



**Marin Chronic Alcohol
with Justice Involvement
Project
BUSINESS PLAN – JUNE 2013**

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(in alphabetical order)

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Marin Chronic Alcohol with Justice Involvement Project

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Marin Chronic Alcohol with Justice Involvement Project

An Integrated, Multidisciplinary Approach to Treatment



INTRODUCTION

According to a recent cost study conducted by HomeBase (2013), between June 1, 2011 and May 31, 2012, 34 individuals in the County of Marin incurred a cost of \$2,039,463 for services related to chronic addiction to alcohol. Actual costs are “most likely much greater” (Home Base, 2013, p. i). The vast majority of these 34 individuals were male, 91 percent were homeless, and the average age was 47.

In recent years, innovative programs in several California counties have sprung up attempting to address this issue (HomeBase, 2013). San Diego’s Serial Inebriate Program in particular achieved a 58% reduction in arrests and a 50% reduction in the use of emergency and inpatient medical services for participants who completed the program (HomeBase, 2013, Appendices p. 5-6). San Diego County uses a jail diversion model offering treatment in lieu of incarceration (HomeBase, 2013).

In January 2012, Marin County Deputy Public Defender Christine O’Hanlon initiated the creation of a similar program in Marin County. The project quickly became a collaborative effort between county and community-based organizations, leading to Marin Health and Human Services commissioning the HomeBase study.

In its final report, HomeBase (2013) made the following recommendations:

- 1. Designate the Forensic Multi-Disciplinary Team (FMDT) as the Body to Oversee the Continuing and Coordinated Efforts**
- 2. Expand the Capacity of the FMDT to Conduct Outreach and Follow Up**
- 3. Develop a Jail Diversion Program**
- 4. Establish Targeted Scattered-Site Permanent Supportive Housing**
- 5. Create a Viable Medical Detoxification Option**

This Business Plan seeks to implement HomeBase’s third recommendation – developing a jail diversion program for the County of Marin.

Marin Chronic Alcohol with Justice Involvement Project

PROJECT OVERVIEW

The Marin Chronic Alcohol with Justice Involvement (CAJI) Project offers treatment in lieu of incarceration (jail diversion) for individuals who have six or more alcohol-related contacts within a 12-month period. The course of treatment is seven months. A hybrid, multidisciplinary model combining collaborative court structures with Assertive Community Treatment (ACT) is utilized to provide highly individualized, intensive, wrap-around services, support, and substance-abuse treatment.

The Marin Chronic Alcohol with Justice Involvement Project includes an initial three-person pilot. Current funding is \$300,000 and estimated costs for one, seven-month pilot are \$149,161.

Mission Statement

The mission of the Marin CAJI Project is to break the cycle of chronic alcoholism, justice system involvement, and homelessness in order to improve the quality of life for individual participants, reduce costs associated with chronic alcoholism, and promote public health and safety.

Marin CAJI Project Goals

- Reduce overall costs to the community and the criminal justice system related to persons suffering from alcoholism and chronic homelessness who cycle through emergency care and the criminal justice system repeatedly (hereinafter “participants”)
- Improve the quality of life for individuals suffering from chronic alcoholism and homelessness by furnishing intensive case management, and assertive community treatment, using an integrated, multidisciplinary approach
- Assist participants in moving toward sobriety by offering evidence-based treatment as an alternative to repetitive incarceration
- Assist participants in obtaining housing
- Improve the criminal justice system's ability to identify, assess, evaluate and treat persons suffering from alcoholism and chronic homelessness
- Reduce recidivism among participants
- Safeguard participants and the community by structuring interventions that reduce the number of persons suffering from alcoholism and chronic homelessness on the street

Marin CAJI Project Outcome Measures

In order to measure outcomes for the Marin CAJI Project, the following outcome measures will be tracked by the Marin Homelessness Policy Analyst and reported to the Project Coordinators (this list is not exhaustive):

- Number of contacts between Marin CAJI participants and San Rafael Police
- Number of arrests for Marin CAJI participants
- Number of days Marin CAJI participants are in custody at the Marin County Jail
- Number of court appearances by Marin CAJI participants
- Costs of emergency care at Marin General Hospital for Marin CAJI participants
- Number of Marin CAJI participants who are stably housed

Marin Chronic Alcohol with Justice Involvement Project

PROJECT STRUCTURE

HomeBase (2013) identified the following **Key Characteristics of Effective Programs**, seeking to serve our target population:

