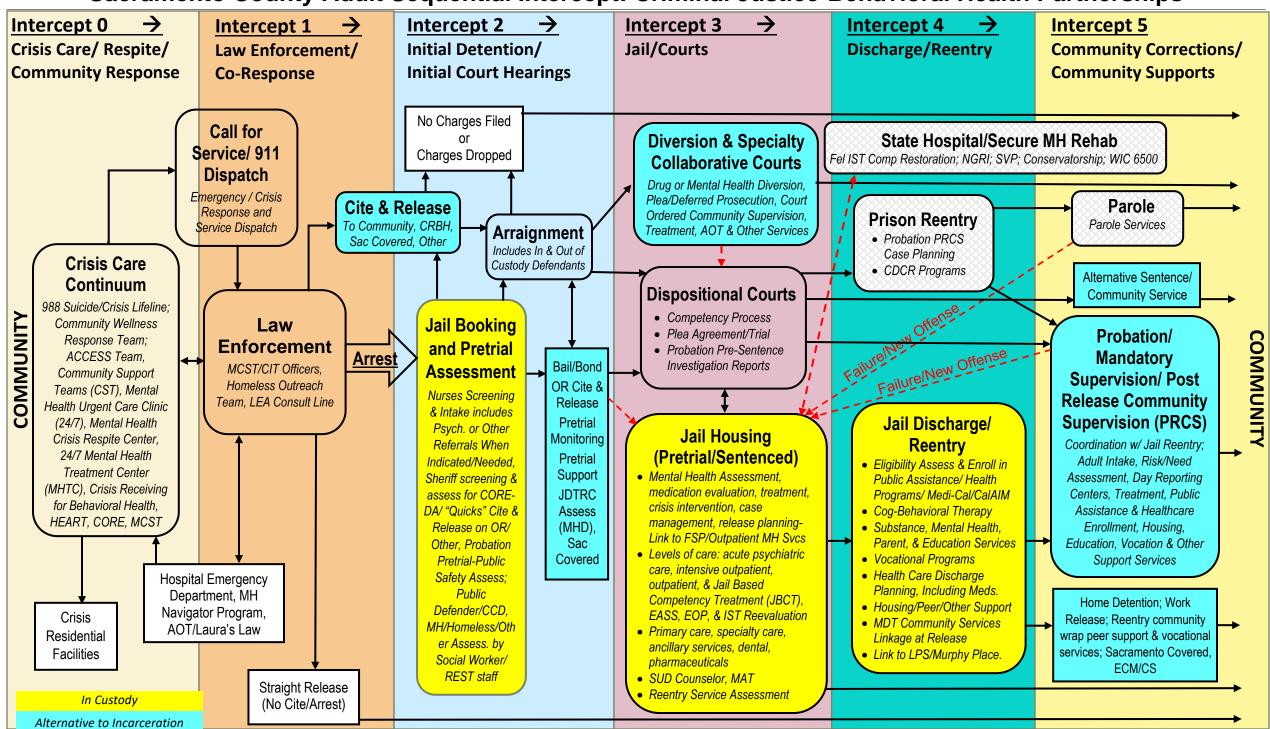
September 2023 Update

Sacramento County Adult Sequential Intercept: Criminal Justice-Behavioral Health Partnerships



INTERCEPT 0: Crisis Care, Respite and Community Response Continuum

Involves interventions for people with mental and substance use disorders prior to formal involvement with the criminal justice system. Critical components of this intercept include the local continuum of crisis care services and resources that reduce reliance on emergency response, hospitalizations, and law enforcement to serve people in crisis or with low-acuity mental health needs. In jurisdictions with fewer resources, law enforcement may be involved in Intercept 0 diversion efforts in a parens patriae, or "guardian," capacity first responder services.

INTERCEPT 1: Law Enforcement Calls and Responses

Law enforcement and other emergency service providers respond to people with mental and substance use disorders who are in crisis in the community. In many jurisdictions, when a person in crisis exhibits illegal behavior, law enforcement officers have the discretion to place the person under arrest or to divert them to treatment or services. Effective diversion at Intercept 1 is supported by training, programming, and policies that integrate behavioral health care and law enforcement to enable and promote the diversion of people with mental illness away from arrest and a subsequent jail stay and into community-based services.

