



**CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
DIVISION OF REHABILITATIVE PROGRAMS
Director's Stakeholder Advisory Group Meeting
October 29, 2013**

Meeting Notes

The first Division of Rehabilitative Programs Director's Stakeholder Advisory Group (DSAG) meeting convened on Tuesday, October 29, 2013 at 10:00 a.m. at the Richard A. McGee Correctional Training Center, 9850 Twin Cities Road, Galt, CA 95632.

DSAG Members: Present at the meeting were **Millicent Tidwell**, Chair, Director of the Division of Rehabilitative Programs (DRP); **Rosie McCool**, Chief Probation Officers of California (Alternate for Karen Pank); **London Biggs**, California State Association of Counties; **Shawn Jenkins**, WestCare; **Norman Jackson**, University of California, San Diego (Alternate for Igor Koutsenok); **Deanna Kivett**, Mental Health Systems (Alternate for Alyce Belford); **Marc Hering**, CenterPoint, Inc (Alternate for Sushma D. Taylor); **Tony Hobson**, County Alcohol and Drug Program Administrators Association of California (CADPAAC); **Tara Shepherd**, CADPAAC (Alternate for Tom Waggoner); **Brett O'Brien**, CADPAAC; **Andy Williamson**, CADPAAC; **Matt Perry**, Sacramento County Office of Education; **Judge Stephen Manley**, Santa Clara County Superior Court; **Steve Moore**, California State Sheriffs' Association; **Albert Senella**, California Association of Alcohol and Drug Program Executives (CAADPE); **Vitka Eisen**, HealthRight 360; **Vanessa Nelson-Sloane**, Life Support Alliance; **Ken Quesada**, California Workforce Investment Board; **Carolyn Eggleston**, California State University, San Bernardino; **Colleen Stoner**, Board of State and Community Corrections; **David Farabee**, University of California Los Angeles; **Bill Heiser**, Center for Employment Opportunities; **Jana Bocalon**, Office of the Inspector General (Alternate for Renee Hansen); **Richard Hildebrand**, Department of Health Care Services (Alternate for Karen Baylor).

California Department of Corrections and Rehabilitation (CDCR) Staff: Sherry Celio, Special Assistant to the Director, DRP; Morgan Hughes Special Assistant to the Deputy Director, DRP; Kelly Medina, Chief of In-Prison Programs, DRP; Elvira Diaz, Associate Governmental Program Analyst (AGPA), DRP; Robert Logan, Staff Services Manager I (SSMI), DRP; Robert Logan, SSMI, DRP; Colleen Curtin,

Chief of Community and Reentry Services, DRP; Robert Downs, Associate Director, Office of Program Accountability and Support, DRP; Marie Del Real, SSMI, DRP; Dori Yamamoto-Chan, AGPA, DRP; Mark Bertacchi, Staff Services Manager II (SSMII), DRP; Bob Nickerson, AGPA, DRP; Tamera Calmer, SSMII, DRP; Jennifer Winistorfer, Superintendent (A), Office of Correctional Education, DRP; Sherry Christopher, Assistant to Chief of Community and Reentry Services; Karl McCune, SSMI, DRP; Albert Rivas, CDCR Office of Public, Employee and Constituent Affairs.

Guests: Julie Salley-Gray, Senate Budget Committee; Marvin Deon, Assembly Budget Committee; Sandy Uribe, Assembly Public Safety Committee; Helyne Meshar, CAADPE.

Agenda Item 1. Registration.

Agenda Item 2. Welcome and Introductions.

Director Tidwell introduced herself and opened the meeting with a brief explanation of the purpose of the DSAG. She then invited all members introduce themselves, tell what agency or organization they represent, and provide some brief background information.

Agenda Item 3. Overview – Division of Rehabilitative Programs.

Director Tidwell next provided an overview of the mission and goals of the DSAG:

Mission. The DSAG was established in 2013 to ensure the creation of quality rehabilitative programs most capable of providing services to reduce recidivism in California. The DSAG is facilitated by the Director of DRP, and seeks to improve relationships, maintain open lines of communication, and promote transparency in decision-making.

Goals. The DSAG is designed to serve as an advising body to DRP on program and policy issues while member representatives act as liaisons to their organizations and communities. The DSAG addresses the critical issues facing rehabilitative programs for inmates and parolees, identifies barriers that may limit access to services, and provides feedback to the community. The DSAG will:

- Provide perspectives to DRP on trends and best practices of rehabilitative programs for inmates and parolees.
- Foster communication between various stakeholders and CDCR.
- Assist in developing high quality programs for inmates and parolees.
- Assist in developing policy recommendations.
- Advise on program decisions including outcome measures.