- Have mechanisms to target/identify the population to be served, including street outreach, in-reach to institutions, use of cross-system data analysis, etc.
- Are multi-disciplinary, involving all of the systems and agencies needed to provide comprehensive care to clients
- Provide integrated medical, mental health and substance abuse services with coordination of care among providers
- Address clients' housing needs, through Housing First and other low-threshold approaches
- Provide intensive case management, at least until client stabilizes and basic needs are met
- Incorporate trauma-informed care and harm-reduction approaches
- Have a diverse funding base, including federal, state and local dollars as well as private sources of funding including foundations, business and other fundraising.
- Include a solid data-gathering and evaluation component to enable continuous program improvement as well as to document effectiveness to political leaders, the public and funders (HomeBase, 2013, Appendices, p. 2).

In addition to the above key characteristics identified by HomeBase (2013), the study also discusses **Assertive Community Treatment Teams**. HomeBase defines these teams as, "multi-disciplinary teams that provide a range of behavioral health and support services to clients with severe mental illnesses while they are in the community" (2013, Appendices, p. 2).

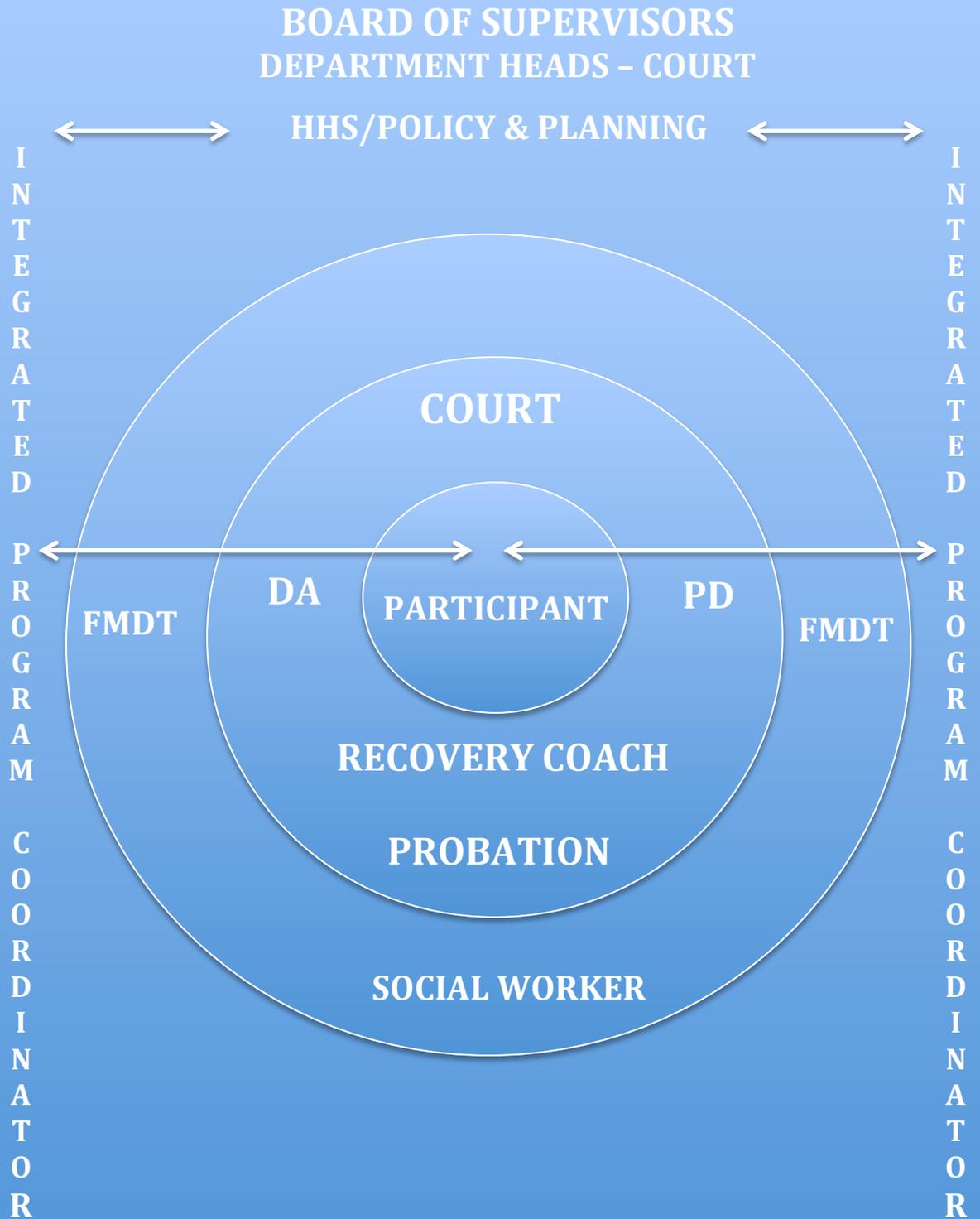
Marin County seeks to create an innovative hybrid of the Assertive Community Treatment (ACT) Team approach by blending it with existing collaborative court structures and applying this hybrid model to the treatment of those suffering from chronic alcoholism and justice involvement. It does so by using an existing resource – the **Marin County Forensic Multidisciplinary Team (FMDT)** – to assist in providing wrap-around services, brainstorming creative solutions to issues that arise, and by helping to support the participants in the community.

