



Contra Costa County

AB 109 Provider Survey Findings

CAB PROGRAMS & SERVICES SUBCOMMITTEE

FY 22-23

Prepared by the Office of Reentry & Justice | August 2023

Introduction

In collaboration with the Office of Reentry & Justice (ORJ), a fourteen-question survey was distributed to all county agencies and community-based organizations (CBOs) funded by the County’s AB 109 Public Safety Realignment revenue. The purpose of the survey is to better understand the goals, challenges, and barriers to achieving the programmatic aims of each agency/organization that serves the AB 109 population. More specifically, the results from this survey will be used to inform the CAB’s budgetary and policy/programmatic recommendations to the Community Corrections Partnership (CCP). A better understanding of the needs and obstacles that programs face as well as their future direction is critical to the CAB’s support of agencies’ efforts to meet the needs of individuals returning to the community.

Survey overview:

- Distributed electronically on May 18, 2023, to all county agencies and CBOs who receive AB 109 program funds.
- 20 total responses were received representing 18 unique CBOs and county agencies.
- The primary themes across all responses included issues surrounding housing, behavioral health needs, partner collaboration, and program/agency funding and capacity.

Respondents

Survey responses were received from 20 individuals representing 18 unique CBOs and county agencies that receive AB 109 program funding.

Community Based Organization	County Agency
Bay Area Legal Aid	Alcohol and Other Drug Services
Centerforce	District Attorney’s Office
HealthRIGHT 360	Forensic Mental Health Services
Lao Family Community Development, Inc.	Health, Housing and Homeless Services
Men and Women of Purpose	Office of Education
Mz Shirliz Transitional Inc	Office of the Public Defender
Reentry Success Center	Office of the Sheriff
Rubicon	Probation Department
	Re-entry Health Conductors and Transitions Clinic Program
	Workforce Development Board

Survey recipients were asked about the region(s) of the county that they currently serve. 18 (90%) respondents indicated their agency serves West County, 17 (85%) reported serving East County, 15 (75%) serve Central County, 13 (65%) serve Far East County, and 10 (50%) respondents' agencies serve the South Central County region.¹

