BEFORE THE BOARD OF COUNTY COMMISSIONERS

FOR COLUMBIA COUNTY, OREGON

In the Matter of Adopting the)	
2017-2019 Columbia County)	RESOLUTION NO. 87-2017
Community Corrections Biennial Plan)	
)	

WHEREAS, The Director of the Department of Community Justice- Adult Division has presented the 2017-2019 Columbia County Community Corrections Biennial Plan to the Board of County Commissioners for their consideration and adoption; and

WHEREAS, the Columbia County Local Public Safety Coordinating Council has reviewed the Plan and recommends that it be adopted;

NOW, THEREFORE, IT IS HEREBY RESOLVED that the 2017-2019 Columbia County Community Corrections Biennial Plan, which is attached hereto as Exhibit "A", and is incorporated herein by this reference, is hereby adopted.

Dated this 13^{th} day of December, 2017.

BOARD OF COUNTY COMMISSIONERS FOR COLUMBIA COUNTY, OREGON

Henry Heimuller, Chair

BY:

Aargare): Mæruder, Commissioner

RV.

Alex Tardif, Commissioner

Approved as to form:

Office of County Counsel

Columbia County 2017-2019 Community Corrections Biennial Plan

Department of Corrections 2575 Center Street NE	•		For Office Use Only
Salem, Oregon 97301-46	67	Date Received:	
Address: 901 Port Avenue			
Phone: 503-3976253	Fax: 503-397-6645		
Community Corrections Di	rector/Manager: Janet E	vans	
Address: 901 Port Avenue	, St.Helens, Or 97051		
Phone: 503-366-4660	Fax: 503-397-6645	Email: Janet.Evans@	co.columbia.or.us
Sheriff: Jeff Dickerson			
Address: 901 Port Avenue	, St. helens, Or 97051		
Phone: 503366-4600	Fax: 503-366-4644	Email: jeff.dickerson@	②co.columbia.or.us
Jail Manager: Tony Weave	er .		
Address: 901 Port Avenue	, St. helens, Or 97051		
Phone: 503-366-4638	Fax: 503-366-4644	Email: Tony.Weaver@	②co.columbia.or.us
Supervisory Authority: Jeff	Dickerson		
Address: 901 Port Avenue,	St. helens, Or 97051		
Phone: 503366-4600	Fax: 503-366-4644	Email: jeff.dickerson@	②co.columbia.or.us
Supervisory Authority:			
Address:			
Phone:	Fax:	Email:	
Phone: LPSCC Contact: Janet Eva		Email:	
	ins	Email:	
LPSCC Contact: Janet Eva	ins	Email: Email: Janet.Evans@	co.columbia.or.us
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	ns St. helens, Or 97051 Fax: 503-397-6645	Email: Janet.Evans@	co.columbia.or.us
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	ns St. helens, Or 97051 Fax: 503-397-6645		co.columbia.or.us
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	ns St. helens, Or 97051 Fax: 503-397-6645	Email: Janet.Evans@ Biennial Budget	
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid	Email: Janet.Evans@ Biennial Budget	\$3,802,306.00 \$10,393.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid	Email: Janet.Evans@ Biennial Budget Fund: Blease Subsidy Fund:	\$3,802,306.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transition	Email: Janet.Evans@ Biennial Budget Fund: Blease Subsidy Fund: nental Fund: on Fund:	\$3,802,306.00 \$10,393.00 \$148,796.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio	Email: Janet.Evans@ Biennial Budget Fund: elease Subsidy Fund: nental Fund: on Fund: estment Grant:	\$3,802,306.00 \$10,393.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve	Email: Janet.Evans@ Biennial Budget Fund: elease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve CJC Treatment Co County General Fu	Email: Janet.Evans@ Biennial Budget Fund: elease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve CJC Treatment Co County General Fu Supervision Fees:	Email: Janet.Evans@ Biennial Budget Fund: elease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00 \$0.00 \$200,000.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve CJC Treatment Co County General Fu Supervision Fees: Other Fees:	Email: Janet.Evans@ Biennial Budget Fund: Blease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant: und:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve CJC Treatment Co County General Fu Supervision Fees:	Email: Janet.Evans@ Biennial Budget Fund: Blease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant: und:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00 \$0.00 \$200,000.00
LPSCC Contact: Janet Eva Address: 901 Port Avenue,	St. helens, Or 97051 Fax: 503-397-6645 State Grant-in-Aid Inmate Welfare Re DOC M57 Supplem Treatment Transitio CJC Justice Reinve CJC Treatment Co County General Fu Supervision Fees: Other Fees: Other State or Feder	Email: Janet.Evans@ Biennial Budget Fund: Blease Subsidy Fund: nental Fund: on Fund: estment Grant: ourt Grant: und:	\$3,802,306.00 \$10,393.00 \$148,796.00 \$671,037.00 \$0.00 \$200,000.00 \$70,000.00

