

# Overview of the Council on Criminal Justice and Behavioral Health

A Presentation to the  
California Association of  
Local Behavioral Health Boards and Commissions  
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# CCJBH Overview

Established by California Penal Code Section 6044(a), the Council on Criminal Justice and Behavioral Health (CCJBH) is a 12-member council:

- Chaired by the Secretary of the California Department of Corrections and Rehabilitation (CDCR).
- Co-Chaired by the Directors of the Department of State Hospitals (DSH) and Department of Health Care Services (DHCS)
- Remaining members are appointed expert representatives from the criminal justice and behavioral health fields such as probation, court officers, and mental health care professionals.
- More information about CCBJH may be found [here](#).



# CCJBH Overview (cont'd.)

- CCJBH serves as a resource to assist and advise the Administration and Legislature on best practices to reduce the incarceration of youth and adults with mental illness(es) and substance use disorders (SUDs), with a focus on prevention, diversion, and reentry strategies.
- As required by Penal Code Section 6044 (h) (1), CCJBH shall provide a report to the Legislature by December 31st of each year, documenting the Council's activities during the preceding year, including recommendations for improving the cost-effectiveness of behavioral health and criminal justice programs. Past reports may be found on the CCJBH [website](#).



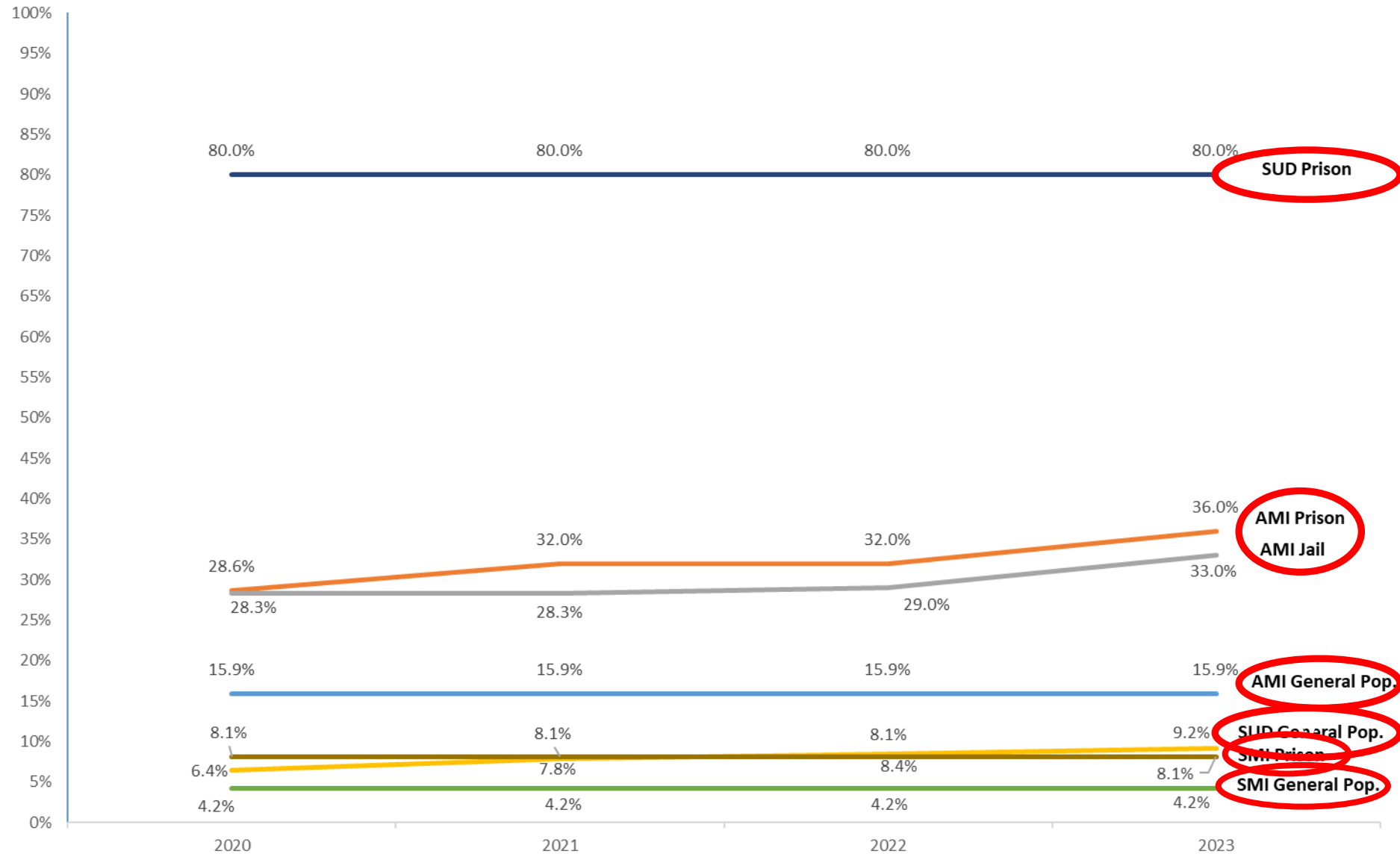
# CCJBH Overview (cont'd.)

