

FY 2021-22 Community Corrections Partnership Survey PART A

Part A of the Fiscal Year (FY) 2021-22 Community Corrections Partnership (CCP) Survey collects information about CCP Membership and implementation of the county’s CCP plan. For detailed guidance on how to complete Part A of the CCP Survey, please refer to the [FY 2021-22 CCP Survey Data Reporting Guide](#).

Part A is divided into five (5) sections:

- Section 1: Respondent Information
- Section 2: CCP Membership
- Section 3: Goals, Objectives, and Outcome Measures
- Section 4: Types of Programming and Services
- Section 5: Optional Questions

Responses to the CCP Survey shall represent the collective views of the CCP and not a single agency or individual.

SECTION 1: RESPONDENT INFORMATION

Section 1 asks questions related to the county for which survey responses are provided, the individual who is completing the survey, and who BSCC may contact for follow-up questions. There are three (3) questions in this section.

1. Please identify the county name for which this survey is being submitted: Trinity
2. Provide the contact information for the individual completing this survey in the spaces provided to the right of the list.

| Survey Respondent Contact Information | |
|---------------------------------------|-------------------------------------|
| Name: | Ruby Fierro |
| Organization: | Trinity County Probation Department |
| Email Address: | rfierro@trinitycounty.org |
| Phone Number: | 530 623-1204 |

3. Identify the individual who may be contacted for follow up questions. Check the appropriate box to the left of the list.

- Same as above
 Other (If "Other" is selected, provide contact information below)

| Survey Follow-up Contact Information | |
|--------------------------------------|--|
| Name: | |
| Organization: | |
| Email Address: | |
| Phone Number: | |

SECTION 2: CCP MEMBERSHIP

Section 2 asks questions related to the CCP composition and meeting frequency. There are four (4) questions in this section.

4. CCP membership roles: Provide the name and organization of each individual fulfilling a membership role as of October 1, 2021 in the spaces to the right of each membership role.
- If a public membership role does not exist in the county, respond by indicating “not applicable.” This should only be used if the county does not have the specific position listed.
 - If a position exists in the county but the membership role is not filled in the CCP, respond by indicating “vacant.”
 - For county positions, one person may fill multiple roles.

| Role | Name | Organization |
|---|--------------------|---------------------------------|
| Chief Probation Officer | Ruby Fierro | County Probation Dept. |
| Presiding Judge of the Superior Court or designee | Mike Harper | Superior Court of California |
| County Supervisor or Chief Administrative Officer or a designee of the Board of Supervisors | Richard Kuhns | Chief Administrative Officer |
| District Attorney | Dave Brady | County District Attorney Office |
| Public Defender | Ken Miller | |
| Sheriff | Tim Saxon | County Sheriff's Dept. |
| Chief of Police | Brandon Lale | California Highway Patrol |
| Head of the County Department of Social Services | Elizabeth Hamilton | Health and Human Services |
| Head of the County Department of Mental Health | Connie Smith | Behavioral Health Services |
| Head of the County Department of Employment | Vacant | |
| Head of the County Alcohol and Substance Abuse Programs | Connie Smith | Behavioral Health Services |
| Head of the County Office of Education | Sarah Supahan | County Office of Education |
| A representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense | Sherri White | Human Response Network |

| | | |
|---|--------|--|
| An individual who represents the interests of victims | Vacant | |
|---|--------|--|

5. How often does the CCP meet? Check the appropriate box to the left of the list. Select the **one/single** option that best describes the CCP's **regular** meeting schedule.

- Bi-weekly (every other week)
- Monthly
- Bi-monthly (every other month)
- Quarterly
- Semi-annually
- Annually
- Other (please specify below)

6. How often does the Executive Committee of the CCP meet? Check the appropriate box to the left of the list. Select the **one/single** option that best describes the Executive Committee's **regular** meeting schedule.

- Bi-weekly (every other week)
- Monthly
- Bi-monthly (every other month)
- Quarterly
- Semi-annually
- Annually
- Other (please specify below)

7. Does the CCP have subcommittees or working groups? Check the appropriate box to the left of the list.

- Yes
- No

If "Yes," list the subcommittees and/or working groups and their purpose.

| | Subcommittee/Working Group | Purpose: |
|----|----------------------------|----------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

SECTION 3: GOALS, OBJECTIVES, AND OUTCOME MEASURES

Section 3 asks questions related to the CCP’s goals, objectives, and outcome measures. Please refer to the [CCP Survey Data Reporting Guide](#) for detailed information about goal and objective statements, and outcome measures.