Booking, Bail Setting/Review, Initial Court Hearing

Initial Court Hearing Individuals who have been arrested will go through the intake and booking process and will have an initial hearing presided over by a judicial official. Important elements of this intercept include the identification of people with mental and substance use disorders being processed and booked in the jail, placement of people with mental and substance use disorders into community-based treatment after intake or booking at the jail, and availability of specialized mental health caseloads through pretrial service agencies.

INTERCEPT 3: Courts and

Incarceration in Jail or Prison Individuals with mental health or substance use disorders who have not yet been diverted at previous intercepts may be held in pretrial detention while awaiting disposition of their criminal cases. This intercept centers around diversion of individuals from the jail or prison into programs or services that allow criminal charges to be resolved while also addressing the defendant's mental and substance use disorder needs. The intercept also involves jailand prison-based programming that supports defendants in a trauma-informed, evidencebased manner during their incarceration.

INTERCEPT 4:

Reentry Individuals transition from detention/ incarceration in a jail or prison back to the community. This intercept requires transition planning with specific considerations to ensure people with mental and substance use disorders can access and utilize medication and psychosocial treatment, housing, healthcare coverage, and services from the moment of release and throughout their reentry back into the community.

INTERCEPT 5: Community Corrections

Community corrections agencies (probation & parole) provide essential community-based supervision, as an arm of the court, to individuals released from custody. People with mental and substance use disorders may be at risk for probation or parole violations and benefit from added supports at this intercept. Use of validated assessment tools, staff training on mental and substance use disorders, and responsive services, such as specialized caseloads, are vital to reducing unnecessary violations, decreasing criminal reoffense, and improving behavioral health outcomes, through enhanced connections to services and coordination of behavioral health treatment and criminal justice supervision goals.

INVENTORY OF SERVICES

988 Suicide & Crisis Lifeline - Operated by WellSpace Health Crisis Center 24 hours a day, 7 days a week, with support from County Behavioral Health, receives calls from people of all ages in our region who are feeling depressed, hopeless, alone, desperate, and sometimes considering suicide as a way to end their pain. Crisis response referrals to CWRT and 911 as needed.

Community Wellness Response Team (CWRT), formerly Wellness Crisis Call Center and Response Team, aims to safely de-escalate crises, provide service linkage in a community-based model to decrease criminalization of mental health and homelessness. CWRT includes services to address mental health and/or substance use challenges and meet wellness, healing, prevention, resilience, support and treatment needs. CWRT mental health counselor and a peer with lived experience, receives Mobile Response Requests from 988 that may benefit from in-person de-escalation services, assess needs and risks, and create safety plans. This includes identifying and leveraging individual strengths and natural supports; coordinating with existing Mental Health Plan (MHP) and Substance Use Prevention and Treatment (SUPT) providers as appropriate; linking to ongoing services; voluntary transport to urgent/emergency resources and accessing Mobile Crisis Support Teams or other emergency responders when necessary.

Homeless Engagement and Response Team (HEART) Staffed with Counselors and Peers, uses phased approach to help encampment and shelter residents consent to and obtain behavioral services needed. Outreach and engagement with mental health and substance use screening, linkage and assessments in homeless shelters and encampments. Call (916) 875-1720 or securely submit referrals to BHS-HEARTReferrals@saccounty.gov

Mental Health Access Team – The entry point for County mental health services, a Behavioral Health Services (BHS) team of licensed mental health professionals provide Sacramento County residents referrals and/or linkage to authorized specialty mental health services. Eligibility for services is based on referral information and a brief phone screening in the individual's primary language. Individuals, caregivers, schools, medical providers, and other concerned adults can refer to the Access Team via phone, fax or US mail.

 Skills building and support groups • Case management • Intensive Care coordination • Linkage to housing services • Linkage to community resources • Medication support • Early Childhood Mental Health • Services for Youth with coexisting Mental Health and Alcohol/Substance Use Disorders. Adult and Child Provider Walk-in Access and linkage to adult and child providers can be found here.

<u>Substance Use Prevention & Treatment (SUPT) Services</u> for youth and adults struggling with substance misuse or a substance use disorder. Clinical staff conduct a preliminary assessment to determine treatment needs and level of care for recovery. In person or over-the-phone assessment and referral to an appropriate treatment provider available M-F, 8:00am–5:00pm at (916) 874-9754 or (888) 881-4881.

<u>Forensic Full Service Partnership (FSP)</u> – El Hogar's <u>Community Justice Support Program</u> FSP will apply a Multi System Team (MST) model for interagency and community collaboration in mental health service to justice involved individuals experiencing Serious Mental Illness (SMI). Currently a Multi-disciplinary Team (MDT) model is used. Services include peer support, medication support, employment support, intensive case coordination, support with benefits acquisitions, housing support, therapy, skill building sessions and groups.

