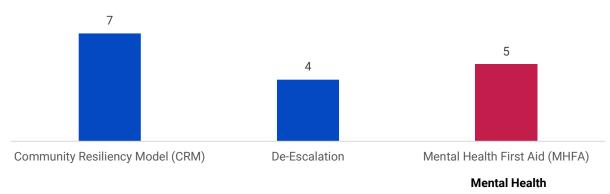
n=16

### **Number of Training Participants, by Quarter**



n=256 duplicated participants Note: Some participants attended multiple trainings.

#### Types of Training Offered, and Number of Times Training was Implemented



**Self-Care & Resiliency Skills** 

n=16



#### **Results of Training**

CAFES trainings utilize pre- and post-training surveys to measure reported changes in levels of understanding or knowledge in specific training topic areas. Although not all training data was available for this reporting period, the data received showed that most participants responded "agree" or "strongly agree" to prompts expressing increased understanding or knowledge. Specific prompts and data can be found in the table below.

	TRAINING PARTICIPANTS WITH INCREASED UNDERSTANDING OF TOPIC, AFTER TRAINING				
	TRAINING	POST-TRAINING SURVEY QUESTIONS	TRAINING PARTICIPANTS RESPONDING 'AGREE' OR 'STRONGLY AGREE'		
s	Community Resiliency Model (CRM) 101 – June 2020	CRM increased my understanding of the nervous system's role in relation to one's reactions, emotions, sensations, and habitual behaviors.	83% (20/24)		
elf-Care & Resiliency S	The Art of De-Escalation: A Trauma-Informed Approach – July 2020	Training increased my understanding of Escalation/Crisis from a Trauma Informed Perspective.	88% (28/32)		
	The Art of De-Escalation: A	The training increased my understanding of how to self-regulate before assisting someone in crisis.	100% (14/14)		
	Approach – August 2020	My knowledge about barriers to de-escalation has increased.	100% (14/14)		
	The Art of De-Escalation: A Trauma-Informed	The training increased my understanding of how to self-regulate before assisting someone in crisis.	100% (26/26)		
	Approach - December 2020	My knowledge about barriers to de-escalation has increased.	96% (25/26)		
		TOTAL	93% (127/136)		

Note: Post-training survey data was not available for all trainings.

#### **Training Descriptions**

The CAFES funded trainings generally fall into these categories: Mental Health (MH), Substance Use Disorders (SUDs) Implicit Bias, Self-care and Resiliency, Key Drivers and Traits of Criminal Behavior, and Professional Development. For the program period of August 15, 2019 – March 31, 2021, Encompass Community Services provided the following trainings to program partners:

	TRAINING DESCRIPTIONS
Resiliency Is	Community Resiliency Model (CRM) 101 Objectives include understanding of this skills-based model that supports increased understanding of the impact of trauma and toxic stress. Includes biologically based wellness skills, resetting and stabilizing nervous systems, and broadened resiliency capacity for service providers and clients.
∞ <u>≅</u>	<b>CRM Skill Builder</b> – This follow-up session provides the opportunity to practice CRM skills to strengthen provider's ability to adapt the CRM model with those they serve.
Self-Care	The Art of De-escalation: A Trauma-Informed Approach Objectives include role of self-awareness in stress responses, the integrated approach to the escalation cycle, and verbal/non-verbal communication skills.



Art of De-escalation: Skill Builder - This follow-up session provides the opportunity to practice de-	
escalation the skills learned in the initial training. Participants will practice together using training	
vignettes or real-life examples, which support skill building and application in the field	

### Mental Health

#### Mental Health First Aid (MHFA)

Objectives of this two-part series are identifying, understanding, and responding to signs of mental illness and substance use disorders, outreach to provide initial support, and connecting individuals to appropriate care.

# **Logic Model for CAFES**

The only changes to the logic model are the additions of Janus and Goodwill Central Coast to the inputs. Janus was added as a contractor to administer and coordinate treatment and housing funds. Goodwill Central Coast employs the Collaborative Court Case Manager/Coordinator, which shifted from the Superior Court at the start of CAFES.