Updated Information on FY 2020-21 Goals, Objectives, and Outcome Measures

Questions 8, 9, and 10, asks the CCP to provide *updated* progress information about the goals, objectives, and outcome measures previously reported for FY 2020-21 in the 2020-21 CCP Survey. To view responses provided in the 2020-21 survey, [click here](#).

For each question, provide the goals, objectives, and outcome measures as reported in the FY 2020-21 survey. The progress information (last two rows of each table) should be updated to reflect the progress achieved over the full fiscal year.

- Describe a goal and the associated objectives as reported in the FY 2020-21 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2020-21. If no goal, objective, or outcome measure was identified in FY 2020-21, respond by indicating “Not Applicable.”

| | |
|--|--|
| Goal | Improve success rates of AB 109 offenders |
| Part of FY 20-21 CCP plan? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | Provide comprehensive assessments and case planning to clients to ensure best practice supervision standards and services that correlate with identified risk, needs, and responsivity. |
| Objective: | Provide Moral Reconciliation Therapy (MRT) to clients in the DRC upon release from custody. |
| Objective: | Maintain caseload sizes that support individualized attention and services for clients. |
| Outcome Measure: | Number of participants who receive comprehensive assessments and case planning. |
| Outcome Measure: | Number of participants enrolled in MRT classes. |
| Outcome Measure: | Caseload size for officers supervising this population. |
| Briefly describe progress toward goal: | Recidivism rates remain low with this population mainly due to the collaborative agency efforts as well as the increased use of evidence-based case management efforts between all stakeholder agencies. Probation has provided assessments and case planning to 100% of the population. Covid 19 greatly impacted the ability to provide services in the jail and in the Day Report Center. The Day Reporting Center was able to resume services in March of 2021. There were seven (7) individuals provided services in MRT classes. The |

| | |
|---------------------------------|--|
| | average caseload size of 1:20 has allowed probation to provide highly responsive supervision and referrals and individualized client attention and services that best fit our rural community. |
| Rated progress toward the goal: | <input type="checkbox"/> No progress <input checked="" type="checkbox"/> Partially achieved <input type="checkbox"/> Fully achieved |

9. Describe a goal and the associated objectives as reported in the FY 2020-21 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full FY 2020-21. If no goal, objective, or outcome measure was identified in FY 2020-21, respond by indicating "Not Applicable."

| | |
|--|---|
| Goal | Increase efficiency and effectiveness in client programming and services by utilizing a collaborative multi-disciplinary reentry program with services that are evidence-based. |
| Part of FY 20-21 CCP plan? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | Prioritize early engagement with our clients when possible. |
| Objective: | Provide comprehensive case planning (shared goals and objectives) between the reentry team partnering agencies. |
| Objective: | Provide opportunities for employment training, placement, and related services to program participants. |
| Outcome Measure: | Number of coordinated pre-release team meetings and participant transports from correctional facilities. |
| Outcome Measure: | Team monthly Case Presentation Form that identifies commonly shared participant goals and objectives. |
| Outcome Measure: | Number of participants that receive services related to employment training and placement. |
| Briefly describe progress toward goal: | Probation has been able to sustain the re-entry practices; however, the frequency has been more limited throughout the fluctuations of the Covid-19 pandemic and staff available and have not occurred every month. There were 14 pre-release team meetings. The number of employment training and placements has remained relatively stable to the population. There were seven (7) participants who received services related to employment training and placement. |
| Rated progress toward the goal: | <input type="checkbox"/> No progress <input checked="" type="checkbox"/> Partially achieved <input type="checkbox"/> Fully achieved |

10. Describe a goal and the associated objectives as reported in the FY 2020-21 CCP survey. Please provide updated progress toward goal information to reflect the progress achieved over the full fiscal year. If no goal, objective, or outcome measure was identified in FY 2020-21, respond by indicating "Not Applicable."

