

Process and Evaluation Workgroup

Meeting Minutes

February 1, 2023

In attendance:

- **Rodney Brooks**, Alameda County Public Defender's Office
- **Janene Grigsby**, Alameda County Probation Department
- **Jill Louie**, Alameda County Behavioral Health
- **Juan Taizan**, Alameda County Behavioral Health
- **Dr. Clyde Lewis**, Alameda County Behavioral Health
- **Charlie Eddie**, The Urban Strategies Council
- **Jason Sjoberg**, Alameda County District Attorney's Office
- **Jean Moses**, Interfaith Coalition for Justice in our Jails
- **Jenica Wilson**, Alameda County Probation Department
- **Dr. Laura Chavez**, Alameda County Probation Department
- **Nancy French**, Alameda County Probation Department
- **Rezsín Gonzalez**, Alameda County Probation Department
- **Shdeequa Smith**, Alameda County Probation Department
- **Tyler Zatcoff**, Alameda County Probation Department
- **Melvin Cowan**, Building Opportunities for Self-Sufficiency
- **Aroin Chapman**, Building Opportunities for Self-Sufficiency
- **Rickie Michelle Lopez**, Alameda County Behavioral Health
- **Karen Chin**, Alameda County Justice Reinvestment Coalition

Introductions and opening:

Participants agreed to continue to meet virtually in accordance with AB 361 as a result of the declaration of emergency in Alameda County.

Next, there was a review of the prior two meetings where participants expressed an interest in measuring quality-of-life improvements for clients after receiving services provided by the Alameda County Probation Department. To get an understanding of the available resources

and current activities related to measuring quality of life improvements for Probation Clients, Alameda County Behavioral Health (ACBH) staff talked about how they use their current allocation of AB 109 funding and what information they are collecting.

Summary of the discussion with ACBH staff:

- The Forensic System of care provides health care services in and out of custody for juvenile and adult clients who are or have been involved in the criminal justice system.
- One of the goals for ACBH is to streamline and coordinate services so they don't lose their connections to clients.
- AB 109 clients can be served by another part of the health care system outside of the Forensic System, which can make tracking outcomes difficult.
- ACBH knows who is being served by matching data from Probation with ACBH data systems which also informs staff which services are being provided. In FY 21/22, 3,337 AB 109 clients were served: 933, in the Substance Use System and 2,146 in the Mental Health System.
- We know what type of service clients are receiving based on the provider they are connected to. AB 109 clients receive time limited services that are designed to get people into longer term care when appropriate.
- Alameda County Behavioral Health struggles to assess quality-of-life measures since the department does not track people for a long period of time. There is good data for specific points in time, but not over long stretches of clients' lives.
- The different community-based organizations (CBOs) service providers use different systems which capture people at different times in their lives.
- The sophistication of the data systems of the contracted providers varies.
- The ABCBH contracts look at quality and impact via Results Based Accountability (RBA) measures. However, they currently need refinement.
- Measurements include who graduates; referrals; enrollment in programs; Medi-Cal enrollment; and recidivism for jail and John George.
- The Community Corrections Partnership Mental Health sub-committee gave some good suggestions for amending what the contracts assess.
- Alameda County Behavioral Health is working to align what the various county data systems collect.
- **Question:** The Substance abuse needs are high for clients, but the numbers seem to be low.
- **Answer:** Getting services in custody is challenging, state law may mandate services in the future. The department hopes to screen for drug and alcohol during intake in the future and is looking for ways to continue treatment inside for people who were receiving services prior to incarceration. The Dual diagnosis clients are hard to keep engaged so they continuously receive services.

- Alameda County Behavioral Health gets an allocation of approximately \$4M which funds the work of our CBOs. It allows for the provision of \$26M in services (via matching/leverage.) The overall cost is \$8 Million to ACBH.
- There is a need to maximize “bridge providers” who meet people at the bottom of the ramp as they exit jail and make sure they get to the initial appointments.
- In addition to the “matching’ of data, Probation Officers can refer clients to AB 109 funded services, but not the entire ABCCH provider network; to receive health care services not funded by AB 109, clients need to be screened by CenterPoint.

Update on measuring the quality-of-life for probation clients:

- Probation currently has two surveys, one examines client’s assessment of the services received from contracted CBOs, which does not measure quality-of-life.
- The second is a Probation exit survey. Much of this survey focuses on the relationship with their Probation Officer, were you referred to enough services, do you have a job etc. It measures some quality-of-life questions, but there is no baseline data, which makes it limiting.
- Probation staff is looking at what quality-of-life surveys exist and plans to bring some suggested survey questions to the March Process and Evaluation Workgroup meeting.
- A question was raised about including data points i.e., how many people are homeless, and interviews from peers which may provide insight that you would not get from surveys. There was also a suggestion of conducting focus groups.

Discussion about future meetings:

- The Board of Supervisors plans to lift the state of emergency in Alameda County at the end of February. Therefore, many meetings will return to following the Brown Act; County Counsel has stated the Process and Evaluation Workgroup meetings do not need to be Brown Act compliant.
- After some discussion it was agreed to have hybrid meetings (in person and accessible via the internet) for the next three months.

The meeting adjourned at 11:42