Other key additions to this hybrid model include:

- **Recovery Coaches** – work most closely with participants to provide intensive, individualized treatment, one-on-one support, and case management
- **Social Worker** – while recovery coaches work directly with the client to maintain sobriety and provide support, the social worker assists in slightly broader duties like securing benefits, and obtaining medical and psychiatric records for data collection
- **Integrated Program Coordinator** – oversees and coordinates all aspects of the project, facilitating communication between all parties on all levels, monitoring data, and supervising certain personnel (FMDT Social Worker; FMDT Intern)

Marin Chronic Alcohol with Justice Involvement Project

PROJECT STRUCTURE – Figure I



Marin Chronic Alcohol with Justice Involvement Project

PROJECT STRUCTURE – COURT TEAM

The structure of the Marin CAJI Project uses two interconnected teams, a Court Team which consists of the Judicial Officer, District Attorney, Defense Counsel, Probation, Recovery Coach, and Project Coordinator, and an Assertive Community Treatment or ACT Team which consists of the Marin Forensic Multidisciplinary Team (FMDT), FMDT Social Worker, and the Project Coordinator.

The Court Team consists of parties who will attend court appearances with participants:

Judicial Officer

The Judicial Officer presides over all court proceedings and interacts directly with each participant to establish rapport. The Court holds participants accountable, and utilizes its position to provide affirmation, acknowledgement of progress, and motivation to participants. It also imposes sanctions or gives rewards, as appropriate.

District Attorney

The District Attorney (DA) verifies threshold eligibility for the Serial Inebriate Program (six or more alcohol-related contacts in a 12-month period) and plays an integral role in monitoring participants' progress throughout the process. The DA is also a member of the FMDT.

Public Defender / Defense Counsel

Defense counsel meets with prospective participants, explains project procedures, and plays an integral role in monitoring participants' progress throughout their participation. The Public Defender is also a member of the FMDT.

Probation

Probation attends court proceedings, assists with monitoring participants while in the community, and is also a member of the FMDT.

Recovery Coaches

Recovery Coaches work closely with participants both in, and outside of, court. They are participants' closest allies during this process, providing intensive personal and clinical support. The proposed budget includes two hours of contact, five days per week, for each participant and his/her recovery coach.

Recovery coaches are part of the Court Team, report to the Program Coordinators, and attend FMDT meetings once per month to brief the FMDT on progress, plans, and issues.

Project Coordinator

The Project Coordinator attends Court, records proceedings, participates in discussions regarding sanctions and rewards (where necessary) collects data, and works closely with the Judicial Officer to monitor project progress, concerns, and possible issues. (Administration costs are kept to a minimum with Project Coordinator utilizing only 6.26% of the total estimated budget.)

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PROJECT STRUCTURE – ACT TEAM

The Assertive Community Treatment (ACT) Team consists of the Marin FMDT, the FMDT Social Worker, and the Project Coordinator:

Marin County Forensic Multidisciplinary Team (FMDT)

The Marin FMDT consists of a monthly meeting bringing together approximately 20 county and community-based organizations to brainstorm creative alternatives to incarceration for persons suffering from mental illness who are chronically cycling through the criminal justice system in Marin County.