| | |
|-------------|---|
| Goal | Improve Transitional Housing and Related Services |
|-------------|---|

| | |
|--|---|
| Part of FY 20-21 CCP plan? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | Ensure an adequate stock of available transitional housing options in Trinity County for persons transitioning back to the community that lack housing. |
| Objective: | Provide housing-related case management services to homeless post-incarcerated participants. |
| Objective: | Not applicable |
| Outcome Measure: | Number of physical structures and beds available for PRCS individuals. |
| Outcome Measure: | Number of motel vouchers provided to program participants. |
| Outcome Measure: | Number of participants denied transitional housing due to inadequate supply. |
| Briefly describe progress toward goal: | There are four (4) units available for transitional housing for this population and hotel vouchers are available at a thirty two (32) room motel. There were thirty (30) hotel vouchers provided for up to one hundred twenty (120) days each. There were four (4) instances of housing services denied to this population. |
| Rated progress toward the goal: | <input type="checkbox"/> No progress <input checked="" type="checkbox"/> Partially achieved <input type="checkbox"/> Fully achieved |

Information on FY 2021-22 Goals, Objectives, and Outcome Measures

11. For FY 2021-22, will the CCP use the same goals, objectives, and outcome measures identified above from FY 2020-21? Check the appropriate box to the left of the list.

- Yes. (Skip to Section 4)
- No. The CCP will add and/or modify goals, objectives, and outcome measures (Continue with section below)

Questions 12, 13, and 14, the CCP is asked to describe a goal and its associated objectives and outcomes for FY 2021-22. For the goal, also provide information about the current progress toward the stated goal. As survey responses are due mid-year, progress information for these goals over the full fiscal year will be requested as part of the FY 2022-23 CCP Survey.

12. Describe a goal for FY 2021-22 and one (1) or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2021-22, respond by indicating "Not Applicable."

| | |
|---|---|
| Goal | |
| Part of FY 21-22 CCP plan? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | |
| Objective: | |
| Objective: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Briefly describe <i>current</i> progress toward goal: | |
| Rate the <i>current</i> progress toward the goal: | <input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected |

13. Describe a goal for FY 2021-22 and one or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2021-22, respond by indicating "Not Applicable."

| | |
|---|---|
| Goal | |
| Part of FY 21-22 CCP plan? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | |
| Objective: | |
| Objective: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Briefly describe <i>current</i> progress toward goal: | |
| Rate the <i>current</i> progress toward the goal: | <input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected |

14. Describe a goal for FY 2021-22 and one or more of its associated objectives and outcome measures. Please provide any information about progress toward the goal thus far in the fiscal year. If no goal, objective, or outcome measure was identified in FY 2021-22, respond by indicating "Not Applicable."

| | |
|---|---|
| Goal | |
| Part of FY 21-22 CCP plan? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Objective: | |
| Objective: | |
| Objective: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Outcome Measure: | |
| Briefly describe <i>current</i> progress toward goal: | |
| Rate the <i>current</i> progress toward the goal: | <input type="checkbox"/> Substantially slower than expected <input type="checkbox"/> Somewhat slower than expected <input type="checkbox"/> As expected <input type="checkbox"/> Faster than expected <input type="checkbox"/> Substantially faster than expected |

SECTION 4: TYPES OF PROGRAMMING AND SERVICES

Section 4 asks questions about the types of programs and services provided during FY 2020-21. For each type of program or service provided, identify the agency(ies) that provide the program or service and at what stage(s) the program or service is provided (in-custody, supervision, other). Please refer to the [CCP Survey Data Reporting Guide](#) for the BSCC’s definition of each type of program and service listed and the stage(s) of program or service.

| Program/Service | Provide | Providing Agency (check all that apply) | Stage(s) Provided (check all that apply) |
|--|--|--|--|
| Mental Health/Behavioral Health – Services designed to improve mental health. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |

| Program/Service | Provide | Providing Agency (check all that apply) | Stage(s) Provided (check all that apply) |
|--|--|---|---|
| Substance Use – services designed to assist with substance use. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input checked="" type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |
| Housing – services designed to assist with housing after release. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |
| Employment – services designed to provide clients with a job and/or to provide job training to improve chances of finding employment after release. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |
| Education – focuses on academic achievement. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |
| Family – family-oriented education, service, and training. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |
| Domestic Violence Prevention – support and intervention | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: > | <input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: > |

| Program/Service | Provide | Providing Agency (check all that apply) | Stage(s) Provided (check all that apply) |
|--|--|--|--|
| <p>Physical Health – services designed to improve clients’ physical well-being.</p> | <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p><input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: ></p> | <p><input type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: ></p> |
| <p>Quality of Life – Services that enhance the standard of happiness, comfort, and well-being of an individual to participate in life events (e.g., assistance in getting a driver’s license, opening a bank account, etc.)</p> | <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p><input type="checkbox"/> Sheriff <input checked="" type="checkbox"/> Probation <input type="checkbox"/> Behavioral health <input checked="" type="checkbox"/> Community-based organization <input type="checkbox"/> Other, describe: ></p> | <p><input checked="" type="checkbox"/> In-Custody <input checked="" type="checkbox"/> Supervision <input type="checkbox"/> Other, describe: ></p> |