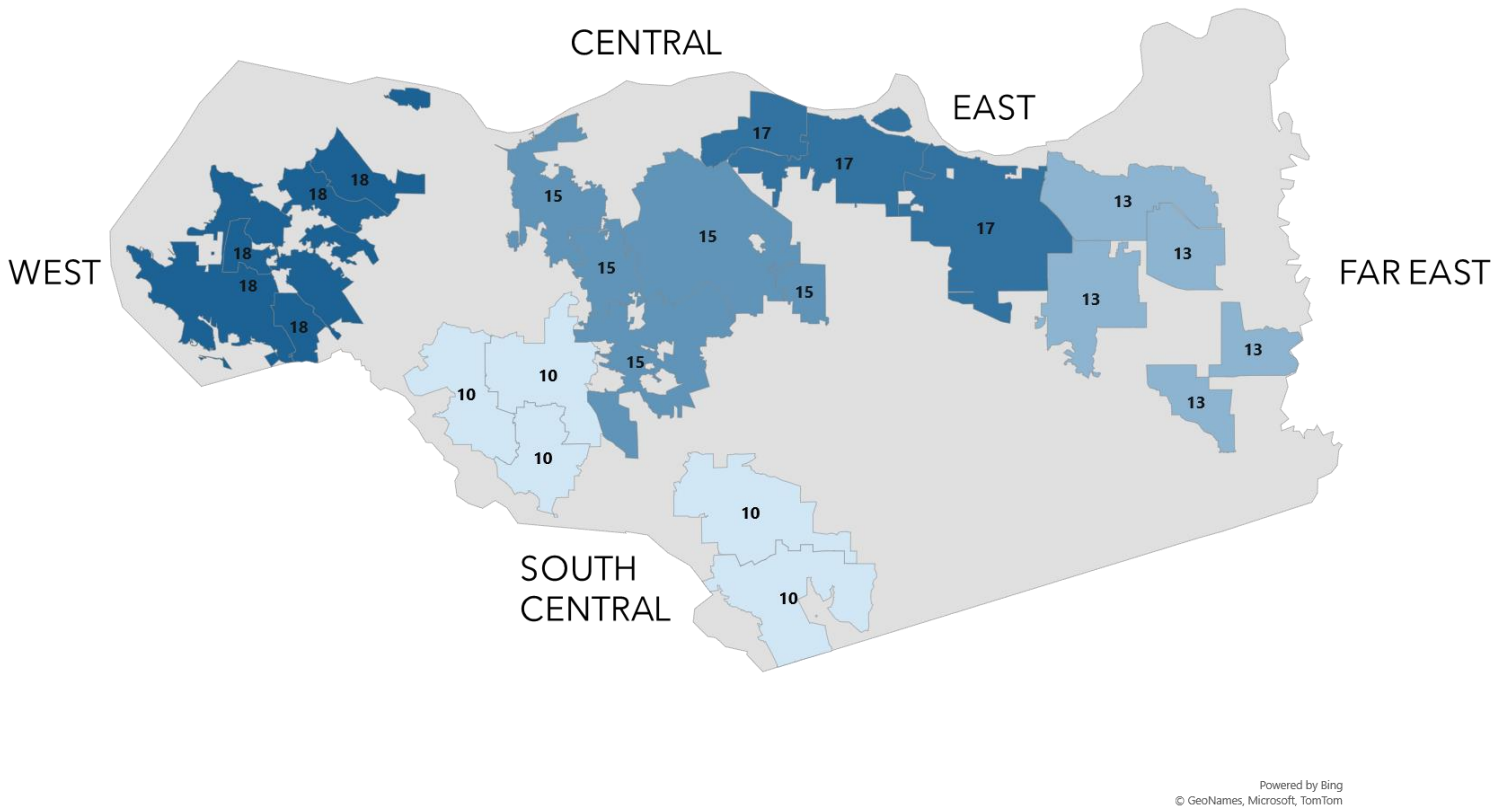


Figure 1: Counts of Providers Serving the AB 109 Population Across Contra Costa County by Region

¹ See Appendix A for a full breakdown of the cities located within each of these regions within the responses to question 3, "What regions of the County does your Agency serve?".

Figure 2 below highlights the most critical area(s) of need for individuals returning to the community according to respondents (responses were limited to the top three areas only). Housing was by far the most frequently selected option, with 18 (90%) survey respondents selecting this area of need.

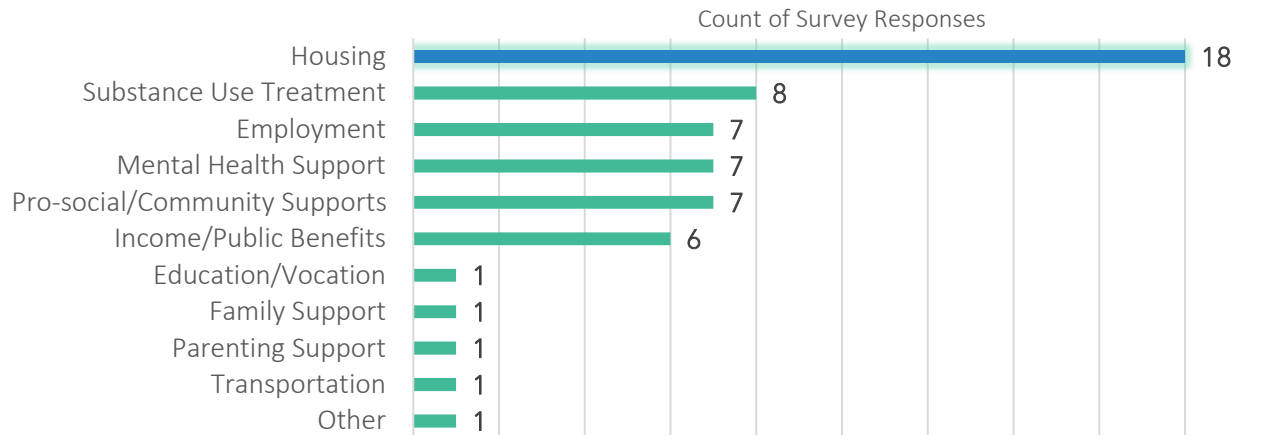


Figure 2: The Most Critical Area(s) of Need for Individuals Returning to their Communities