Columbia County 2017-2019 Community Corrections Budget Summary

Program Name	Grant in Aid Fund	M57	Inmate Welfare Release Subsidy Fund	County/Other Funds and Fees	Total
Administration	1,269,406.00			85,400	1,354,806.00
Community Service/Work Crew	300,000			240,400	540,400.00
Sexual Offender	5,000				5,000
Mental Health		5,000	5,000	20,000	30,000
Substance Abuse		10,000		40,000	50,000
Drug Court	110,000	25,000			135,000
JRI/Downward Departure		57,796		386,637	444,433.00
Domestic Violence Prevention	2,000	1,000		2,000	5,000
Transitional Housing			3,500	40,000	43,500
Supervision	1,635,900			308,600	1,944,500.00
Sanctions and Services					
Jail	480,000				480,000
Transitional Services		50,000	1,893		51,893
Fund Total	3,802,306	148,796	10,393	1,123,037	5,084,532

LOCAL PUBLIC SAFETY COUNCIL

Mission Statement: "To promote public safety by developing policies and procedures that create an effective criminal adult and juvenile system including managing the offender population through prevention, intervention and accountability."

Columbia County's LPSCC meets monthly to review public safety concerns. During the last biennium, LPSCC reviewed and endorsed the County's jail funding levy, approved the 2017-2019 Community Justice plan, LPSCC also endorsed the Evidence Based Decision Making (EBDM) grant request sponsored by NIC.

The council is committed to improving the quality of criminal justice throughout the county. The Department of Community Justice, Adult & Juvenile Divisions, have the support of LPSCC in their endeavor to train staff and implement evidence-based crime prevention programs.

COLUMBIA COUNTY DEPARTMENT OF COMMUNITY JUSTICE ADULT DIVISION

Mission Statement: "Reduce criminal conduct through a partnership with communities and human services agencies with a continuum of supervision, incarceration, and programming to manage offender behavior."

Columbia County Department of Community Justice - Adult Division (DCJ-Adult Division) supervises approximately 486 adult offenders on parole, post-prison supervision and probation. Over the two years, these numbers have been growing. Average caseloads are around 70 clients per officer. Columbia County is committed to a value-driven system using evidence-based practices to protect citizens, hold offenders accountable, provide effective treatment programming, and to ensure rapid responses to violations using a continuum of sanctions. Through standardized risk assessments and a specialized sex offender assessment tool, Community Justice identifies those offenders who pose the greatest risk to the community and focuses the majority of resources and services to medium and high-risk offenders.

Community Justice Adult Division staff consists of the Director, one Adult Division Supervisor, seven Parole & Probation Officers, two support staff, a .5ft Intervention Specialist, a Community Services Coordinator and a work crew supervisor. Three temporary part-time employees are used to provide work crew supervision.

DCJ - Adult Division partners with local agencies and organizations to ensure the best delivery of services within limited resources. A collaborative effort with the Circuit Court, District Attorney, Columbia County Consortium, and Columbia Community Mental Health, resulted in the formation of the Columbia County Drug Court program. By working together as a team, the agencies seek to provide a variety of programs and consistent supervision geared toward supporting and helping the offender maintain a drug-free life.

EVIDENCE BASED PRACTICE (EBP)

The Department of Community Justice - Adult Division, has developed a comprehensive evidence-based approach that includes both internal coordination of programming aimed at skill development and external coordination of programming aimed at reduction of recidivism. The plan will identify steps necessary to create, implement and maintain a system of services, supervision and sanctions resulting in positive outcomes and documents the steps taken to achieve such results.

The principles of EBP includes those of risk, need, and responsivity and will be incorporated into the daily practices of supervision and how they have been incorporated into the daily practices of supervision.

The principle of risk dictates that services are delivered to offenders with a higher risk to recidivate, while minimal services are provided to offenders who present a low risk to recidivate. Risk assessment is accomplished through use of the standardized and validated Oregon Case Management System Risk Assessment Tool.

The principle need determines what factors to target that are specifically related to criminal behavior. Treatment and supervision services must focus on addressing criminogenic needs and behaviors.

The principle of responsivity determines how services are best delivered and that programs are using treatment models that have demonstrated effectiveness in reducing recidivism. These models include cognitive, which focuses on how a person thinks; behavioral, which focuses on how a person behaves; and social learning theory approach, which use techniques of role modeling, practice, and reinforcement to teach new behaviors.

Thus, Parole & Probation Officers manage felony offenders who are in the community by concentrating the greatest efforts on offenders who are most likely to commit new crimes.