Director Tidwell explained to the members that the Division's mission includes the planning and implementation of substance abuse treatment, education, and employment programs for parolees. Each is just as important as the other; one does not take priority over the other.

Regarding DSAG membership, Director Tidwell advised that the members will make recommendations on who should participate. The initial goal was to keep the

membership small and manageable. The members agreed to invite Robert Storms, who oversees mental health programs for the Division of Adult Parole Operations (DAPO), to the next meeting.

Director Tidwell advised that all DSAG meeting notes and handouts will be placed on DRP's website.

Director Tidwell explained CDCR is in a unique situation this year. Its largest contract (Substance Abuse Services Coordinating Agencies and the Parolee Services Network contract) are expiring June 2014 and CDCR plans to release a Request for Proposal (RFP) in December 2013. The intent is to merge duplicative programs together into one service delivery model.

In response to Director Tidwell's opening remarks, members commented that CDCR should bring together resources of the state and the counties; that there is a lack of integrated services for co-occurring disorders (mental health disorders and substance abuse disorders); and, that there is a need to better utilize Evidence-Based Practices.

Agenda Item 4. In-Prison Programs.

Kelly Medina, Chief of In-Prison Programs for DRP, delivered a PowerPoint presentation that described the current rehabilitative programs offered inside CDCR's institutions. Ms. Medina included an overview of the Reentry Hub concept and provided a list of Reentry Hub institutions. Questions and comments around the following topics were raised in response to Ms. Medina's presentation:

Medication-Assisted Treatment.

The group questioned whether CDCR can consider the use of medication or other drugs within its treatment protocols. A recommendation would be the use of Vivitrol. It could be administered a few weeks prior to release. Another recommendation was methadone.

The members questioned whether it was Departmental or statutory policy that prohibits CDCR inmates from accessing medication-assisted treatment prior to release? The members pointed out that there are different challenges with pre-custody versus in-custody versus post-custody. There is nothing in CDCR policy that would prohibit a parolee from accessing medication assisted treatment upon release. It was suggested that the members take a look at medication and how we make it happen for CDCR. Do we put it in a RFP?

Co-occurring Disorders

Regarding integrated services, the members pointed out that there are not a lot of programs for mental health and psychiatric services. These components are missing or lacking. The members recommend having a representative from the mental health field. Director Tidwell advised that CDCR will be working in collaboration with the California Mental Health Directors Association and will invite them to be a member. The members also pointed out co-occurring disorders should be addressed with equal weight. They drive the need for medication.

Long-Term Offenders

The members pointed out that the long-term population, or “lifers,” should be targeted for programs. A lifer with a three-year denial letter presents opportunity for three years of programs.

Assessments and Testing

A concern was raised as to whether Correctional Counselors are the right classification to administer the California Offender Management and Profiling for Alternative Sanctions (COMPAS) assessment.

Another question came up regarding whether CDCR does urinalysis (UA) testing in prison. Could CDCR administer UA testing on the way out of prison? Substance abuse providers would find this useful.

Finally, the members asked how many inmates are receiving the COMPAS needs assessment? Director Tidwell reported that regulations require inmates to receive a needs assessment, some inmates are excluded based on their sentence or mental health status.

Physical Health

Regarding physical health care, the group pointed out that parolees should be screened prior to employment. Director Tidwell agreed that CDCR should be cognizant of physical health care needs. Federal health care reform is a concern. CDCR needs to continue fostering its communication with the counties. CDCR needs to support a system that transitions offenders into long term care. What are the members’ suggested fixes? What should CDCR be doing?

Pre-Employment Services

UCSD staff offered to assist with the California ID Project.

Regarding the Reentry Hubs and employment, the members asked what happens to the parolees who are released. How does CDCR facilitate employment out of the area? CDCR should support other resources to assist parolees who are, for example, being released to Southern California, but currently residing in a Northern California facility?

The members expressed concern around outcome measures, specifically whether and how CDCR tracks employment for individuals who received pre-employment or certification while in prison. Director Tidwell reported that CDCR will be developing stronger outcome measurements and building in the connectivity portion for employment.

Revocation

Regarding the parole revocation process, the members pointed out that CDCR needs to better communicate what counties are capable of doing. There seems to be a disconnect between state and counties.

Agenda Item 5. Correctional Education Programs.

