

ALTERNATIVES TO INCARCERATION WORK GROUP MEETING

Thursday, March 28, 2019

The California Endowment

1000 N. Alameda Street, Los Angeles, CA 90012



WELCOME AND INTRODUCTION OF CHAIR



▶ District 1 Community Stakeholders:

- ▶ Dr. Kelly Lytle-Hernandez, UCLA Professor & Director of the Ralph Bunche Center for African American Studies
- ▶ Peter Eliasberg, Attorney at the ACLU Foundation of Southern California

▶ District 2 Community Stakeholders:

- ▶ Dr. Herbert K. Hatanaka, Executive Director of Special Service for Groups Inc., & USC Adjunct Professor
- ▶ Karren Lane, Program Officer at the Weingart Foundation

▶ District 3 Community Stakeholders:

- ▶ Eunisses Hernandez, Campaign Coordinator at JustLeadershipUSA
- ▶ Dr. Robert Ross, President and CEO of The California Endowment

▶ District 4 Community Stakeholders

- ▶ Brittney Weissman, Executive Director of the National Alliance on Mental Illness – Los Angeles
- ▶ Dolores Canales, Director of Talent Development for The Bail Project

▶ District 4 Community Stakeholders:

- ▶ Jimmy Wu, Executive Director of InsideOUT Writers
- ▶ LaWanda Hawkins, Community Activist & Executive Board Member of Crime Victims United

INTRODUCTION OF VOTING MEMBERS



- ▶ Dr. Barbara Ferrer, Department of Public Health
- ▶ Commander Cheryl Newman-Tarwater, Sheriff's Department
- ▶ Department of Health Services
- ▶ Elizabeth Cohen, Office of Strategic Partnerships
- ▶ Gilbert Wright, District Attorney's Office
- ▶ Health Agency
- ▶ Dr. Jonathan Sherin, Department of Mental Health
- ▶ Julia Dixon, Alternate Public Defender's Office
- ▶ Maritza Dubie-Urbe, Workforce Development, Aging, & Community Services
- ▶ Mark Delgado, Countywide Criminal Justice Coordination Committee
- ▶ Melodie Larsen, County Counsel
- ▶ Michael Castillo, County Homeless Initiative
- ▶ Pamela Prewitt-McZeal, Department of Children and Family Services
- ▶ Peter Espinoza, Office of Diversion and Reentry
- ▶ Randall Pineda, Probation Department
- ▶ Ruben Marquez, Public Defender's Office

INTRODUCTION OF VOTING MEMBERS





INTRODUCTIONS FROM MEETING PARTICIPANTS

Please Share:

Name

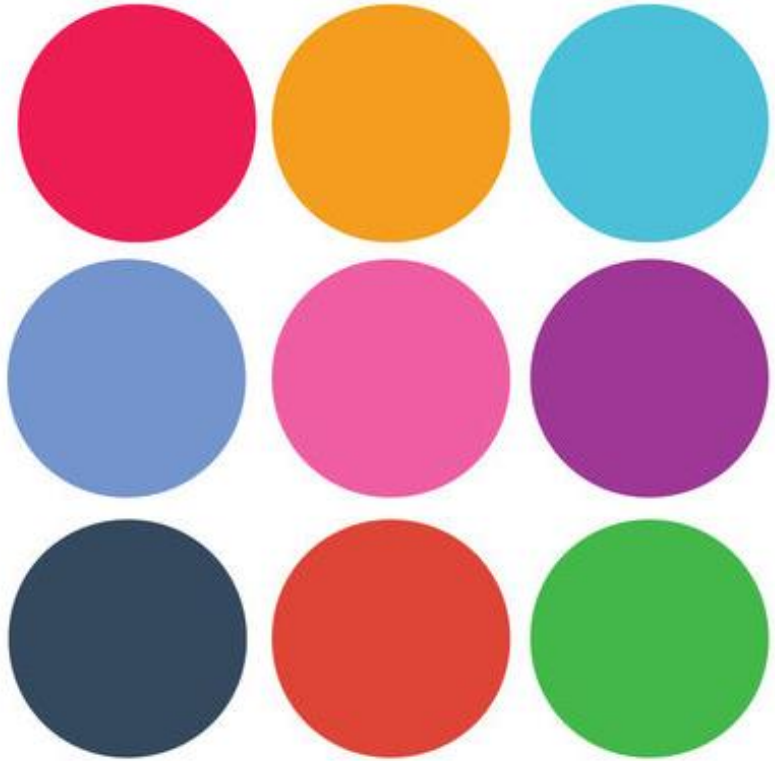
Organization/Agency

REVISIT MISSION

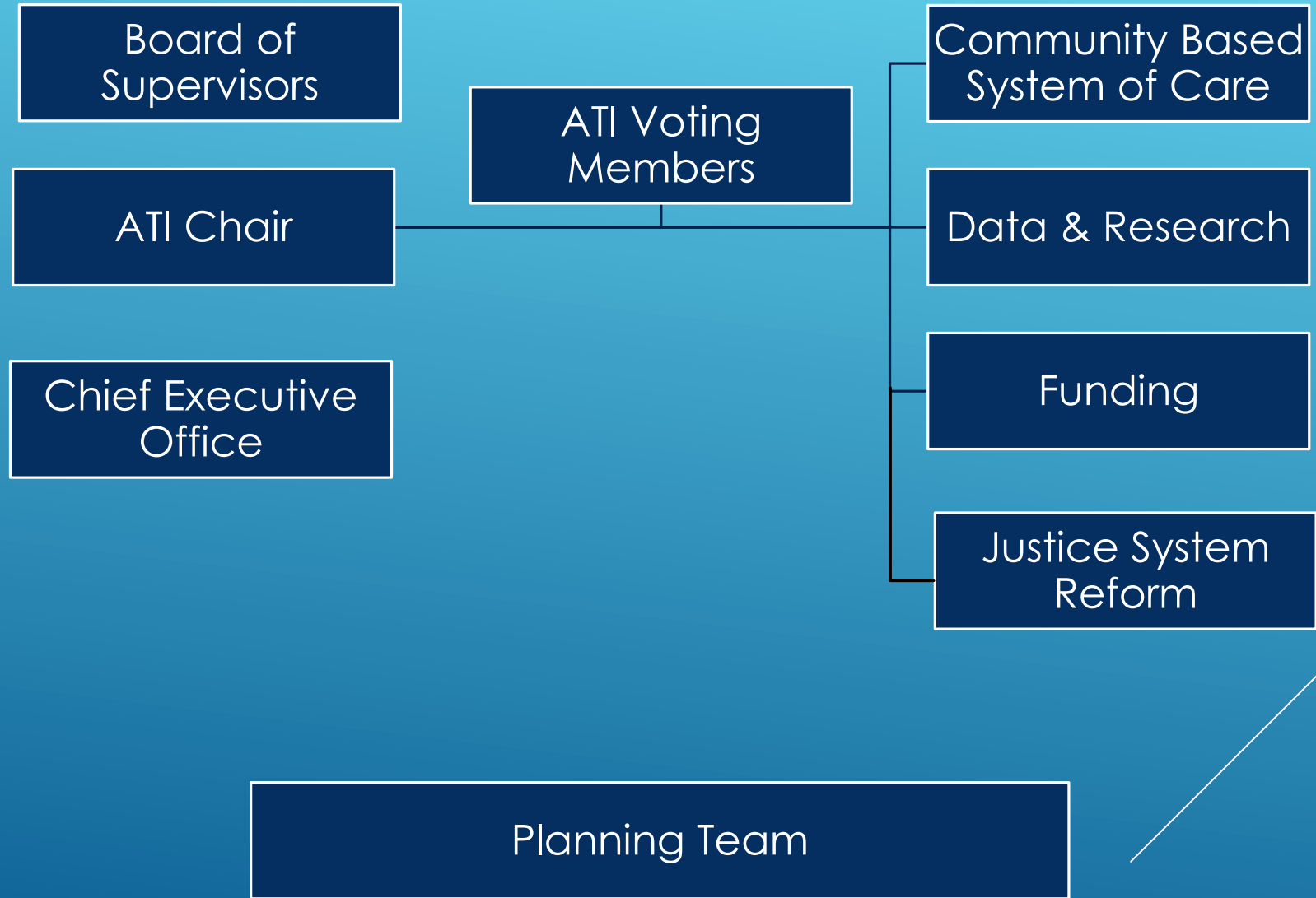
Mission: To provide the Los Angeles County Board of Supervisors a *Roadmap*, with an action oriented framework and implementation plan, to scale alternatives to incarceration and diversion so care and services are provided first and jail is a last resort.