<u>Laura's Law/Assisted Outpatient Treatment (AOT)</u> is a court ordered outpatient service for adults, ages 18 years and older, who have a serious mental illness and a history of (a) psychiatric hospitalizations, (b) jailings, or (c) acts, threats or attempts of serious violent behavior towards themselves or others. Consumers must first be offered voluntary treatment within the past 10 days. AOT uses the court and behavioral health systems, including substance use prevention and treatment (SUPT), to address the needs of individuals who have been unable to or have not engaged with community mental health treatment programs through a "whatever it takes" model to connect referred persons to the least restrictive, high intensity, community based FSP program. If you have any questions or need assistance completing a referral, Phone: 916-875-6508 or Email: DHS-MH-AOT@Saccounty.gov

Community Support Team (CST) is operated by Behavioral Health Services, Monday through Friday, 8:00 am – 5:00 pm. The collaborative team includes, licensed mental health counselors, peer and family support specialists, and other professional staff providing community-based flexible services to serve all age groups experiencing mental health distress, including those at risk for suicide, and the individual's family members and/or caregivers. Services can include assessment, crisis intervention, safety planning, and linkage to ongoing services and supports. The goal of CST is to provide services in a culturally and linguistically competent manner while promoting recovery, resiliency and wellbeing resulting in decreased use of crisis services and/or acute care hospitalization services; decreased risk for suicide; increased knowledge of available resources and supports; and increased personal connection and active involvement within the community.

Mental Health Urgent Care Clinic (MHUCC) operating 24 hours a day, 7 days a week, the MHUCC is a walk-in clinic for individuals all ages experiencing a mental health and/or co-occurring substance use crisis. This client-centered program focuses on providing immediate relief to individuals and families in distress, averting psychiatric emergency room visits and involuntary hospitalizations. Goal is to foster recovery for individuals and families through promotion of hope and wellness, welcoming anyone experiencing mental health-distress regardless of age and ability to pay (MHUCC is funded by the Sacramento County Behavioral Health Services through Proposition 63, Mental Health Services Act) Services: • Safe space for individuals and families, peer support and on the- spot counseling • Integrated co-occurring mental health and substance use crisis assessment • Crisis interventions, psychiatric evaluations and clinical assessments • Psych. medication evaluation and management services (excluding controlled substances) • Referral and linkage to on-going services and community supports

Mental Health Crisis Respite Center — Operated by Hope Cooperative/TLCS, provides 24/7 mental health crisis respite care in a warm and supportive community based setting to eligible adults who are experiencing overwhelming stress due to life circumstance resulting in a mental health crisis. Services include screening, resource linkage, crisis response and care management up to twenty-three (23)-hours. The program has the capacity to serve up to ten (10) individuals at any given time.

<u>Crisis Residential Facilities</u> – Short-term residential treatment programs that operate in a structured home-like setting twenty-four hours a day, seven days a week. Eligible consumers may be served through the program for up to 90 days. These programs embrace peer facilitated activities that are culturally responsive and are designed for individuals, age 18 and up, who meet psychiatric inpatient admission criteria or are at risk of admission due to an acute psychiatric crisis, but can instead be served appropriately and voluntarily in a community setting. Beginning with an in-depth clinical assessment and development of an individual service plan, crisis residential program staff will work with consumers to identify achievable goals including a crisis plan and a Wellness Recovery Action Plan (WRAP).

<u>Crisis Receiving for Behavioral Health (CRBH)</u> Program – Operated by <u>WellSpace Health</u> 24 hours a day 7 days a week at 631 H St., behind the Main Jail. CRBH provides short-term (4 to 23 hour max.) recovery, detox, and recuperation from effects of acute alcohol/drug intoxication or behavioral health crisis. Staffed by healthcare professionals to provide medical monitoring, SUD counseling, connection to supportive services/treatment, and transportation to service partners or home after completion of short-term recovery. Clients are referred by partner agencies, no walk-ins. Capacity currently 20, planned expansion to 40