Jennifer Winistorfer, acting Superintendent for the Office of Correctional Education delivered a PowerPoint presentation describing CDCR's academic and career technical education programs. Questions and comments on the following topics were raised in response to Ms. Winistorfer's presentation:

Certification and Employment

Members would like to know what the rate of employment is for offenders who have participated in Career Technical Education programs. Director Tidwell reported that a new Reentry and Employment Unit will begin looking into tracking this.

Regarding certifications, the members asked whether there any offenses that are excluded and whether CDCR provides support to offenders who currently do not receive their certification. Director Tidwell replied that the new Employment Unit will be established to do outreach and assist with connecting offenders to appropriate employment services.

The members discussed opportunities for training in green technology. Ms. Winistorfer replied that CDCR does support several green technology programs.

One member asked whether there is a standardized method to assess how clients are progressing throughout the system. Director Tidwell replied that CDCR's Standardized Offender Management System (SOMS) will activate in 2014 to track grades on a quarterly basis. Currently, CDCR tracks utilization by institution so that the Department can better determine what causes low participation rates within the institutions (lockdowns, fog days, etc.).

Agenda Item 6. Community Programs.

In the interest of time, this item was tabled until after lunch.

Agenda Item 7. Lunch.

The members broke for lunch at 11:45 a.m. with instructions to return at 1:00 p.m.

Agenda Item 6. Community Programs.

Colleen Curtin, Chief of Community and Reentry Services for DRP, delivered a PowerPoint presentation that described rehabilitative programs available in the community to CDCR's parolee population. Ms. Curtin included an overview of the current service delivery model and shared the vision for the future. Questions and comments on the following topics were raised in response to Ms. Curtin's presentation:

Day Reporting Centers

One member asked how many Day Reporting Centers there are. Ms. Curtin replied that CDCR is entering into partnerships with counties for co-located programs. There are 21 total programs slated for FY 13/14. Some are administered by CDCR for parolees only. Some are "hybrid" programs, serving both parolees and probationers. These partnerships are based on local need and local interest.

Program Utilization

DAPO Program Agents are seeing improvements in utilization. What can CDCR do better? Incentives? What works?

Agenda Item 8. Emerging Issues.

At this time, Director Tidwell opened the floor to members, inviting them to raise issue of concern. The following topics were raised by the members:

Programs for Female Offenders

One member pointed out that it is a struggle to fill spots in female in-prison programs. Females are being screened out of programs due to COMPAS. A suggestion would be to relax the criteria. Director Tidwell replied that CDCR is aware of this challenge and is taking a look at expanding program eligibility criteria. The former SB 1453 program (Treatment Incentive Program) was a powerful incentive. It gave clients the incentive to program upon release. CDCR is exploring options with DAPO.

Role of the Counties

A few members commented on the fact that there somehow needs to be more discretion provided at the local level. CDCR should make more incentives available, such as early discharge from parole once program is completed. The judges need to be more involved; they need to see meaningful treatment information. CDCR should involve judges in monitoring program compliance. There is no prohibition to releasing that information to the courts. When the referral comes in, CDCR could send in written recommendations on what a parolee needs at that time.

One member pointed out that, in most counties, there is a waiting list for the PRCS population to enter programs. Parolees, however, do not want to program; they'd rather do 90 days in jail. It was suggested that CDCR look at probation departments to see what they are doing with the PRCS population when designing the new system. CDCR should work with the county Community Corrections Partnerships.

The state needs to address the needs of different counties. Can CDCR consider individualized funding by county?

Evidence-Based Programs

Several members emphasized the need for CDCR to better integrate the use evidence-based programs (EBP) such as Cognitive Behavioral Therapy, Moral Reconciliation Therapy. It was recommended that CDCR undergo two randomized studies to study the effectiveness of certain EBPs. There was a caution against using the off-the-shelf studies to measure effectiveness. One member pointed out that it takes time to do a true study of program effectiveness; prior studies of CDCR substance abuse programs took at least six years. CDCR must allow sufficient time for major systems changes to take effect (at least 3-5 years).

Housing and Homelessness

Several members commented on the topic of homelessness, noting that a significant number of parolees have multiple needs beyond substance abuse treatment, that include housing, job training and employment. Parolees need to be placed in programs according to assessed need, not just placed because there is a bed available.

One member pointed out that housing issues are especially problematic in the Bay Area and Los Angeles. There is not enough available housing in those communities. One member questioned how CDCR does outreach to the homeless. Another member suggested that CDCR explore the use of federal Housing and Urban Development funding which was accessed in their county under the guise of public safety.

Employment and Job Training

There was some discussion around the new service delivery model and whether it will include job training. Director Tidwell responded that the new model will address employment needs but that the DSAG will need to further discuss how CDCR builds capacity with the population that is coming.