Key Members of the FMDT Providing Services and/or Coordination to Participants:

- **Marin Mental Health Substance Use Services**
 - Provides clinical expertise and input to the Team
 - May provide psychotherapeutic services to participants
- **Ritter Center**
 - Provides medical oversight and medication management
 - May provide representative payee services
- **Law Enforcement**
 - Assists in monitoring participants in the community
- **Mill Street/Homeward Bound**
 - Assists in planning for, and the provision of, longer term housing upon completion of primary (7 months) treatment, where possible
- **Bucklew Programs**
 - Provides sobering services to participants through The Vine Detox
 - May provide vocational rehabilitation training

FMDT Social Worker

The FMDT Social Worker works closely with the recovery coach to provide a lower-cost supplement for tasks not requiring substance-abuse counseling expertise. This includes, but is not limited to, helping participants obtain benefits like Public Assistance, Social Security, and health benefits. The social worker is also responsible for compiling comprehensive medical, psychiatric, and treatment records for the purposes of treatment and data collection. In addition, the FMDT Social Worker will assist the FMDT Leadership Team in drafting policies and procedures and will be responsible for seeking additional funding through the creation of grant proposals. The FMDT Social Worker reports to the Project Coordinator.

Project Coordinator

The Project Coordinator, along with the District Attorney, Public Defender, Probation, and the Recovery Coaches, liaises with the other members of the FMDT to apprise the Team of progress, plans, and issues.

Marin Chronic Alcohol with Justice Involvement Project

PROJECT STRUCTURE -- OVERSIGHT



This project will be monitored by Marin Health and Human Services, Department of Policy and Planning, as well as the County Administrator's Office. Marin County Department Heads, the Court Executive Officer, and the Board of Supervisors also provide more broad-based oversight.

The Project Coordinator is responsible for providing quarterly reports summarizing data, progress in treatment, expenditure levels, issues and challenges, and projected outcomes at the Criminal Justice Behavioral Health Advisory Committee meetings, and as requested.

Marin Chronic Alcohol with Justice Involvement Project

ELIGIBILITY AND ADMISSION



ELIGIBILITY

- Participants **MUST** have six arrests or law enforcement referrals for public drunkenness or other alcohol related offenses within the preceding 12-month period
 - Qualifying offenses include a new criminal case OR a probation violation
- Participants **MUST** be on probation or have committed an offense that would make them probation eligible
- All participants **MUST** be represented by counsel
- Participants **MUST** be willing to abide by all Marin CAJI Terms and Conditions and sign a written contract agreeing to same

ADMISSION PROCEDURE

- Potential participants will be advised of eligibility at arraignment by the District Attorney
- Defense counsel then meets with the proposed participant to review the rules and procedures of the Marin CAJI Project. If the person wishes to participate, defense counsel then fills out the contract and has the proposed participant sign it
- Once all paperwork is completed, a referral is made to the Project Coordinator for review and all members of the Court Team are notified of a potential admission. (Pilot participants will be selected by the Court Team and the Project Coordinator.)
- Once the Court Team and Project Coordinator approves a proposed participant's admission, an intake interview is scheduled with a recovery coach
- The recovery coach meets with the proposed participant in custody and performs an informal, preliminary screening
- At the next scheduled court appearance, completed Marin CAJI paperwork is provided to the Court Team and the individual is admitted into the Project
- The Court Team then coordinates release to The Vine for Phase I of treatment

Marin Chronic Alcohol with Justice Involvement Project

PROJECT FLOW – PHASE I

The course of treatment in this project is divided into four phases: 1) Arrest-Jail-Case Disposition; 2) Detoxification and Needs Assessment; 3) Inpatient Treatment, and 4) Outpatient Treatment. After successful completion of outpatient treatment, the underlying criminal case will be dismissed.

Phase I -- Arrest-Jail-Case Disposition Estimated Time Period – 5 to 10 days

General: During Phase I, the proposed participant is arrested, identified as eligible for Marin CAJI at arraignment by the DA, and is sentenced to a minimum of 180 days with CAJI probation terms and conditions. A waiver of GT/WT (good-time/work-time) credits may be a part of his or her plea agreement.