Additional Survey Findings

Survey recipients were asked to provide narrative responses to questions regarding regional program expansion, their greatest program challenges, potential areas of program growth, barriers that their agencies experience and supports that could help overcome them, as well as areas for future development/funding. The most common themes were identified for each response drawing on a qualitative thematic approach to analysis. Two independent reviewers from the ORJ coded the survey responses for patterns and then met to negotiate consensus and achieve inter-rater reliability. The most frequently reported themes for each question are described below.

It is worth noting that question 6 was excluded from this analysis. A number of ambiguous responses to this question suggest that the question was not interpreted in the same way among all survey respondents. As a result, common themes could not be accurately identified. Further, although question 11 was included in the analysis, responses related to program capacity and funding were not included due to response ambiguity. Please see Appendix A for the raw responses to all survey questions.

What is the greatest challenge your program(s) is facing?

The program challenges mentioned included the lack of affordable housing for clients, funding and capacity issues, and challenges related to partner collaboration. In addition to the scarcity of affordable housing, a lack of stable housing specific to the needs of individuals with behavioral health (substance use and mental health) struggles was also noted. Respondents also stated that increased coordination among providers would reduce duplication of efforts and streamline service delivery.



In what areas do you see your program(s) expanding in the near future?

The most frequently reported area for program expansion was housing. After housing, respondents also made note of future expansion in the areas of partner collaboration, pre-release planning, behavioral health, pro-social supports, and funding and capacity. Specifically, responses mentioned connecting individuals in custody to resources such as healthcare, establishing a continuity of services after release for those utilizing behavioral health services, and reestablishing peer mentorship programs.

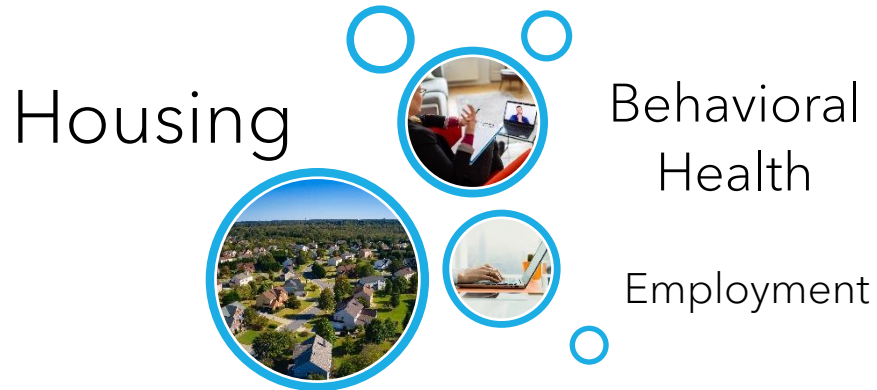
Please describe any barriers that your agency experiences when seeking to reach program goals and objectives. What supports could help your agency reach those goals and objectives?

The key barriers identified by providers surrounded partner collaboration, housing, and behavioral health. Issues regarding partner collaboration were noted most frequently; inconsistent and ineligible referrals received from other providers without a warm hand off. The lack of affordable housing and housing options specific to individuals' needs in Contra Costa County was mentioned once more as a barrier for several agencies. Some supports mentioned in the responses were increasing stable housing options that also provide substance use and mental health wraparound services, as well as increased funding for service delivery in general.

What programs and services would you suggest we consider for future development or funding in your area?