Community Outreach Recovery Empowerment (CORE) Program, Sacramento County, BHS contracts with the following community-based organizations to operate CORE: Bay Area Community Services (BACS), El Hogar, Hope Cooperative, and Turning Point. BHS has 11 CORE sites throughout Sacramento County. Each CORE site provides Community Wellness Centers co-located with a specialty mental health outpatient treatment program. Peer run community wellness centers are open to any Sacramento County adult seeking safe space to engage with peer support staff, and participate in variety of meaningful

wellness focused activities, the outpatient programs provides flexible, client-driven, recovery-oriented, strength-based, trauma-informed, culturally and linguistically responsive, comprehensive community-based specialty mental health (MH) services and supports to adults age 18 years and older. Individuals can self-refer to a CORE program by reaching out to Sacramento Access Team for a screening or by walking into a CORE provider site during the designated walk-in hours for an assessment. Hours are subject to change, please reference the <u>Adult & Child Provider Walk-in Hours List</u> for latest updates.

<u>Sacramento County Mental Health Treatment Center</u> (MHTC) – Provides short term comprehensive acute inpatient mental health services, 24/7, for adults 18 and older experiencing a mental health crisis

Sacramento County Mental Health Treatment Center (MHTC) — Provides short term comprehensive acute inpatient mental health services, 24/7, for adults 18 and older experiencing a mental health crisis and/or condition. The County's Intake Stabilization Unit (ISU), adjacent to the MHTC campus' 50 inpatient psychiatric beds, provides up to 23-hour crisis stabilization and intensive services in a safe environment. The ISU responds to hospital ED staff and law enforcement calls 24/7, provides direct access from the MCSTs and SB82 triage navigator program, and receives adults and minors that have been medically cleared for 24/7 crisis stabilization services.

<u>Law Enforcement Consult Line</u> (LECL) — Available for officers responding to 911 calls in the community on clients experiencing a mental health crisis. They are encouraged to call the Mental Health Treatment Center's Intake Stabilization Unit (ISU) to consult on clients for resource assistance to work with the client. Officers may bring clients directly from the community for mental health services and crisis stabilization to the ISU if the client meets WIC 5150 criteria of Danger to Self (DTS), Danger to Others (DTO) or Gravely Disabled (GD). LEA telephone line (875-1170) in the ISU for these purposes.

911 Dispatch — Different 911 call centers serve different jurisdictions within the county. They include one operated by the California Highway Patrol and 6 by local LEA's, with the Sheriff's Office and Sacramento Police Department operating the two largest. Computer aided dispatch is utilized for deployment of appropriate responders, including dispatch of Mobile Crisis Support Teams/Co-Responders, where available.

Mobile Crisis Support Teams (MCSTs) — licensed clinicians embedded with law enforcement to respond to mental health crisis related calls for service (7 of 11 teams currently operating). Behavioral Health Service (BHS) has partnerships with the Sacramento Sheriff's Office, Citrus Heights, Folsom, Elk Grove, Rancho Cordova, Galt, and Los Rios Police Department's. Officers/Deputies trained in Crisis Intervention

Training (CIT) respond with clinicians to persons experiencing mental health crisis. Teams responding to mental health crisis aim to reduce risks and threats to self or others, building on individual, family, community, and self-identified strengths and skills to divert from unnecessary incarceration or hospitalization and provide connection for navigating service systems and access to ongoing support. Authorized mental health providers support de-escalation, safety planning and ongoing care. MCSTs also educate key individuals, family members or natural supports on how to improve health and wellness.

Homeless Outreach Team (HOT) – The mission of the Sacramento County Sheriff's Homeless Outreach Team (HOT) is to engage homeless individuals with services, along with enforcement when necessary, in order to make a positive impact in the community. The men and women of the Homeless Outreach Team utilize unique and innovative "outside the box" approaches to connect homeless individuals and families with critical services. HOT has formed and fostered partnerships with State and County agencies, as well as faith-based and private organizations, to provide services to homeless people in need.

<u>Sheriff's Jail Intake</u> – Staff provide screening during booking to identify detainees who qualify for and can be safely released on their "own recognizance" (OR) without being placed in housing units, typically within 24 hours of booking. This type of pretrial release is known as a "Quick" release. Sheriff's intake staff also identify defendants eligible for the Chronic Offender Rehabilitation Effort Collaborative Court Program. Eligible defendants are referred to the District Attorney's Office for participation in this specialty court program that provides housing, treatment and other services as an alternative to jail.