INPUTS	ACTIVITIES	SHORT TERM OUTCOMES	LONG TERM OUTCOMES
County Probation Department  District Attorney's Office (DAO) Sheriff's Office Superior Court Behavioral Health Department (BH) Conflict Resolution Center (CRC) New Life Community Services Encompass Sobriety Works Janus Goodwill Central Coast Applied Survey Research Prop 47 Local Advisory Committee (CCP & Workgroups)	<ul> <li>Behavioral health screening &amp; assessments by court clinician.</li> <li>Probation risk and needs assessments</li> <li>Probation case manager: general case mgmt. and system navigation</li> <li>Superior Court: Collaborative Courts program management</li> <li>Goodwill Central Coast: Employs Collaborative Court Case Manager/ Coordinator</li> <li>DAO &amp; CRC: Restorative Justice via Neighborhood Courts</li> <li>New Life: SUD treatment, case management, housing and employment navigation</li> <li>Encompass: discharge planning &amp; housing navigation</li> <li>Encompass: community trainings for local CBOs</li> </ul>	<ul> <li>Screening &amp; Referrals:</li> <li>Reduction in time between arraignment and beginning of services (via court clinician)</li> <li>Neighborhood Court:</li> <li>Establish RJ/NC procedures</li> <li>Community outreach and education</li> <li>Recruitment of RJ/NC volunteers</li> <li>Training of staff and volunteers</li> <li>Successful restitution and harm repair in Neighborhood Courts</li> <li>Diversion &amp; Treatment</li> <li>Participants establish &amp; complete MH/SUD treatment goals</li> <li>Completion of diversion terms (via a dismissal or "no file")</li> <li>Case Management/Navigation</li> </ul>	<ul> <li>CAFES Participants:</li> <li>Reduced recidivism</li> <li>Fewer individuals sentenced to local/state prison</li> <li>System-wide:</li> <li>Fewer individuals with MH/SUD needs entering justice system</li> <li>Greater capacity of service providers to serve individuals with MH/SUD needs who are criminal justice system-involved or at risk for system involvement.</li> </ul>



and Criminal Justice Partners  Sobriety Works: peer navigators  Janus: Administration and coordination of treatment and housing funds  Other CBOs: provide sober living environments and treatment programs	<ul> <li>Participants linked to housing and employment resources</li> <li>Obtain stable housing</li> <li>Obtain employment</li> <li>County CBOs better informed in a range of treatment practices and modalities</li> </ul>
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# **Changes to the Evaluation Plan**

As the CAFES program moved into implementation, ASR worked with Probation to align the evaluation plan language with the data elements required by the BSCC. Language and indicators were fine-tuned to better capture the work of the program. In addition, as the program rolled out, ASR identified additional data points that would be key to include in the evaluation plan. Below is an explanation of how the evaluation plan has evolved.

Process Measures				
LANGUAGE FROM THE INITIAL EVALUATION PLAN	CHANGES TO THE EVALUATION PLAN			
CAFES System Referral and Authorization Pro	ocedures			
Number of NC volunteers and sites	Changed to: Number of NHC sites, by location			
2. Number of NC volunteers trained	Added: Number of NHC volunteers trained, by:  • Location  • Age  • Primary language  • Zip code  Added: Number of NHC participants, by:  • Age  • Primary language  • Zip code			
<ul> <li>3. Number of people <u>referred</u> to CAFES, by</li> <li>Referral source</li> <li>Eligible offense</li> <li>MH needs</li> <li>SUD Need</li> <li>Criminal history</li> <li>Demographics (age, gender, race)</li> </ul>	Changed to: Number of people <u>authorized</u> to CAFES, by:  Referral source Primary offense Eligibility criteria Age Race/ethnicity			



		Gender	
4.	Number of clients screened & assessed (by assessor, by MH & SUDS assessment/screening)	Change to: Number of clients screened and assessed.  Added: Number of occurrences of clients screened and	
		<ul><li>assessed, by:</li><li>Assessor</li><li>MH/SUD/Diversion assessment/screening</li></ul>	
Re	Referrals and Entry in Programs/Services		
5.	Number of clients assigned court diversion	<b>Changed to:</b> Number of clients assigned court diversion, by type	
6.	Number receiving case management & support services (e.g., employment, housing, civil/legal, education, food)	Changed to: Number of clients receiving case management & support services  Added: Number of occurrences of case management	
		and support services, <u>by type</u>	
7.	Number referred and enrolled in MH treatment	<b>Changed to:</b> Number of clients referred and enrolled in treatment, by type	
	Number referred and enrolled in SUDS treatment		
8.	Days enrolled in MH treatment (residential & outpatient)	Changed to: Average number of days enrolled in treatment, by type	
	Days enrolled in SUDS treatment (residential & outpatient)		
Community/CBO Trainings			
1.	Number of trainings, by type	Added: Number of training participants	
2.	Number of clients in trainings	<b>Changed to:</b> Number of <u>partner agencies participating</u> in trainings	
Outcome Measures			
	ANGUAGE FROM THE INITIAL VALUATION PLAN	CHANGES TO THE EVALUATION PLAN	
Short Term			
1.	Percentage who successfully completed Neighborhood Court	Changed to: Percentage of participants who successfully completed NHC	
		<b>Added:</b> Types of agreements/activities that participants are assigned in order to complete the NHC program	
		Added: Percentage of NHC volunteers with increased understanding due to panelist training	



		Added: Percentage of NHC volunteers with improved capacity to implement Restorative Justice practices due to panelist training
2.	Percentage who completed court- ordered diversion requirements	<b>Changed to:</b> Percentage <u>of clients</u> who successfully completed court diversion, <u>by type</u>
3.	Percentage who completed MH treatment. (local definition to be established in CAFES data dictionary, early 2020)	Changed to: Percentage of clients who completed treatment, by type
	Percentage who completed SUD treatment. (local definition to be established in CAFES data dictionary, early 2020)	



### **Grantee Highlight**

See accompanying PDF for the one-page grantee highlight, including a brief program summary and a program highlight (screen shot below).