Goals: Determine participant eligibility
Educate participant fully about specific rules, expectations, and procedures
Have participant complete all program paperwork including releases
Formal acceptance of participant into the program

Probation Terms: Probation terms for the Marin CAJI Program shall include but are not limited to the following:

- Lead a law abiding life
- Total abstinence from alcohol and all illegal and non-prescribed drugs
- Participate in a comprehensive biopsychosocial assessment
- Fully commit to and follow the individual treatment plan designed by the treatment providers, recovery coaches, Court and ACT Teams including but not limited to:
 - Substance abuse assessment and screening
 - Mental health assessment and/or testing
 - Medical examination and/or testing
 - Residential substance-abuse treatment
 - Outpatient substance-abuse treatment
 - Individual and/or group psychotherapy
 - 12-Step Meetings or other self-help groups
 - Total medication compliance (medical and psychiatric)
 - Employment/vocational training/education as directed
 - Agree to search and seizure of person and belongings without probable cause and at any time requested by a peace officer or recovery coach
 - Submit to random drug and alcohol testing
 - Community service, where appropriate
 - Anger management, where appropriate
 - Agree to sign a Release of Information allowing the Court Team, the ACT Team, treatment providers, and the Program Coordinators to share information and obtain past medical, psychological, and/or substance-abuse treatment records
 - Wear a continuous alcohol-monitoring bracelet, if ordered
 - Agree to reside at designated housing or return to custody
 - Fines and fees if all phases of treatment are not successfully completed

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PROJECT FLOW – PHASE II

Phase II – Detox & Needs Assessment

Estimated Time Period – 30 days

General: Once the participant has completed all paperwork and is accepted into the Marin CAJI Project, the participant will be assigned a recovery coach who will act as his/her dedicated recovery coach throughout the process. The participant will be released from custody to his/her recovery coach and transported to The Vine for detoxification. During the detoxification period, the participants' immediate medical and psychiatric needs are attended to, and groundwork is laid by both the recovery coach and social worker for obtaining all possible benefits. A comprehensive, individualized assessment of each participant's needs is also performed.

- Goals:** Detoxification
- Recovery coach and social worker to meet with client
 - Perform global needs assessment in all domains
 - Screen for co-occurring disorders
 - Full psych eval to be performed after 30 days sobriety but early screening for co-occurring disorders is performed
 - Recovery coach and social worker to develop preliminary treatment plan
 - Recovery coach and social worker to provide Project Coordinator with preliminary treatment plan
 - Initiate and build therapeutic alliance between recovery coach and participant with daily contact (5 days per week)
 - Physical/medical examination
 - Address physical needs/chronic health conditions
 - Medical history taken
 - Assessed by medical staff for suitability for psychotropic medications
 - Acquisition of psychotropic medications where appropriate
 - Social worker to begin benefit applications
 - Social worker to compile comprehensive biopsychosocial history
 - Social worker to order all possible medical, psychiatric, and substance-abuse treatment records
 - Recovery coach to coordinate psychiatric evaluation after 30 days sobriety; *prior* to transitioning into residential treatment
 - GAIN (Global Assessment of Individual Needs) to be administered
 - Recovery coach to coordinate transition into residential treatment

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PROJECT FLOW – PHASE III

Phase III – Inpatient Treatment

Estimated Time Period – 90 days

General: Once the participant has completed 30 days of detoxification at The Vine, and his or her immediate medical and psychiatric needs are addressed, the participant is ready to begin 90 days of residential or inpatient treatment. The participant will also appear in court twice per month so the Court can monitor progress in treatment.

- Goals:** Maintain sobriety
- Lead a law-abiding life
 - Engage fully in treatment
 - Follow all treatment provider's rules
 - Participate fully in all required groups, homework assignments, and chores
 - Behavior with staff and peers should be respectful and appropriate
 - Remain medication compliant with both medical and psychiatric medications
 - Attend all medical and/or psychiatric appointments
 - Cooperate with assigned recovery coach and social worker to get available benefits in place (SSI/SSDI/MediCal/GA/Veterans)
 - Comply with alcohol monitoring device, if ordered
 - Recovery coach and/or social worker to arrange vocational rehabilitation evaluation
 - Participant to begin individual therapy and attend all scheduled appointments (recovery coach to facilitate)
 - Recovery coach to provide therapist with a copy of the participant's signed release and will liaise with therapist as necessary and keep Teams apprised of critical issues relating to sobriety
 - Recovery coach to coordinate transition to outpatient treatment
 - If relapse occurs, participant is sent to The Vine for detoxification, and is placed on the court calendar at the first available opportunity for determination of sanctions

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PROJECT FLOW – PHASE IV

Phase IV – Outpatient Treatment

Estimated Time Period – 90 days

General: When the participant has completed 90 days of residential treatment, s/he will transition into 90 days of intensive outpatient treatment. The participant will continue to appear in court twice per month so the Court can monitor progress.