Adult Correctional Health (ACH) — Physical and mental health services for incarcerated adults in the jail system. County Primary Care operated services work in partnership with the Sacramento Sheriff's Office (SSO). ACH has several contracted providers, including UC Davis to provide onsite mental health services. Other healthcare contracts include specialty and ancillary care services. Registered nurses (RNs) complete intake screening and assessment on arrestees who are booked. Dependent on patient needs, there is a range of medical services provided both onsite and offsite (primary care, specialty care, dental, pharmacy, & ancillary services). RNs refer individuals to onsite mental health staff and can request urgent assessments when needed. Psychiatric consultation is available 24/7 at both jail facilities. Psychiatric services include evaluations, medication management, crisis intervention, treatment, case management and discharge planning. Services include acute psychiatric care, intensive outpatient, enhanced outpatient, outpatient, and jail based competency treatment (JBCT). ACH contracts WellSpace Health for onsite Substance Use Disorder (SUD) Counselors to provide SUD assessments, education, counseling, and community-based service linkage. ACH also collaborates with Behavioral Health, Collaborative Courts, Probation, and other partners. Medication Assisted Treatment (MAT) services are provided when clinically indicated. A discharge planning team provides health care linkage for patients post-release, including those with chronic health conditions, SMI, and SUD, and provide a 30-day supply of prescribed medication. Prescriptions go to the Primary Care Clinic post-release for those receiving psychotropic medication. ACH contracts Sacramento Covered for additional jail release service connection for health plan enrollment, medical/dental care connections, nutritious food, MH services, transportation arrangements, mobile phone, ID and other documentation services before the IST client is admitted into a JBC

<u>Probation Pretrial</u> Assessment, Monitoring and Community-Based Services for detainees who can be safely released to the community pending trial, without regard to ability to post bail. Probation Officers apply the <u>Public Safety Assessment</u>, a validated risk assessment tool, and provide pretrial reports to Superior Court that include risk for new offense and failure to appear. Those released for pretrial monitoring may be provided further assessment and linkage to health and support services, court reminders, office visits, community visits and GPS monitoring.

<u>Public Defender/CCD Pretrial Support</u> - Social workers/CCD staff conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, SUD, housing and other support services, and provide ongoing case management support after release (<u>CSG Justice Center Article Aug 2023</u>).

<u>Public Defender, Conflict Criminal Defender and the District Attorney Review</u> – Working together along with the Court and Behavioral Health experts, they identify defendants who are eligible and appropriate for diversion or collaborative court programs that provide community-based treatment and other services. Additionally, specialized attorneys work to ensure appropriate actions and services for LPS/Murphy's Conservatorship and WIC 6500 (defendant subject to a pending indictment or information for a serious and violent felony and found to present a substantial danger of physical harm to others), mentally disordered offenders, sexually violent predators, and for mental incompetence/insanity extensions.

<u>Jail Diversion Treatment and Resource Center (JDTRC)</u> – Opened December 2021 for Misdemeanor Mental Health Diversion Court applicants and participants 18 years and older who are living with mental illness and/or co-occurring substance use disorder, and/or suffering from trauma. Located in close proximity to the Main Jail and Sacramento Superior Court, services include mental health evaluations and linkage to services, onsite therapeutic classes, referrals to community-based service providers, contact with a probation office, and onsite meetings with legal representation.

Mental Health Diversion (Terms differ for Misdemeanor & Felony Defendants) – Superior Court may grant Mental Health Diversion to defendants eligible pursuant to Penal Code Section 1001.36

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Misdemeanor Mental Health Diversion	Defendants facing misdemeanor charges or found IST and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36.	Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender's Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed.	6-12 months	No Cap	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance
Felony Mental Health Diversion	Defendants facing felony charges or found IST and suffering from mental illness or co-occurring mental and substance use disorders, approved for participation by the Court under PC 1001.36 (eligibility expanded Jan. 1, 2023).	Outpatient and/or residential services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Social Worker Services provided through the Public Defender's Office. Full Service Partnership supports such as housing, employment, education and transportation. Upon completion, case dismissed.	12-24 months	No Cap	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance, Probation

<u>Drug Diversion</u> (PC 1000) – Under Penal Code Section 1000, defendants who meet criteria: (1) Within 5 prior years, defendant has not been convicted for controlled substance offense other than listed under PC 1000. (2) Offense charged did not involve a crime of violence or threatened violence. (3) There is no evidence of a contemporaneous violation relating to narcotics or restricted dangerous drugs other than a violation under PC 1000. (4) Defendant has no prior felony conviction within five years prior. Drug diversion program clients enter a plea of not guilty and waives the right to a trial by jury and proceedings are suspended during participation in a drug treatment program for up to 18 months. Court may terminate diversion and reinstate criminal proceedings for failure or dismiss charges for successful completion.