One member pointed out that soft skills are important. Offenders need to learn how to work well with other, job etiquette, etc. Another noted that we can link parolees to employment training to teach these soft skills, but there are no jobs once they are released. CDCR needs to do a better job in linking parolees to jobs in this limited job market. The key is that job training administered on the inside match the job market on the outside and that consideration be given to where a parolee will release.

One member proposed the idea of subsidizing employment, i.e. going into partnership with the employers. Pre-apprenticeship programs should be implemented before the next construction boom.

Finally, one member noted that CDCR needs to provide information on work history or certificates an inmate received from inside the prison. Sharing more information on assessments, work history, work experience, CTE certificates, GED, treatment history, etc. will allow community providers to make more appropriate placements. Director Tidwell pointed out that DRP is currently in the process of establishing a new data system that should include this information.

Long-Term Offenders

The discussion moved to long-term offenders and how they access programs. One member pointed out that the recent Proposition 36 had a gap. These inmates could be released without a referral to a program and/or without a referral packet. There needs to be a system built in to connect the parolee with a service provider. Proposition 36 offenders need an exit package and a plan when they leave prison.

One member advised that CDCR should not put “lifers” with substance abuse needs into a program with low-level offenders. This member pointed out that the Board of Parole Hearings is looking at transitional housing. Lifers need transitional housing, but not necessarily treatment for substance abuse. More importantly, they need to be taught socialization.

Finally, the discussion turned to the Offender Mentor Certification Program. One member suggested that CDCR expand a support network that would allow for train-the-trainer in the community. Can CDCR explore additional funding to expand this program? It is particularly effective for the lifer population.

Motivational Incentives

One member raised the issue of motivational incentives; CDCR needs to better empower providers to motivate clients to get into the programs. Can CDCR take another look at how to budget for incentives within existing contracts? What are other incentive options? CDCR could consider early release to a drug treatment program as an option. Perhaps, transportation could be used as an incentive to help get the clients to the program site. Parolees could earn the right for a monthly bus pass. CDCR could also consider vouchers for housing. A possible incentive for sex offenders would be for CDCR to pay their rent if they stay in a program.

Pre-Release Planning

One member pointed out that service providers would like to connect with parolees while they are still inside; they need more time to do “in” reach. In general, CDCR needs a more effective inside/outside approach. Early engagement is key to getting participants to the programs, so providers need early access to potential participants. Could providers access inmates who are housed in the Reentry Hubs?

Services for Sex Offenders

The members agreed that locating appropriate housing for sex offenders continues to be a challenge. The members proposed forming a sub-group on this topic to better articulate the issues and develop potential solutions. Members pointed out that the state needs to partner with the counties when dealing with sex offenders. The counties are in a better position to find housing in light of local stay orders.

Measuring Outcomes

There was some discussion around how CDCR measures outcomes for its community-based programs. Which programs are effective with which populations and why? One member suggested that CDCR look to the Pew Research Center for guidance, particularly at the Pew’s Results First Project, which helps states assess the costs and benefits of policy options and use that data to make decisions based on results.

Transition to New Service Delivery Model

One member expressed concern about a potential gap in services during the transition to the new service delivery model. Director Tidwell shared that DRP is moving forward with the non-Competitive Bid process that will allow for extensions to

the current SASCA and FOTEP contractors as a backup provision to avoid any potential breaks in service.

One member questioned whether CDCR will be looking at a regional approach with the new model. He pointed out that the Parolee Services Network was focused only on 17 counties and that this would be a good time to expand that. Another member suggested that CDCR should take a hybrid approach, one that is not necessarily county-driven. Director Tidwell advised that the RFP will be open for all entities to bid.

Funding for Rehabilitative Programs

Marvin Deon of the Assembly Budget Committee advised the members that the Assembly and Democratic caucus are extremely invested in the success of rehabilitative programs. While they are aware that \$20 million went back to the General Fund last year, that does not mean CDCR will start with \$20 million less the next fiscal year. It was noted that the Legislature is aware that DRP did not spend the money “just to spend it,” but made fiscally responsible decisions during difficult times.

Health Homes Bill

One member suggested that CDCR work with the Department of Health Care Services (DHCS) to establish some of Health Homes.

Agenda Item 9. Identify Future Agenda Items.

The next meeting was set for Wednesday, January 22, 2014 (Note: The date has been changed to January 23, 2014). There was no objection to continuing to use Galt as the location for future meetings.

Agenda Item 10. Adjournment.

The meeting adjourned at 3:45 p.m.