- As a full Council, CCJBH meets quarterly, focusing on key issues of Councilmember interest related to the population of individuals with behavioral health (BH) needs who are justice-involved (JI; hereafter referred to as the BH/JI population).
- CCJBH also has two workgroups that meet bi-monthly: one for Juvenile Justice and one for Diversion/Reentry.



# Overrepresentation of BH in CA Jails and Prisons

Behavioral Health Prevalence Rates From 2020 to 2023 by Substance Use Disorder, Any Mental Illness, and Serious Mental Illness for the Jail, Prison and General Populations



# CCJBH 2024 Framework

- CCJBH will focus on the following topic areas for Calendar Year 2024:
  - ✓ Strengthening Treatment and Support Services
  - ✓ Housing
  - ✓ Workforce
  - ✓ Data
  - ✓ Community Involvement
  - ✓ Education (best and promising practices, etc.)



# 2024 Full Council Meeting and Workgroup Topics\*

Full Council Meeting	Juvenile Justice Workgroup	Diversion/Reentry Workgroup
Innovations in Substance Use Disorder Treatment	Restorative Justice for Juveniles with Behavioral Health Needs	Addressing Hiring Barriers for the BH/JI Population
Housing for the BH/JI Population	RAND Contract Close-Out Gang Interventions	CDCR's ISUDT Behavioral Health Peers/ CDCR's Offender Mentor Certification Program Substance Use Disorder (SUD) Counselor Certification
CDCR Probation and Sheriffs on the Implementation of CalAIM	Residential Treatment for Serious Mental Illness/Substance Use Disorder Treatment (including SB 823 youth)	Multi-System Application of Risk-Needs-Responsivity in Service Delivery
988 Crisis Response	California Department of Public Health Public Education and Change Campaign Universal Fee Schedule and New CalHOPE Kooth Mobile App	HCAI Justice System Involved Youth Behavioral Health Pipeline & Other Behavioral Health Workforce Efforts
	California Department of Education Overview: Behavioral Health and Criminal Justice School Collaborative	CARE Act Update



\*Subject to Change Based on Council Priorities & Speaker Availability.



# CCJBH 2024 Projects

- ✓ California Advancing and Innovating Medi-Cal (CalAIM)
- ✓ CDCR/Department of Health Care Services (DHCS) Medi-Cal Utilization Project
- ✓ Housing and Homelessness
- ✓ Public Health Meets Public Safety: Connecting Data, Policy, and People
- ✓ CCJBH Lived Experience Project Contracts
- ✓ Expanding the Peer Workforce
- ✓ SB 823 Juvenile Justice Evidence-Based and Emerging Programs and Practices Compendium and Toolkit Contract
- ✓ Mental Health Diversion
- ✓ System Partner Education (May is MH Awareness, September Suicide Prevention Awareness and SUD Recovery Awareness)
- ✓ Annual Legislative Report





# California Advancing and Innovating Medi-Cal (CalAIM)



# CaAIM

- CCJBH is actively committed to supporting the Department of Health Care Services' (DHCS') [CaAIM](#) initiative, a multi-year effort to improve the quality of life and health outcomes of the Medi-Cal population by implementing broad delivery system, program and payment reforms.
- Since 2021, CCJBH has supported DHCS' CaAIM efforts by participating in a number of DHCS CaAIM workgroups.
- CCJBH developed a [CaAIM Factsheet](#) for justice system partners with the new information from the recently approved waiver.
- CCJBH also recorded a [CaAIM 101 overview](#), presented by DHCS.
- In collaboration with DHCS and other system partners, CCJBH developed an [informational flyer](#) to instruct justice system partners on how to make a referral to request an Enhanced Care Management (ECM) Assessment for BH/JI individuals who are under community supervision.