<u>Sheriff's Alternative Sentencing Program</u> (ASP), Work Project, & Home Detention – provides an opportunity for people to work community service hours in lieu of paying fines, allows certain sentenced individuals the ability to work in their community in lieu of serving time in jail, and provides home detention alternative to jail for sentenced individuals to support their family, employment and education goals.

<u>Incompetent to Stand Trial (IST) Reevaluation</u> - DSH evaluators work with Sheriff's jail staff to conduct reevaluations via video conference for IST inmates currently on the DSH waitlist for restoration services. Those on the waitlist for 30 days or more are prioritized for IST Reevaluation. If the reevaluation finds the felony defendant has stabilized in custody, the Court is notified criminal case proceedings can resume.

<u>Jail Based Competency Restoration (JBCT)</u> – Up to 44 beds (32 male, 12 female) at the Rio Cosumnes Correctional Center (RCCC) for restoration of local Felony IST defendants who have been committed to the Dept. of State Hospitals (DSH) for restoration. DSH funding to SSO for JBCT with UC Davis contracted by Adult Correctional Health to provide the restoration treatment.

<u>Public Guardian LPS/Muphy's Conservatorship Placement</u> – Felony IST defendants returned from the Dept. of State Hospitals to jail unrestored are evaluated for conservatorship. If the defendants is diagnosed with a mental health disorder, there is an active complaint, indictment, or information charging a felony involving death, great bodily harm, or a serious threat to the physical well-being of another, a probable cause finding, and a medical finding of current substantial danger of physical harm to others, the Court can make a referral to the Public Guardian (PG) for Murphy conservatorship. The PG will complete an investigation, if all legal criteria are met, the PG will petition the probate court for Murphy conservatorship. If Murphy conservatorship is granted, the PG will make a referral to

Behavioral Health Services (BHS) for placement in a secured setting. If the defendant does not meet Murphy criteria, and as a result of a mental health disorder they are unable to provide for their basic personal needs for food, clothing or shelter and they are placed on a hold and certified as gravely disabled, the inpatient psychiatrist can make a referral to the PG for LPS conservatorship. If legal criteria is met, the PG will petition Probate Court for LPS conservatorship. If the LPS conservatorship is granted the PG will make a referral to BHS for services and/or placement. Types of placements include:

Community – Independent Living, Room and Boards, Crisis Residential Facilities, Residential Facilities, Assisted Living Facilities, Straight Skilled Nursing Facilities (SNF), Transitional Residential licensed board and care homes with in house case management and psychiatric services (requires BHS approval); Sub-acute - county contracted secured settings, includes Neuro-Behavioral Programs, Institute for Mental Disease (IMD) long term care SNF with special program to treat mental illness, 60 plus years and older (medical needs plus MH diagnosis), and Mental Health Rehabilitation Centers (MHRC) for 3 to 6 month stay focused on community re-entry for ages 18 -59 (must be on a legal hold to stay at sub-acute, unless signing in voluntarily), State Hospital facility that is County contracted for subacute long term care (highest level of care); Acute - MHTC for acute inpatient psychiatric stays 4 to 7 days, other Psychiatric Health Facilities (PHF) or private acute inpatient psychiatric hospitals. Note: The Public Guardian has a policy, based on County Counsel opinion, that Murphy conservatees must be placed in secured settings. The purpose of Murphy conservatorship is protection of the public and treatment, these individuals currently represent a substantial danger to others. All conservatees shall be placed in the least restrictive environment to meet their needs. Only in rare circumstances, where it is clinica

<u>Sheriff's Reentry Services</u> – Rehabilitative vocational, educational, and treatment services that aim to reduce recidivism and prepare offenders for successful community reintegration. Evidence based assessment tools are utilized to determine program placement. Upon release from custody, ongoing program services are available in the community for up to a year.

Medi-Cal/CalAIM Justice Involved Initiatives include Providing Access and Transforming Health (PATH), Population Health Management (PHM), and the County Behavioral Health Delivery System to serve individuals transitioning to the community from jail where the Medi-Cal/CalAIM application process, Behavioral Health (BH) assessments for Collaborative Courts, BH linkage, Re-entry planning, and 90 day pre-release services are all done in custody. At full implementation in 2024, case management, clinical consultation (physical & BH), lab/radiology, community health worker, MAT, medication administration services will all be available through CalAIM. Enrollment in CalAIM and other safety net services is done through the Department of Human Assistance (DHA) staff embedded within jail facilities.