# COORDINATED ACCESS FOR EMPOWERING SUCCESS (CAFES) PROJECT

Santa Cruz County's CAFES project is engaging project partners in prevention and diversion activities to reduce recidivism and engagement in the justice system, while improving the health and well-being of adults who have committed low-level crimes. Led by the Probation Department, the CAFES project is based on a multi-agency continuum of care model that includes the Superior Court, the District Attorney's Office, County Behavioral Health, and multiple community-based organizations (CBOs).

The project model is designed to address specific gaps in services for people who are first-time offenders or are ineligible for county behavioral health services. By dedicating upstream support early in the judicial process, CAFES intends to reduce further downstream engagement in the justice system. CAFES clients are referred to the project by attorneys, judges, probation staff, collaborative court staff, local CBOs, and self-referral. Clients are eligible to participate in restorative justice programs, receive mental health treatment, substance use treatment, case management, and housing support.

#### PROJECT GOALS INCLUDE:

- GOAL 1: Increase Diversion Opportunities,
- GOAL 2: Reduce Recidivism and Improve Individual and Community Health and Wellbeing
- GOAL 3: Improve Existing Systems and Collaborative Efforts for those in the Criminal Justice System.

Ultimately, the goal of CAFES is to reduce the number of people who enter the justice system by providing necessary treatment and support before they have committed a serious offense rather than after.

#### **PROGRAM SPOTLIGHT: Neighborhood Courts**

The CAFES project has supported the establishment of a Neighborhood Courts (NHC) program, making it Santa Cruz County's first pre-plea/pre-filing diversion program for low-level, first time offenders. The District Attorney's Office, and local nonprofit, the Conflict Resolution Center, have worked in partnership to develop and implement the NHC program. As part of the NHC process, participants work with volunteer panelists and staff to develop agreements that are part of the restitution for their offense. Participants have two months to complete their agreements. Program representatives work with participants regarding additional voluntary services to support their success. Upon completion, participants are referred to Clean Slate Program to explore record clearance options. Below are examples of agreements participants have made.

"I was able to open up with real people from my community which really helped me understand the importance on the effects of actions. To be able to talk and really see others' perspective on my actions and solutions to help."

- NHC participant

#### **Examples of Participant Agreements:**

- · Write an apology letter to victim, or a reflective essay
- · Write letters to family members making amends
- · Community service or volunteer time
- Attendance and participation in 12 step support groups
- Creation of an educational video or slide show about what they learned, shared with others

Highlighted Success: A NHC participant reached out to a Santa Cruz County Commissioner and shared his experience with the program. The Commissioner offered to help assist in getting the approval required to create a mural depicting the participant's NHC experience

#### NHC program had been featured in several publications:

- Neighborhood Courts: A Way to Resolve Smaller Crimes, Times Publishing Group Online Daily, October 2, 2020
- Neighborhood Courts Program Gives Citizens Say in Criminal Cases, Good Times, October 9, 2020
- Santa Cruz Neighborhood Courts Offers Alternative to the Traditional Criminal Justice System,
   City on a Hill Press, January 9, 2021



### **Acronyms Reference Guide**

- AA Alcoholics Anonymous
- ASR Applied Survey Research
- BH County Behavioral Health Department (under the Health Services Agency)
- BSCC Board of State and Community Corrections
- CAFES Coordinated Access for Empowering Success
- CBO Community-based organization
- CC Collaborative Courts (in the CAFES Workplan CC stands for Court Clinician)
- CCCM Collaborative Court Case Manager
- CCM Center Case Manager
- CCP Santa Cruz County Community Corrections Partners
- CCPM Collaborative Court Program Manager
- CPM Center Program Manager
- CRC Conflict Resolution Center
- CRM Community Resiliency Model
- CT Community Trainer
- CZU Cal Fire designation for its San Mateo-Santa Cruz Unit
- DA District Attorney
- DAO District Attorney's Office
- DP Discharge Planner
- EBP Evidence-based practices
- EN Employment Navigator
- HN Housing Navigators
- HSA Health Services Agency
- IT Information technology
- MH Mental health
- MHFA Mental Health First Aid
- NA Narcotics Anonymous
- NHC Neighborhood Courts
- PACT Community Partnership for Accountability, Connection and Treatment
- PN Peer Navigators
- RJ Restorative Justice
- RJC Restorative Justice Coordinator
- ROI Release of information
- SLE Sober living environments
- SUD/SUDS Substance Use Disorder