Housing and behavioral health services were the most frequently reported program/service areas that respondents believed should be considered for future funding. Although not as prevalent,

employment was also mentioned various times with several respondents hoping to see increases in funding for employment and vocational training services and programs.



Recommendations for Future Consideration

Given the feedback found within the survey's results, the ORJ deliberated internally to offer the following recommended next steps for consideration:

- **Build upon and/or replicate existing flexible funding models to expand housing assistance for other non-AB 109 justice-involved/impacted clientele.**
 - Currently, the Probation Department has an existing practice of utilizing a Housing Security Fund to address the various housing needs of probation clients under general supervision, in partnership with Health, Housing, and Homeless Services Division (H3). Similarly, the county has a newly established Housing Trust Fund, mostly funded through local Measure X tax revenues, to support homelessness prevention among other major housing initiatives such as affordable housing development.
 - These flexible funding models would allow for provider access to an array of housing assistance (i.e. hotel vouchers, rapid rehousing, resources to cover past due rents, etc.) that would stabilize a justice-impacted individual/family and ultimately disrupt long durations of homelessness among the reentry population. Expanding existing flexible housing funds should include targeted resources specifically tailored to the reentry community and go beyond serving probation clients, but would include: pre-trial clients, individuals under court probation, parolees, and families impacted by the justice system.

- **Develop Justice-Population focused Permanent Supportive Housing services for individuals living with disabilities including serious behavioral health conditions.**
 - While there is a growing need across the county for more permanent supportive housing in general, evident in the survey’s feedback is the particular need for permanent supportive housing tailored for justice-populations living with disabilities, to include those with significant behavioral health challenges.
 - An expansion of permanent supportive housing as an option for those living with disabilities and have a history of criminal justice system involvement will provide long-term care to a subpopulation often overlooked and ultimately reduce the fiscal constraints of limited resources across our systems of care.

- **Build upon and/or expand existing use of peer support specialists with lived experiences.**
 - We have seen the enormous impact of having provider staff in the field with lived experiences and equipped with cultural competencies to meet clients “where they are at” while they are seeking supportive services. Most CBO providers have made intentional efforts to hire staff with lived experiences across an array of reentry service areas. However, as was raised in the survey, more behavioral health supports particularly provided by those with lived experience as a consumer of behavioral health services AND justice involvement continue to be a key element of making strong behavioral health connections.
 - Our county’s Forensic Mental Health Unit has a model of using Community Support Workers serving individuals with mental health challenges and the Behavioral Health Services Division works in partnership with Contra Costa College to train former consumers of behavioral health services to become Peer Support Specialists. These are just a few examples of existing models within our county that can be enhanced to offer opportunities for establishing justice-impacted peer support specialists with behavioral health lived experience that can assist individuals navigating systems of care from custody to community.

- **Develop and adopt system-wide operating guidelines to better integrate a coordinated approach to the provision of pre-release and post-release services across multiple partnered agencies.**
 - In response to the survey feedback regarding duplication of services and lack of coordination and communication among and between providers, developing documentation that can serve as guidance for both county departments and contracted CBO providers on effective ways to exchange information and coordinate services for mutual clients will set the stage for improving transitions

from in-custody services to connections with post-release community programming and ongoing after care.

- It is important to note that with process planning and setting a broad range of protocols for system operations would require consensus building among impacted agencies who could offer input on setting such guidelines.
- **Enhance partner collaborations through opportunities for ongoing learning, capacity building, technical assistance, and shared tools and communications.**
 - Frequently referenced throughout the survey was feedback referring to the need for improving collaboration, coordination, and communication among partners. While there are spaces for ongoing partner convenings such as the ORJ hosted AB 109 Partners & Providers meetings and the Probation-led AB 109 case conferences, as well as the utilization of the SAFE shared data system for service coordination among contracted CBOs, it is clear that providers are requesting improvements in workflows across system partners.
 - ORJ is committed to enhancing ongoing and effective collaboration among our county's reentry service providers. Here are just a few ways the Office can lend its support:
 - Support the establishment of communities of practice to offer ongoing learning opportunities and cross-system trainings.
 - Support community-led partner convenings or conferences offered by our contracted CBO partners.
 - Support the development of operational workgroups to identify and improve workflows and communications across partner agencies.
 - Enhance SAFE data system features to improve automation and information exchanges, while also leveraging or exploring other opportunities to expand the umbrella of providers that can share and exchange information on mutual clients.
 - Provide an update to the Reentry Strategic Plan and support developing communications campaign to highlight the breadth of services and resources throughout the county for justice populations.