Adult Day Reporting Centers (ADRC's) – Probation operates three ADRC locations with intensive on-site and community supervision for individuals 18 and over who have been assessed as having a moderate to high-risk to reoffend and high criminogenic needs. Depending on client needs, the phased program lasts 9 to 12 months. ADRC includes cognitive-behavioral treatment classes; referrals to community-based organizations; job skill assessments; vocational training; group, individual or family counseling; educational services including assessment, GED preparation, and testing; emergency housing; family support services; pro-social activities; and participation in the Community Outreach Program to provide restitution to victims. Adult Correctional Health nurse navigators and Behavioral Health mental health clinicians are onsite for screening and referral services.

Expungement/Record Modification – Superior Court and Probation have resources to assist individuals who would like to seek criminal record expungement or modification.

<u>NEW SERVICES 2023:</u> Enhanced Care Management (ECM) and Community Supports (CS) are foundational components under the State's new California Advancing and Innovating Medi-Cal (CalAIM) initiative. ECM is a whole-person, interdisciplinary approach to comprehensive care management that addresses clinical and non-clinical needs of high-cost, high-need managed care members across multiple delivery systems. CS are non-traditional support services provided "in-lieu" of more costly services, including hospitalizations and nursing facility stays covered by Medi-Cal. Sacramento County is working to implement ECM and CS expansion for justice involved individuals being released from jail, starting in January 2024. Additional health service resource information is available here.

NOTE: The ongoing staffing crisis for health professional positions has impacted go-live/start-up, current and expansion plans and operations for many of the behavioral health services available.

Sacramento County Collaborative and Specialized Courts

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Recovery Treatment Court (formerly Drug Court)	Defendants charged with non-violent drug possession, violations of probation, and certain drug-related and property crimes.	Residential and outpatient services including detoxification, substance misuse, mental health treatment, relapse prevention, and reentry services; drug testing, case management, housing, and therapeutic (yoga, nutrition, mind-body) services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated or the case may be dismissed.	10 - 18 months	80 - 125	Court, Probation, Attorneys, Dept. of Health Services, Dept. of Human Assistance, and Service Providers
Mental Health Treatment Court (MHTC)	Non-violent defendants diagnosed with specified mental health disorders or co-occurring mental and substance use disorders, approved for participation by the DA's Office.	Residential and outpatient services including case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, and ongoing specialized mental health services. Full Service Partnership supports such as housing, employment, education and transportation. Random drug/alcohol testing. Upon completion, suspended jail time is lifted, probation may be terminated, and the case may be dismissed.	12 - 18 months	150 - 200	Court, Attorneys, Dept. of Health Services, Probation, and Mental Health and Substance Use Treatment Service Providers
Prop 36 Court	Defendants charged with non-violent drug possession and transportation for personal use.	Report to Probation for drug/alcohol/mental health screening and treatment referral. Four "fee for service" multi-disciplinary sites are available for detoxification, residential, outpatient, methadone, sober living, vocation, family counseling, literacy, and communication skills services. 12 weeks intensive outpatient services, 12 weeks aftercare, and proof of completion required. Upon completion, plea is withdrawn and case dismissed, terminating probation.	6 months	100	Court, Attorneys, Substance Use Prevention and Treatment, and Service Providers
DUI Treatment Court (DUITC)	Defendants charged with a 3 rd , 4 th , or 5 th VC 23152 (DUI) within a 10-year period.	Residential and outpatient services including detoxification, substance misuse, relapse prevention, drug testing, and case management services; and probation supervision. Upon completion, suspended jail time is lifted and probation may be terminated early.	12 - 18 months	50	Court, Attorneys, Dept. of Health Services, Probation, and Service Providers
Veterans Treatment Court (VTC)	Veterans charged with offenses related to issues from US Military service. No sex, arson or gang offenses.	Any combination of residential and/or outpatient treatment including case management, Veteran mentoring, substance abuse and mental health services, and random drug/alcohol testing by VA and Probation. Upon completion, case is dismissed and sealed, unless other agreement specified.	12 - 18 months	30	Court, Probation. Attorneys, and Veterans Affairs
Reentry Court	Defendants charged with non-violent drug and property offenses eligible for County Jail Prison (CJP) or State Prison.	Program services may begin in custody and upon release include participation in Probation's Adult Day Reporting Center (ADRC), housing, education, vocation/employment, individual and group counseling, and connection to county medical, general and CalFresh services. Upon completion, term of probation is reduced and the jail sentence is vacated or permanently suspended.	12 - 18 months	50	Court, Probation, Sheriff's Office, Attorneys, and Substance Use Prevention & Treatment
ReSET Court (Reducing Sexual Exploitation & Trafficking)	Defendants charged with prostitution or prostitution related offenses; may have other misdemeanor charges.	Prostitution diversion program services include health and wellness education, HIV testing, group and individual counseling, trauma based therapy, wraparound, life skills and peer mentoring services. Upon completion, the initial plea is withdrawn and the case is dismissed.	3 - 6 months	100 - 120	Court, Attorneys, Community Against Sexual Harm (CASH), and Substance Use Prevention & Treatment