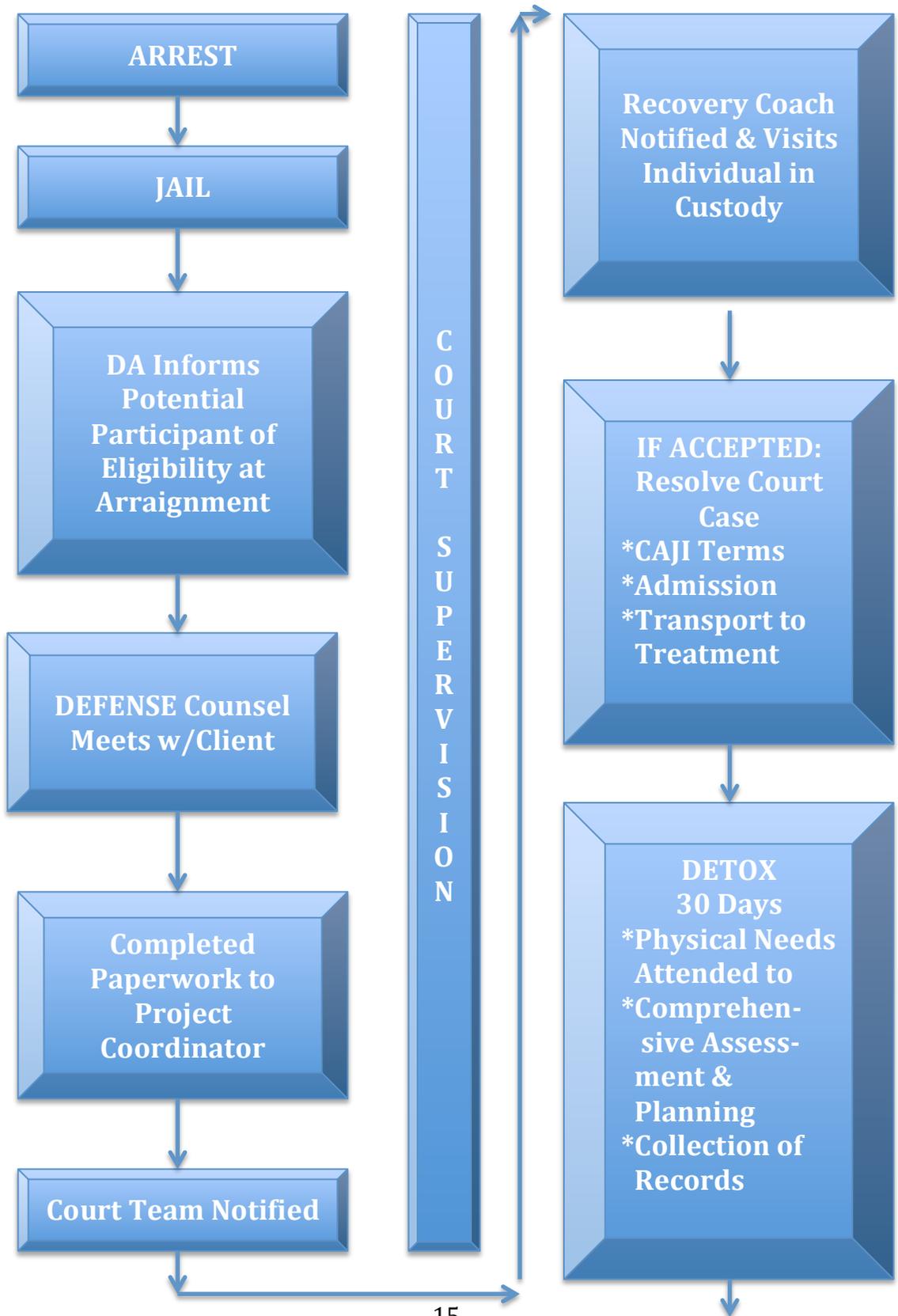
- Goals:** Maintain sobriety
- Lead a law-abiding life
 - Participant to engage fully in treatment
 - Follow all program rules
 - Participate fully in all required groups, homework assignments, and chores
 - Handle self appropriately in the community
 - Remain medication compliant with both medical and psychiatric medications
 - Attend all medical and/or psychiatric appointments
 - Cooperate with assigned recovery coach and/or social worker to begin vocational rehabilitation
 - Participants may also opt for attending community college or other structured activities at the discretion of the Court Team and Project Coordinator
 - Cooperate with recovery coach and/or social worker to clear up legal issues (license holds, tickets to be handled in Homeless Court, etc.)
 - Comply with alcohol monitoring device, if applicable
 - Attend daily 12-step meetings
 - Engage in remaining therapy sessions (recovery coach to facilitate)
 - Recovery coach and social worker to begin pursuit of longer term housing as soon as the participant enters outpatient treatment
 - If relapse occurs, participant is sent to The Vine for detoxification, and is placed on the court calendar at the first available opportunity for determination of sanctions