PARTICIPANT FEEDBACK: PROCESS VALUES AND GUIDING PRINCIPLES



ATI WORK GROUP STRUCTURE





- ▶ 3 Month Process: Obtain feedback from the community through a website portal
- ▶ 6 Month Process: Work with community leaders and county regional partners to have 5-8 community feedback sessions across Los Angeles County

COMMUNITY ENGAGEMENT AND FEEDBACK PROCESS

PRODUCT AND TIMELINE

What we hope to produce for the Board of Supervisors through our process:

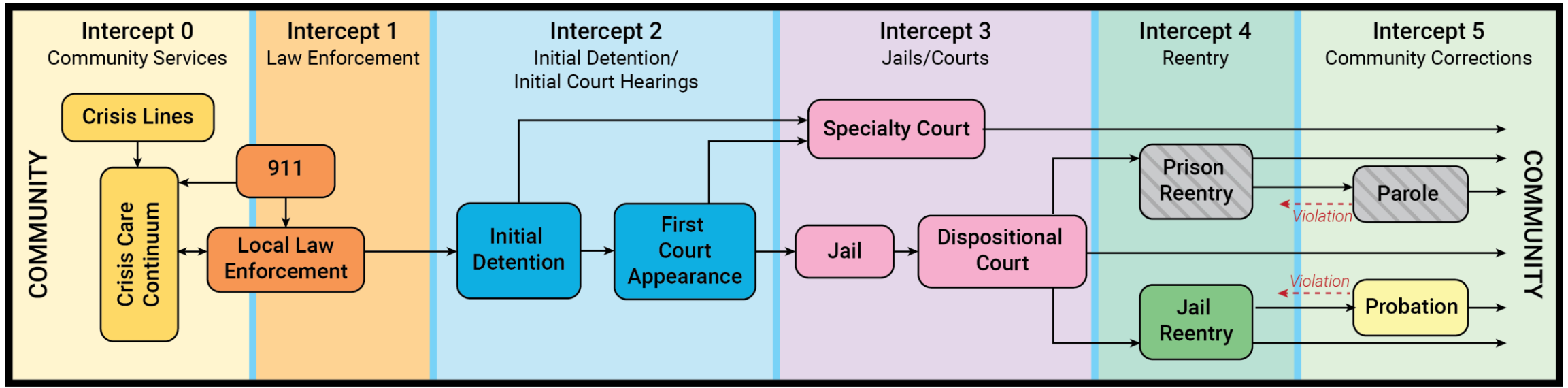
- *Interim Report*: 3-month report focusing on safe alternatives and diversion of those with clinical needs
 - May 2: Develop Recommendations for Work Group Review
 - May 23: Finalize Recommendations during Work Group Meeting
 - Early June: Submit Interim Report to the Board of Supervisors
- *Final Report*: At 9-months a report that looks at the broad population in jail and opportunities for safe alternatives and diversion



CURRENT ATI EFFORTS

- ✓ The Sequential Intercept Model
- ✓ Define Terms
- ✓ Small Group Discussion
- ✓ Background Materials





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Types of Diversion

Front-End Community-Based Diversion (Intercept 0)

- ▶ Health / Civil / Community-based responses to behavioral health crisis
 - ▶ Ex: mobile crisis response, crisis care continuum-respite care, peer support, civil legal procedures, etc.