SECTION 5: OPTIONAL QUESTIONS

Section 5 asks optional questions about evaluation, data collection, programs and services, and local best practices. There are 9 questions in this section. Responses will be used by the BSCC and its justice-system partners to better understand the needs of counties. If the CCP chooses not to answer an optional question, please respond “Decline to Respond.”

15. Describe the process the CCP uses to determine potential programs and/or services for local implementation using Realignment funds.
>Decline to Respond

16. Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation? Check the appropriate box to the left of the list.

Yes
 No

If yes, explain how.

>Decline to Respond

17. Does the county consider evaluation results when funding programs and/or services? Check the appropriate box to the left of the list.

Yes
 No

If yes, explain how.

>Decline to Respond

18. Does the county use [BSCC definitions](#) (average daily population, conviction, length of stay, recidivism, and/or treatment program completion rates) when collecting data? Check the yes or no box to the left of each BSCC Definition listed, as applicable.

| Yes | No | BSCC Definition |
|--------------------------|--------------------------|------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Average daily population |
| <input type="checkbox"/> | <input type="checkbox"/> | Conviction |
| <input type="checkbox"/> | <input type="checkbox"/> | Length of stay |
| <input type="checkbox"/> | <input type="checkbox"/> | Recidivism |
| <input type="checkbox"/> | <input type="checkbox"/> | Treatment program completion rates |

19. What percentage of the Public Safety Realignment allocation is used for evidence-based programming (as defined locally)? Check the most appropriate box to the left of the list of percentages.

| Percent for Evidence-Based Programming | |
|--|---------------|
| <input type="checkbox"/> | Less than 20% |
| <input type="checkbox"/> | 21% 40% |
| <input type="checkbox"/> | 41% 60% |
| <input type="checkbox"/> | 61% 80% |
| <input type="checkbox"/> | 81% or higher |

20. We would like to better understand the county's capacity to offer mental health, substance use disorder, behavioral health treatment programs, and/or other services. What type and level of services are now available?
>Decline to Respond
21. What challenges does the county face in meeting the above program and service needs?
>Decline to Respond
22. What programmatic changes and/or course corrections has the CPP made in the implementation of Public Safety Realignment that it believes other counties would find helpful?
>Decline to Respond
23. Describe a local best practice or promising program that has produced positive results. If data exists to support the results, please share.
>Decline to Respond

ATTENTION: This concludes Part A of the FY 2021-22 CCP Survey.

Please complete [Part B](#) in Microsoft Excel which consists of two (2) budgetary sections.

Optional Highlight or Success Story

In addition, to produce a more comprehensive report on the implementation of realignment, we are asking for a brief, one-page, visually appealing, highlight or success story that provides implementation information related to the county's Public Safety Realignment success. This highlight may include optional graphs, charts, photos, or quotes. Photos of programs in action along with quotes from program participants and/or community partners do not need to provide identifying information. The highlight or success story provided may be published in the *2011 Public Safety Realignment Act: Tenth Annual Report on the Implementation of Community Corrections Partnership Plans*. While every effort will be made to include these in the report, inclusion is not guaranteed. Note: Ensure any individual(s) in the photos have given their consent for use/publication and do not submit any photos that include faces of minors (youth under the age of 18).

Submission Instructions

In a single email, please attach the following documents to provide a complete CCP Survey package:

1. Completed Part A (Word) document,
2. Completed Part B (Excel) documents,
3. Optional highlight or success story (if being provided), and
4. Updated CCP plan.

The complete CCP Survey package, including all attachments, shall be emailed **by December 15, 2021** to:

Helene Zentner, Field Representative
Board of State and Community Corrections
916-838-7777 or Helene.Zentner@bscc.ca.gov

Please be aware that a complete CCP Survey package, including an updated CCP plan, MUST be submitted to the BSCC to receive compensation.

NOTE: *The information provided in the CCP Survey package will be made public by the BSCC in the annual report to the Governor's Office and the Legislature on the implementation of Community Corrections Partnership plans on the BSCC website.*