This report was prepared by the Office of Reentry & Justice. For any questions regarding this survey and report, please contact Kristina Jackson, Planner/Evaluator, at Kristina.Jackson@orj.cccounty.us.

Appendix A. Survey response data.

1. What is your Agency's name?

CCC Forensic Mental Health Services
[Rubicon]
Bay Area Legal Aid
Office of the Public Defender
Contra Costa County Office of Education
Mz Shirliz Transitional Inc
Lao Family Community Development, Inc.
Contra Costa Health - Re-entry Health Conductors and Transitions Clinic Program
Contra Costa County Office of the Public Defender
Men and Women of Purpose
Healthright360.org
Centerforce
Workforce Development Board of Contra Costa County
Probation
Reentry Success Center
Alcohol and Other Drug Services
Office of the Sheriff
Health, Housing and Homeless Services
Reentry Success Center/Rubicon
Contra Costa District Attorney's Office

2. Please select the type of Agency.

Government Department/Agency
Community Based Organization
Community Based Organization
Government Department/Agency
Government Department/Agency
Community Based Organization
Community Based Organization
Government Department/Agency
Government Department/Agency
Community Based Organization
Community Based Organization
Community Based Organization
Government Department/Agency
Government Department/Agency
Community Based Organization
Government Department/Agency

Government Department/Agency
Government Department/Agency
Community Based Organization
Government Department/Agency

3. What regions of the County does your Agency serve?

West County (i.e. Richmond, San Pablo, El Cerrito, Pinole, Hercules, Crockett, etc.);Central County (i.e. Martinez, Concord, Walnut Creek, Pleasant Hill, Clayton, etc.);South Central (i.e. Orinda, Lafayette, Moraga, Danville, San Ramon, etc.);East County (i.e. Bay Point, Pittsburg, Antioch, etc.);Far East County (i.e. Brentwood, Oakley, Bethel Island, Byron, Knightsen, Discovery Bay, etc.);
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4. If you answered Other for County region served, please specify:

Neighboring counties: SF, Alameda
Alameda, Solano, San Francisco
The [agency] works regionally in the East Bay region of the SF Bay Area, which includes Alameda County.
Entire County

5. Are you able to expand your services to other regions of the county?

Yes
Yes
Yes
No
Yes
Yes
Yes
Yes
Yes
Yes
Yes
Yes
Yes
Yes
No
Yes
Yes
No
Yes
Yes
Yes

6. If Yes or No, please explain below:

We already cover the whole county.
With adequate funding and resources we are able to expand
We cover all of Contra Costa
Clients may come from neighboring counties but cases are specific to Contra Costa
We already prepare people for release to all parts of the county as well as out of county.
If we had additional funding we could serve a broader area of the county
Because we see the needs in the community. Housing the priority need!
Current capacity is limited to East and West regions. Expansion can happen with additional staff and Providers.
Yes, as our program grows it allow the department to expand to other areas
Open to new opportunities
If we had more funding, we would be able to expand. We have the experience and the resources. We would just need more staff
We are able to expand to South County.
Yes, we are able to expand our services, due to the fact that we already work both locally and regionally.
Probation is restricted within County boundaries
We have a couple county wide programs, Holistic Intervention Partnership and Out For Good.