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Chronic Offender Rehabilitation Effort (CORE, previously CNO) Program	Misdemeanor offenders within District Attorney Community Prosecution areas with at least 10 arrests, citations, and/or bench warrants within 12 months.	Residential placement is offered in lieu of jail time, which is stayed pending successful completion of program services. Substance abuse and mental health assessment and treatment services provided by County and community-based providers. Homeless and related social, health and fiscal services also available. Upon completion, sentence is modified per terms of an original plea agreement.	90 days	20 - 40	Court, Attorneys, County Substance Use Prevention and Treatment, Sac Steps Forward, and Service Providers
City Alcohol Related Treatment (CART)	Individuals with 5 alcohol-related City Code citations and/or arrests in the past 18 months, need housing, and are in-custody for a violation of probation.	As a term of probation, 30 days of residential alcohol treatment services at Volunteers of America (VOA) in lieu of a 30 day jail sentence. Upon completion, the 30 day jail sentence is permanently stayed.	30 days	80	Sac City Attorney, Sacramento Police Dept., VOA, Sac Housing and Redevelopment Agency
Loaves and Fishes Court (for Homeless)	Homeless low level traffic and misdemeanor offenders (trespassing, drinking in public, etc.) who cannot afford to pay court fines and fees.	On-site consultation at Loaves and Fishes Legal Clinic, with the Public Defender's Office. Legal remedies through the Court include resolving infraction cases through participation in community-based services, such as clean and sober living facilities and/or mental health treatment. In addition it allows individuals to work off debt from tickets and fines by doing community service hours. Completion of community services hours may result in the case being dismissed.	3 - 6 months	800 cases processed annually	Court, District Attorney, Public Defender, Loaves and Fishes

Limited Term Grant Programs

Title	Who It's For	What It Includes	Length	Capacity	Agencies Involved
Public Defender Pretrial Support Program *Launched 4/2020 (Partially funded by Fed & State Grants)	Adults in custody and/or released pretrial pending criminal charges and suffering from mental illness. Support services also available to assist Probation's Pretrial Monitoring Clients, as needed.	Social workers embedded in the Public Defender's Office conduct clinical forensic, housing and other need assessments for pretrial defendants booked into jail, develop coordinated safety jail discharge plans, link individuals to mental health, housing and other support services, and provide ongoing case management support after release. Discharge support from the Exodus Project for individuals released from jail and linked to a Public Defender Social Worker includes transportation, cell phones, access to charging stations, food, clothing, and peer mentorship.	0-6 months	No Cap	Courts, District Attorney, Public Defender, Health Services, Probation, Exodus Project (Contracted CBO)
DSH Felony Mental Health Diversion *Launched March 2021 (Grant funding through June 2024)	Defendants facing felony charges who are likely to become Incompetent to Stand Trial (IST) or found IST; and approved for participation by the Court under PC 1001.36.	Telecare's EMPOWER program includes clinical forensic and housing assessments, outpatient and/or residential services with case management, benefits acquisition, crisis response, intervention and stabilization, medication evaluation and support, ongoing specialized mental health services, transportation, employment and education support. Housing provided to 50% of the clients. Social Worker Services provided through the Public Defender's Office. Each participant will have psychiatrist, MD, nurse practitioner, case manager, peer recovery coach, attorney, and social worker. Upon completion, case dismissed.	12-24 months	100	Court, Public Defender, Conflict Criminal Defender, District Attorney, Health Services, Human Assistance, Probation, Telecare (Contracted Provider)