Law Enforcement Diversion (Intercept 1)

- ▶ (911) Available options when law enforcement is called
 - ▶ Ex: Crisis Intervention Team (CIT) Programs, Mental Evaluation Team (MET) response, transport to health care system / sobering centers / community-based programs

Pre-Trial Diversion (Intercept 2/3)

- ▶ If eligible and accepts terms, defendant referred to education/treatment program. If completed successfully, charges are dismissed (no record, with exceptions).
 - ▶ Ex: PC 1000 (drug possession for personal use), 1001.36 (mental health), 1001.80 (military diversion)
 - ▶ *PC 1001.1: pretrial diversion refers to the procedure of postponing prosecution of an offense filed as a misdemeanor either temporarily or permanently at any point in the judicial process from the point at which the accused is charged until adjudication.*



TERMS



Types of Alternatives to Incarceration

Community-Based Alternatives (Intercept 0)

Responses to crisis situations that either avoid justice system contact altogether or minimize that contact, resulting in no record of arrest or charges.

- ✓ Local mental health and lived experience professionals responding (ex: HOME Team)
- ✓ Connection to DMH ISR Teams after hospitalization
- ✓ Referral to R-ICMS Agency

System-Based Alternatives (Intercepts 2/3)

Punishment or treatment responses other than confinement in prison or jail either at point of sentencing or during community supervision. Combine judicial supervision with monitored services in lieu of detention

- ✓ Placement in non-custodial setting during term of punishment (split sentence, work release, home detention, electronic monitoring, earned discharge, medical release)
- ✓ Probation
- ✓ Supervision by specialty court in lieu of custody (Ex: Collaborative Justice Courts: Mental Health Court, Drug Court, Veterans' Court, Women's Reentry Court, etc.)
- ✓ Community service
- ✓ Placement in half-way or sober house
- ✓ Fines
- ✓ Mandatory treatment or training (in-patient drug and mental health treatment)

Reentry(Intercept 4)

The process of people returning to the community from prison or jail.

TERMS





Please briefly describe efforts you are currently engaged in to:

- ▶ Improve the provision of behavioral health care in and after jail custody, and/or
- ▶ Expand diversion efforts for people with clinical behavioral health needs, and/or
- ▶ Develop alternatives to jail or prison custody for people with clinical behavioral health needs.

SMALL GROUP
DISCUSSION

Please use the posted charts to tell us which relevant reports or other background materials the group should have.

BACKGROUND MATERIALS



AD HOC COMMITTEE CHAIRS AND EXPECTATIONS

- Community-Based System of Care
- Funding
- Justice System Reform
- Data and Research
- Expectations:
 - Meet at least once between each larger work group meeting
 - Develop recommendations for your ad hoc committee topic



Community-Based System of Care: Ad Hoc Committee will think about the current state of community based capacity and need. They will describe an ideal system to expand community infrastructure, CBO capacity, regional and racial equity in services, and collaboration with the medical field. They will distinguish legislative policy and/or best practices that can be implemented in LA County.

Funding: Ad Hoc Committee will outline funding needs to support the recommendations generated by the workgroup by identifying sources of new funds and leveraging existing funds. They will conduct a feasibility analysis including short and long-term reforms with associated costs and implementation timelines.

Ad Hoc Committee Formation

Justice System Reform: Ad Hoc Committee will distinguish recent law enforcement, court and DA reforms. It will then focus on Criminal Justice Reform that would be helpful in our efforts to expand alternatives to incarceration with a focus on bail reform and improving court processes. It will also weave in pre-trial programs and sentencing reform.

Data and Research: Ad Hoc Committee will focus on developing research points that connect to the demographics of who is incarcerated, length of stay and for what offenses. It will also include the outcomes of incarceration and diversion on individuals and the community at large.



PUBLIC COMMENT



BREAK OFF INTO AD HOC
COMMITTEES, SIGN UP, AND
SCHEDULE FIRST MEETING

THANK YOU!