Only as needed basis, due to limited resources and Medi-Cal requirements
The entire County is covered
We currently serve all of Contra Costa and are always looking to expand services needed
Rubicon programs has secured funding to support PRCS individuals County wide
We may coordinate with federal, state, and other county jurisdictions on joint task forces and prosecutions.

7. What is the most critical area(s) of need for individuals returning to their communities?

Housing;Income/Public Benefits;Pro-social/Community Supports;
Housing;Employment;Substance Use Treatment;
Employment;Housing;Income/Public Benefits;
Housing;Mental Health Support;Pro-social/Community Supports;
Housing;Mental Health Support;Substance Use Treatment;
Housing;Substance Use Treatment;Parenting Support;
Education/Vocation;Employment;Housing;
Other;Income/Public Benefits;Housing;
Mental Health Support;Pro-social/Community Supports;Housing;
Pro-social/Community Supports;
Employment;Housing;Transportation;
Housing;Mental Health Support;Substance Use Treatment;
Employment;Housing;Income/Public Benefits;
Employment;Housing;Family Support;
Housing;Pro-social/Community Supports;Income/Public Benefits;
Housing;Substance Use Treatment;Mental Health Support;
Substance Use Treatment;Mental Health Support;Housing;
Housing;Income/Public Benefits;Pro-social/Community Supports;
Housing;Pro-social/Community Supports;Substance Use Treatment;
Employment;Mental Health Support;Substance Use Treatment;

8. If you answered Other for the most critical area of need, please specify:

I answered in regard to the general population. If someone is struggling with MH and/ substance use, connection to treatment services in a timely manner is important.
Health care

NA

9. What is the greatest challenge your program(s) is facing?

Hiring staff to improve our response times to referrals.
Sustained engagement, primarily due to a lack of stable housing.
capacity
Services often contingent on probation status. No funding to offer direct services. Unsatisfactory housing options (e.g. shelters).
[Program Name] could do a lot more pre-release before participants leave if our staff was larger and the community based organizations would use us as the spring board for their participants. We already do the assessments and help them with their goals so partnering is the ideal situation.
Unable to expand due to not having additional up front funding.
We are, from a subsidized housing placement to a permanent housing placement agency. In order to place our clients in permanent/ affordable housing, our clients need an employment with a stable sustain income with 3xs amount of rent to qualify for housing on their own. For temporary, clients have to move in with their family for the family reunification till they can gain or increase the income with at least \$31/ hrs.
Getting re-entry partners to recognize that health care is a part of eliminating recidivism - and is as important as housing and employment.
Access to programming
Housing
Accessing stable Housing and employment due to combination of limited work history and criminal background.
Meeting the increased demand for services.
staff capacity
Lack of resources, specifically housing, employment, and treatment agencies
Not being able to place our members in the county shelters because [Service Provider] is hard to reach and when we do reach them they are unable to support and will not come out to do an intake with our unsheltered members. Also when service provider do not return phone calls or respond to emails it is extremely hard to connect our members to services. Also, it has been challenging to refer to AB 109 housing providers, when we are unable to refer directly to [Service Provider] whom are currently the only provider with shared living available and responding to our inquiries.

Workforce challenges, alcohol and drug free housing for Individuals with substance use and ability to provide extra support while they are gaining independence at the recovery residences
As several different programs are based in the facility, we have noticed the lack of communication between programs that cause a doubling of efforts. Better communication between all programs that come into the facilities and who they are serving would increase effectiveness and not have more than one agency doing the same work for an individual in custody.
Lack of affordable housing
The greatest challenge for the [Service Provider] is contract restrictions that do not cover the "real time" events happening on the ground. Individuals who are released in the evening hours are often too late to enter the County or private shelters and basically have no where to go for the night. Flexible funding works in these instances.
Funding

