

Alameda County Sheriff's Office

Recommendation Template March 2024

Inclusion Criteria

- **Accuracy:** Is this recommendation factual and/or an accurate assessment of current practice?
- **Mission-Driven:** Will it reduce the number of people with mental illness in Santa Rita jail?
- **Racial Equity:** Will this recommendation help reduce the racial disparities in incarceration at Santa Rita jail?
- **High Utilizers:** Will this recommendation support people who are repeatedly touching the system, i.e. people who cycle between jail, homelessness, and other informal family supports?
- **Level of Effort:** How complete or effort-ful is the recommendation in its current state? Is there a fully fleshed out recommendation that we need to consider as a group, or is this a brief phrase or string of words?
- **Data-Driven:** Is the recommendation data-driven?
- **Actionable:** is the recommendation "actionable" or "implementation-ready"? Does the recommendation identify the people/agency/CBP/other entity that will do the work and be held accountable for the outcome? Does the recommendation set forth achievable and quantifiable metrics and a time table by which progress can be measured?
- **Avoid Net-widening:** Does this recommendation help "shrink the net" for the number of people who are falling into the CJ system?

2. Collaboration/ Whole Person Care/ Case Management

Recommendation	Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/ Outcome, and Racial Equity measures	Notes
<p>2B: Interagency Communication and Coordination: In the interest of non-duplication of efforts and prevention of individuals falling through the cracks of services, the Taskforce recommends the following actions to increase collaboration between agencies:</p> <ul style="list-style-type: none"> ● Each county agency to assign a delegate to be the inter-agency communication liaison. If it is not possible to have a dedicated staff person, then establish a communication strategy. (All Agencies) ● Create a central contact point for triage and communicating to clients and Public Defenders about services so programs don't get overbooked. (ACPD) ● Community MH providers contacted by custody staff upon intake and during service coordination to plan for possible referral to service providers for collaborative courts or appropriate discharge and service coordination. (ACSO) ● ACBH/AFBH, ACSO/Wellpath to implement coordinated service assessment and connection to in custody services and referrals for CBO providers.(ACBH, ACSO) 	<p>Key Partners:</p> <ul style="list-style-type: none"> ● ACBH ● ACPD ● Court <p>This delegate would be the SRJ Administrative Captain.</p> <p>ACBH/Wellpath CBO's/courts</p> <p>This process is in the pilot phase.</p>	<p style="text-align: center;">Better communication between county partners and Community Based Organizations (CBOs)</p> <p>Provides a direct point of contact with the agency.</p> <p>Referral process during intake</p> <p>Coordinated care</p>	<p style="text-align: center;">TBD</p> <p>In progress</p> <p>TBD</p> <p>TBD</p>	<p>Does not apply</p> <p>This process breakdowns re-entry barriers by having coordinated care.</p>	<p>CAL-AIMS and Reimagine Adult Justice (RAJ) have addressed this gap and are already in the process of addressing the issues.</p>

<ul style="list-style-type: none"> ● ACBH/AFBH, ACSO/Wellpath to implement coordinated discharge efforts and central point of contact for CBO providers. (ACBH, ACSO) ● Assign personnel to family liaison roles within ACBH FSC or Alameda County Sheriff’s Office (ACSO) in order that family caregivers are able to provide what can be vital information on the medical and psychiatric history and current needs of the incarcerated person. (ACBH, ACSO) ● Service roadmap: ACBH to develop a roadmap from Santa Rita Jail (SRJ) to the programs and facilities providing treatment and re-entry support. (ACBH) ● Evaluate the implementation of all elements of a No Wrong Door policy, as required by CalAIM, in Alameda County, and determine needed next steps that ensure access to care. (ACBH) ● Conduct a comprehensive assessment and redesign of ACBH ACCESS line that ensures access to services consistent with CalAIM, No Wrong Door policy, and clinical need. (ACBH) ● Non-clinical public safety database at county level of high-contact individuals; LE, DA’s Office, Probation/Parole communication too. (ACSO) 	<p>This will be included during the implementation of Cal-AIMS.</p> <p>The on-duty Watch Commander.</p> <p>As part of RAJ; ACSO, ACPD, and ITD are in the process of creating a database to be shared.</p>	<p>Coordinated care</p> <p>Provides one access point to ensure information is received.</p> <p>Communication between Law Enforcement partners and County agencies.</p>	<p>TBD</p> <p>TBD</p> <p>TBD</p>	<p>This process is equitable to all involved.</p> <p>Does not apply.</p> <p>Does not apply</p>	
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3. Community Based Support/Outreach/Education

Recommendation	Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/ Outcome, and Racial Equity measures	Notes
<p>3A: Peers must be provided with adequate training, support, and compensation to serve in front line, promotional, decision-making, and leadership positions. Training/support should include:</p> <ul style="list-style-type: none"> Specialty and diversion programs, resources, and outreach information to improve grassroots coordination including linkages in threshold languages (all Agencies); Court operations, legal language, and making decisions (Court, PD/DA); interventions to facilitate peer support groups, family collaboration, street outreach, and de-escalation services (ACBH); Jail services, in-reach, and advocacy (ACSO, ACBH); access to decision-making meetings and validate (uplift?) peer expertise (all Agencies); Medi-Cal billing and other charting to expand peer tasks/positions (ACBH); 	<p>Key Partners:</p> <ul style="list-style-type: none"> County ACBH Court <p>ACSO allows individuals with lived experience into SRJ to provide services on a case-by-case basis.</p>	<p>It allows lived experience individuals to assist those in our custody.</p>	<p>Does not apply</p>	<p>This model aligns with best practices.</p> <p>In progress.</p>	