By the end of Phase IV, longer term housing should be secured and participants should be working, performing community service, attending community college, or engaged in other structured activities of some kind.

Once Phase IV is successfully completed, the participant graduates, probation is terminated and the underlying case(s) are dismissed.

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PROJECT FLOWCHART



Marin Chronic Alcohol with Justice Involvement Project

PROJECT FLOWCHART

Psychological
Assessment at 30+
Days



Residential
Treatment
90 Days



Outpatient
Treatment
90 Days



Move to Longer
Term Housing
Prior to
Graduation



Graduation &
Case Dismissed!

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**Want more
details about
what happens
at each phase?**

See pp. 11-14

Marin Chronic Alcohol with Justice Involvement Project

ESTIMATED/PROPOSED BUDGET

Please Note: *All Cost Estimates Below are Approximations & Subject to Change Depending on Responses to Requests for Proposals (RFPs)*

Estimates are Based on a Seven-Month Pilot

Detox Beds at Helen Vine **\$ 14,400.**

- \$150/person/day
- \$160 x 3 x 30

Residential Treatment **\$ 27,000.**

- \$95 per day per person
- \$95 x 3 x 90
- Approx. \$3000/person/month

Outpatient Treatment/Sober Living **\$ 16,200.**

- \$2000/person/month
- \$1,800 x 3 x 3

Recovery Coach

- Currently contracted at \$55/hour
 - \$55 x 30 x 30
- \$ 49,500.**

Social Worker **\$ 19,760.**

- \$38/hour
- 38 x 20 x 26

Psychological Testing & Evaluation **\$ 3,600.**

- \$1200 per person x 3

Psychotherapy

- \$135/hour
 - 3 hours per week x 13 weeks
- \$ 5,265.**

Vocational Rehabilitation

- \$135/hour
 - 3 hours per week x 10 weeks
- \$ 4,050.**

Integrated Program Coordinator **\$ 9,386.**

- \$38/hour
- 38 x 9.5 x 26

\$ 149,161.

CONCLUSION



In addition to setting forth the structure and flow of an innovative hybrid model for assisting those who suffer from chronic alcoholism and justice involvement, herein, a detailed “Go List” of additional information and tools needed to move forward with this project has been provided to Health and Human Services.

It is believed, however, the Marin CAJI Project can now begin to move forward pending approval by appropriate parties.

Marin Chronic Alcohol with Justice Involvement Project

PROJECT COORDINATOR BIO



MICHELE R. BERRONG

Michele R. Berrong, J.D. joined the County of Marin in 2005. Michele initially worked as a Deputy Public Defender and her assignments included the collaborative courts (Adult Drug Court, Proposition 36 Court, and S.T.A.R. Court) mental health conservatorship litigation, post-conviction relief, misdemeanor, and juvenile litigation. Michele participated in homeless outreach in partnership with Legal Aid of Marin while at the Public Defender's Office and also developed training materials on post-conviction relief. She attended law school at the University of San Francisco.

In 2009, Michele moved to the Marin County Public Guardian's Office in a part-time capacity to pursue a Masters Degree in Psychology with a Depth Emphasis at Sonoma State University. She expects to graduate in August 2013. Michele has served as the LPS Conservatorship Investigator for the Public Guardian's Office for the past four years, working exclusively with the severely mentally ill and dually diagnosed.

For the past two years, Michele has co-chaired and coordinated the Marin County Forensic Multidisciplinary Team, has been a part of the Marin Chronic Alcohol with Justice Involvement Project since its inception, and was instrumental in drafting the Business Plan.

Ms. Berrong was recently admitted to the Clinical Psychology doctoral program at the California Institute for Integral Studies. She begins doctoral studies in the fall of 2013.