10. In what areas or ways do you see your program(s) expanding in the near future?

[Service Provider] will be expanding our MH Diversion program in response to changes in the law for individuals deemed Incompetent to Stand Trial and changes in the Department of State hospitals procedures. Hopefully this will include DSH funding for housing. Also, we hope to start working with the Pre Trial unit in the probation department.
Increased participant support. With the increases in the cost of living and housing availability diminished, we would like to be able to provide stipends and other basic need supports.
meeting with potential clients in local jails
Low level diversion from criminal justice system
More case managers to serve the growing population in custody post-pandemic. More career pathways identified to transition our participants directly into high-road, self-sustaining employment.
Would like to expand with additional homes but would need more funding for staff and program expenses.
We would like to expand the Residential housing program in Contra Costa County the same module/ program design as we are currently serving in the Alameda County Probation Department. Because our current program's result is working well.
<ol style="list-style-type: none"> 1. Expanding health access before individuals are released from jail or prison. 2. Connecting to resources as soon as an individual is released. 3. Creating equitable re-entry and health care treatment thru out Contra Costa County
Having better access and referral process for CBOs and County agencies such as behavioral health and housing/shelter
Housing
Expanding outside of Central and East County. Being able to offer transportation for participants to get to services. Being able to get more funding for SUD and MH services to continue providing assistance.
Having the ability to serve our participants, such as, indirect services, family support, relationship development, community engagement, and SUD counseling.
Providing more reentry and other funding opportunities, to help serve more returning residents and others.
Continuing to provide service to unhoused clients, minimizing their barriers by utilizing mobile probation service

We can expand by getting involved with peer mentorships and bringing back our mentor program. It would also make sense to implement free phone calls to the reentry service hubs in the detention facilities not just bail bonds so that we can make more pre release connections.
More recovery support services outside the typical conventional clinics while individuals are not yet engaged in treatment but struggling with substance use
This is a program specific question.
We are looking at opening a bridge housing program and expanding medi-cal services through California Advancing and Innovating Medi-Cal
Building community with the members of the Center at the forefront of what this looks like.
Crime intervention and prevention.

11. Please describe any barriers that your agency experiences when seeking to reach program goals and objectives. What supports could help your agency reach those goals and objectives?

As mentioned earlier, currently our biggest challenge is hiring staff, particularly clinicians. One solution might be if we can fund a training program and bring in more interns. An ongoing challenge is affordable housing that includes support for both MH and AOD services.
Recruiting and enrollment were barriers throughout the pandemic, however, over the last few months, we have experienced significant gains in those areas. Stable housing and AOD issues remain as significant challenges for the majority of our participants.
capacity - funding
See #9.
Funding, staff, direct pipelines into transitional housing, employment, etc. Increased trust and partnership with the community based organizations would make transitions much smoother for those being released.
We find it difficult to find people to come in and do groups and classes since we are not funded for that purpose.
Barriers that our agency experiences when seeking to reach program goals and objectives would be more support from our connecting agencies to provide more linkage of community services with a warm hand-off. The support that can help us reach our goals is to have more outreach through community such as job fairs, and resource fairs. Another barrier we have overcome is to meet the client where "they are" ... while in custody we now work with [In-Custody Program]. AB109 staff go into the local Contra Costa County jails and inform potential clients of our services we offer, by doing this we have already "planted a seed" and once the potential client is released from custody services are in place with us.
Consistent referrals - that would allow the program to assist 500 returning community members every fiscal year.
Having better access and referral process for CBOs and County agencies such as behavioral health and housing/shelter
Addiction Mental health Housing
Barriers: there are some CBO that still are confused about what we do as far as services. As far as support the agencies should educate themselves about our program before making a referral. This will help with knowing if the participants are eligible for services and if so, it will also help with a warm handoff.