<ul style="list-style-type: none"> Support/subsidies to help peers obtain certifications, credentials, and on the job experience (all Agencies); Fair pay for lived expertise as equitable to professional and educational experience (County and Agencies). 	<p>We currently have a vocational program at SRJ.</p>	<p>It provides a living wage upon release.</p>	<p>Currently using a federal grant.</p>		
<p>3B: Expansion of peer workforce must include placement in key spaces and uplifting of their expertise in front-line and leadership roles. These positions/locations include:</p> <ul style="list-style-type: none"> School liaison to support families, provide respite, and mitigate conflicts (ACBH and Center for Healthy Schools); Family case manager/liaison for John George and Cherry Hill to respond to early MH episode situations (ACBH in partnership with AHS); Outreach in high-contact areas (e.g., hospitals, respite, etc.), community, and community hubs (HCSA, ACBH, AHS, ACSO, ACPD); Jail in-reach inside intake, units, and releasing (ACSO and AFBH); Peer-led interventions in housing programs and other spaces to address vicarious trauma and practice restorative practices (ACBH and OHCC); Placement within the court systems to help families understand processes, navigate, and connect to service (Court and PD); 	<p>Key Partners:</p> <ul style="list-style-type: none"> County <p>ACSO conducts in reach programming to all individuals in our custody.</p>	<p>Give individuals with lived experience the opportunity to have a career that pays a living wage.</p> <p>It provides programming and resources for all in our custody.</p>	<p>In Progress</p> <p>In progress</p>	<p>The first cohort of the SRJ Laborer's training program is currently in progress.</p> <p>Our programs are available to all Individuals in our custody.</p>	<p>ACSO has partnered with Laborers' international Union of North America (LiUNA) to teach vocational training certified by the union that offers a living wage.</p>

<ul style="list-style-type: none"> ● Clinical peers to conduct street health and on first responder teams (HCSA, ACBH, LEA); ● Peer inclusion at County and Agency decision-making, policy, and funding meetings (all Agencies). 	<p>ACSO meets quarterly with CBOs to discuss programs and resources.</p>	<p>Allows communication and collaboration for best results.</p>	<p>N/A</p>	<p>It allows stakeholders and ACSO to implement change.</p>	
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7. Housing

Recommendation	Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/ Outcome, and Racial Equity measures	Notes
<p>7A: Connect People to Housing Before Reentry: The Sheriff should be required to formulate a housing-focused reentry plan, with an emphasis on supportive housing, for people leaving the jail who have a documented behavioral health diagnosis. The plan should require immediate post-release housing placement and housing navigation services. This reentry plan should begin with 90/60/30-day pre-release housing support, and should assure that people are matched to appropriate transitional housing for SMI/SUD/co-occurring populations immediately upon release.</p>	<p>Key Partners:</p> <ul style="list-style-type: none"> ● CBOs <p>ACPD</p> <p>ACBH.</p>	<p>Housing is the biggest reentry gap for recently released individuals.</p>	<p>TBD</p>	<p>In Progress</p>	<p>ACSO relies on CBOs and ACPD to make housing connections for the recently released population</p>

<p>For people who are spending less than 30 days in Santa Rita Jail, and have a documented behavioral health diagnosis, the Sheriff should ensure pre-release connection to the County’s (HCSA) housing navigation services. The purpose would be for the County’s housing navigators to connect with people before release to see if they have housing to go to; if not, then they should connect people to housing (including bridge housing options) and get them into the coordinated entry system to get assessed for permanent supportive housing.</p>					
<p>7B: Coordinated Entry at Santa Rita: Alameda County should establish a coordinated entry access point at Santa Rita Jail. This would allow County navigators to get people assessed for permanent supportive housing before exit to the community.</p>	<p>Key Partners:</p> <ul style="list-style-type: none"> ● ACPD ● CBOs 	<p>Allows individuals to immediate housing upon release.</p>	<p>TBD</p>	<ul style="list-style-type: none"> ● TBD 	<p>This operation would occur with the SRJ Transition Center</p>
<p>7C: Expand realignment supports: Alameda County should create and financially support a realignment system that supports people leaving the jails with sufficient time to gain the job training, job placement and housing navigation support to become sustainably housed at the end of their support period. At minimum, this would require expanding the length of time for realignment support services from six months to two years.</p>	<p>Key Partners:</p> <ul style="list-style-type: none"> ● CBOS ● County <p>Consult with:</p> <ul style="list-style-type: none"> ● ACPD 		<p>TBD</p>	<p>Unknown</p>	<p>ACSO would support this concept but CBOs or other community partners would have to oversee the day to day operations</p>