# CCJBH/DHCS Medi-Cal Utilization Project



# CDCR-DHCS Medi-Cal Utilization Project

- The CCJBH Medi-Cal Utilization Project (MCUP) monitors enrollment into Medi-Cal, including selection of Medi-Cal Managed Care Plans (MCP), as well as access to and utilization of Medi-Cal behavioral health services for people releasing from CDCR who suffer from mental illness(es) and/or substance use disorders (SUDs).
- Most individuals released from CDCR are enrolled into Medi-Cal within one year (85 percent for those released in FY 2018-19).
- Of the individuals enrolled into Medi-Cal, the time to select a Managed Care Plan was as follows:
  - 32% selected a plan within one month
  - 70% within three months
  - 79% within six months
  - 83% within one year



# CDCR-DHCS Medi-Cal Utilization Project (cont'd.)

- In line with DHCS's behavioral health services reporting, service utilization is measured in terms of penetration rates, indicating utilization of one or more (1+) services, and engagement rates as a subset of penetrations rates, indicating utilization of five or more (5+) services.
- For individuals released from CDCR in FY 2018-19 who were enrolled into Medi-Cal, the demographic characteristics and behavioral health services utilization rates (within two years of release) are as follows:
  - 52% had an identified **SUD** designation at release
    - 23% SUD service penetration
    - 12% SUD service engagement
    - 8% Specialty Mental Health Services (SMHS) penetration
    - 4% SMHS engagement



# CDCR-DHCS Medi-Cal Utilization Project (cont'd.)

- 19 percent had a **co-occurring SUD and mental health** designation at release
  - 35% SUD service penetration
  - 17% SUD service engagement
  - 33% SMHS penetration
  - 20% SMHS engagement
- 7 percent had a **mental health disorder** designation at release
  - 39% SMHS penetration
  - 27% SMHS engagement
  - 28% SUD service penetration rate
  - 12% SUD service engagement rate
- 22 percent had no/unknown identified behavioral health need at release

For more information, see the [20<sup>th</sup> Annual CCJBH Legislative Report](#).



# CDCR-DHCS Medi-Cal Utilization Project (cont'd.)

## In Sum:

- CCJBH remains concerned with the low utilization rates of Medi-Cal behavioral health services for individuals released from prison with identified behavioral health needs who are enrolled into Medi-Cal.
- To better understand low utilization of services, CCJBH partnered with the California State University, Sacramento, to conduct listening sessions for individuals with lived experience in the justice system and having a behavioral health condition (the results of these sessions will soon be published to the CCJBH website).





# Housing/Homelessness



# Parolee's Need for Housing

- Point-in-time data from CDCR indicate that, of the 31,752 individuals who were on parole on June 30, 2022, 83 percent (n=26,430) were not homeless or residing in a shelter (i.e., transient). That said, 17 percent (n=5,322) were transient. Of those who were transient:
  - 73 percent (n=3,879) had an identified behavioral health need at the time of their release.
    - 36 percent (n=1,941), left prison with a SUD only.
    - 25 percent (n=1,319), had a co-occurring mental health and SUD:
      - ✓ 75 percent (n=995) had a Correctional Clinical Case Management (CCCMS) designation.
      - ✓ 25 percent (n=284) had an Enhanced Outpatient Program (EOP) designation.
    - 12 percent (n=619), had a mental health designation only and within that group:
      - ✓ 75 percent (n=484) were CCCMS.
      - ✓ 25 percent (n=118) were EOP.
  - 27 percent (n=1,443) had no identified behavioral health need.

*\*Comparable statewide data are not available for individuals release from CDCR onto Post-Release Community Supervision.*



# Housing/Homelessness

CCJBH worked on several projects to address the housing needs of the BH/JI population. Projects completed in the past two years include:

- A housing implementation webinar series, [Building Blocks for Coming Home: How California Communities Can Create Housing Opportunities for People with Complex Needs Leaving the Justice System](#), which was developed based on the report the CSG Justice Center produced for CCJBH, [Reducing Homelessness for People with Behavioral Health Needs Leaving Prisons and Jails: Recommendations to California's Council on Criminal Justice and Behavioral Health](#)
- CCJBH provided [Feedback in Response to the U.S Interagency Council on Homelessness' Federal Strategic Plan.](#)



# Housing/Homelessness (continued)

- CCJBH continues to work with CDCR's Division of Adult Parole Operations, Division of Adult Programs, and Office of Research to support the Secretary's participation as an appointed member of the California Interagency Council on Homelessness by providing quarterly reports on the progress of CDCR's commitments specified in [Cal ICH's Action Plan for Preventing and Ending Homelessness in California](#).



# Upcoming Events

## Juvenile Justice Workgroup

February 16, 2024, 12:45 PM – 2:45 PM

## Diversion/Reentry Workgroup

February 16, 2024, 3:00 PM – 5:00 PM

## CCJBH Full Council Meeting

March 22, 2024, 2:00 PM – 4:30 PM

An in-person location is also available for all CCJBH meetings at:  
1515 K St. Suite 550, Sacramento, CA 95814

Please visit our website at <https://www.cdcr.ca.gov/ccjbh/>

Email us at [CCJBH@cdcr.ca.gov](mailto:CCJBH@cdcr.ca.gov)

If you would like to be added to CCJBH's listserv, click [HERE](#).

**THANK YOU!**