Not having access to eligible referrals. Referrals from probation, community organizations, and from the public.
As it relates to reentry work, we do not have any barriers to report.
For [Agency] it would be for lack of local resources (i.e., employment, treatment facilities, etc)
Our continued barrier to stabilizing community members is not having shelter or housing available to connect them to other than [Shelter] which does not fit for all of our members. Also, it would be amazing to receive follow up from our partners in regard to the referrals that we make to them. Then we would be able to make additional referrals or put supportive services in place for these individuals, while bridging any gaps in making the connection.
Typically is funding. Would like to continue providing treatment to individuals who are in jail, most of whom are diagnosed with high SU severity, but unable to fully engage because the turn around release time is quick, but they return to jail. The cycle keeps repeating
Lack of communication between competing agencies in regard to program efforts for an individual in custody. Post COVID, the detention facility will begin holding quarterly informal gathering with programs that come into the facility to increase awareness of different programs as well as build rapport between the agencies.
Barriers are ongoing sustainable funding to support ongoing operations and lack of work force.
None at this time
Funding for additional prosecutorial and investigative staff.

12. What programs and services would you suggest we consider for future development or funding in your area?

I recommend a team of [Community Support Workers] and clinicians to work with individuals who have MH/AOD challenges, in custody when they are preparing for discharge and then can continue to work with them in the community. Ideally there would be housing with a reentry program for them to go to directly from custody. As we all know, if we can help individuals succeed from the day of discharge the risk of recidivism and relapse is lower.
Funding for stipends, increased funding for housing and AOD services, long term residential treatment.
SSI support - our firm has extensive funding to help clients with SSI in Alameda, including in jails, but none in Contra Costa.
Positive youth development, parks & recreation, robust education environment, prosocial activities (sports, employment) to dissuade future criminal thinking.
Housing in general, housing for co-occurring mental health and substance use disorders, applying for benefits like SSI while in custody when close to release; obtaining ID or starting process while in custody.
Funding for facilitators to do groups and classes in house. We also really would like to see a change in how funding is made available since reimbursement based is difficult for small non-profits
The program and services we suggest for consideration for future development and/ or funding in our area would be more funding for Clean slate fairs and legal assistance to reduce felonies to misdemeanors. More cultural diverse mental health services and untreated chronic health problems. In the future we would also like to see affordable housing opportunity extension for longer months. We would like to see vocational training with pay while clients learn. Provide other services such as family/marital counseling, father and children parenting classes, mediation services to reduce conflict and build positive family relationships and communication.

Create a formal referral system (required by all CCC re-entry providers) that provides a continuity of care for those returning back to the community with chronic mental and health care needs.
Other access to shared or monitored housing
More housing
Funding to help with participants move into SLE and residential programs Grants for employment as participants are preparing to transition back into the community.
Family Reunification, Evidence based parenting education workshops, Family Communication workshops. Gender specific case management. Housing stipends. Child and Family services case management. Trauma Informed care. Social support. Risk/need assessment, Individual and family/group counseling.
We recommend more returning residents and AB 109 funded organizations utilize our WIOA (Workforce Innovation & Opportunity Act) employment & training funding.
Residential treatment facilities, employment training that would lead to jobs
Mentoring, transportation, and additional staffing(Reentry Coaches) to expand our capacity.
Expand on the opportunity jail offers for treatment, then support the transition of individuals returning to the community along with employment and recovery housing
Based on feedback from the programs in the facility, housing is always an issue. Especially housing that supports co-occurring disorders.
Permanent Supportive Housing
Housing programs tied directly to the Hubs of Reentry
Mental health diversion with a housing component.

13. Are you familiar with other service providers or programs that would meet the need(s) mentioned above?

Yes
No
No
No
No
No
No
No
No
No
Yes
Yes
Yes
Yes
Yes
No
Yes
No
No

No
No

14. If Yes, please provide the name of the organization or service provider.

There are services that can partially meet the needs, HealthRight and the Reentry Success Center are the main ones I am aware of. Thank you for the opportunity to complete this survey.
Shelter inc
California Workforce Development Board for employment opportunities
Centerforce and Family Justice Center
Reentry Success Center, HR 360-CCRN, GEO Services, and CDCR.
AODS, EHSD,
West County Reentry Center, Hope Solutions, Lao Family are excellent partners