Program Name:	Administration	on		
Program Category:	Administration	on		
Program Description:	Provide plar Justice. Res and daily op	ining, management and admini ponsible for the development a erations	strative services to and implementation	the Dept of Community of programs, budget, policy
Program Objectives:	Manage Cor	nmunity Justice operations , in	cluding budget and	contracts, personnel,
Method(s) of Evaluation:	County perfo	ormance evaluations		
Monthly Average to be Ser		Type of Offender(s) Served; ☑ Probation ☑ Parole/Post-Prison ☑ Local Control	☑ Felony☑ Misdemeanor	☑ Low☑ Limited
		nent Provider(s) Will You Use V	Vithin This Program	
Provider Name		Treatment Type (le , Anger Manegement, Cognitive, DV, Dual Diagnosie, Sex Offendor, Inpatient Substance Abuse, or Outpatient Substance Abuse)	CPC Y/N?	If Yes, Overall Score
		Andrea, or outpariett daystilles Andreo,	☐ Yes ☐ No	
			☐ Yes ☐ No	
	**!		☐ Yes ☐ No	
Funding Sources State Grant-In-Aid Fund Inmate Welfare Release DOC M57 Supplement Treatment Transition For CJC Justice Reinvestn	se Subsidy Fu tal Fund Fund	\$1,269,406.00 and \$55,400.00		
☐ CJC Treatment Court (Ψοσ, 100.00		
County General Fund	Giailt			
☐ Supervision Fees				
☐ Other Fees (revenue)		30000		
Other State or Federal	Grant			
Other: Please Identify				
		(
Additional Comments:				

Program Name:	WORK CRE	TAN AIAD	CIVINIONITY SERVIC	- ⊏			
Program Category:	Community	Service a	nd Work Crew				
Program Description:	offenders w furlough from residents m	ho fail to d m jail and ay also co	ng alternative to the Comply with conditions offenders released un implete work crew in lacted to work crew program to work crew progra	s of super nder the n lieu of pay	vision. It i natrix prog ving rent.	is also used as gram. Transitio Offenders are	s an option to onal housing
Program Objectives:	effective wo	rk force to cial obliga	y sentencing alternati community agencies tions. Offenders failir rity.	s. Provide	an oppor	tunity for offer	iders to work in
Method(s) of Evaluation:			come measures as re racked and reported i				
Monthly Average to be Ser		Pro	f Offender(s) Served: bation role/Post-Prison cal Control	⊠ Feld ⊠ Misa	ony demeanor		Risk Level: High Medium Low Limited
Provider Name		(ie , Anger M Diagnosis, Se	der(s) Will You Use V eatment Type anegement, Cognitive, DV. Dual ex Offender, Inpatient Substance Outpatient Substance Abuse)		Y/N?		verall Score
		18400, 0		☐ Yes	□No		
				Yes	☐ No		
				☐ Yes	□ No		
Funding Sources State Grant-In-Aid Fun	ıd		\$300,000.00				
☐ Inmate Welfare Releas	se Subsidy Fu	ınd —					
☐ DOC M57 Supplement	tal Fund	_					
☐ Treatment Transition F	und	_					
☐ CJC Justice Reinvestn	nent Grant		\$0.00				
☐ CJC Treatment Court (Grant						
☐ County General Fund		-	-				
☐ Supervision Fees		:0	\$58,400.00				
○ Other Fees (revenue)		11)	\$2,000.00				
Other State or Federal	Grant	-	-				
Other: Please Identify		(
	Contracts		\$180,000.00				
		-					

ļ	Program Name:	Custody			
	Program Category:	Custodial/Sa	anction Beds		
	Program Description:	sentences of	of incarceration of felony offender or terms of 12 months or less. It post-prison supervision revocati	t includes court sen	tences, probation revocations,
	Program Objectives:	sanctions to	reater control authority over related appropriately respond to violated appropriately respond to violated supervised work activities.	atively short-term pr ions of conditions o	risoners. Offer a range of if supervision. Incorporate
	Method(s) of Evaluation:	participate in community. reported in t	ion of success is for the offendent available in-custody resources. Data collection is through a state the department's annual report. Followed days used in the local form.	s, and make a succ atewide data base a Community Justic	essful return to the and with CIS with results
	Monthly Average to be Ser		Type of Offender(s) Served: ☑ Probation ☑ Parole/Post-Prison ☑ Local Control	⊠ Felony ⊠ Misdemeanor	Low Limited
ſ	Provider Name		nent Provider(s) Will You Use V Treatment Type	CPC Y/N?	If Yes, Overall Score
			(ie , Anger Management, Cognitive, DV, Dual Diagnosis, Sex Offender, Inpatient Substance Abuse, or Outpatient Substance Abuse)		
	Columbia County Jail		Jail	☐ Yes ⊠ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
	Funding Sources State Grant-In-Aid Fun	d	\$480,000.00		
	☐ Inmate Welfare Releas	e Subsidy Fu	ınd		
	☐ DOC M57 Supplement	al Fund			
	☐ Treatment Transition F	und			
	CJC Justice Reinvestm	ent Grant	\$0.00		
	☐ CJC Treatment Court C	Grant			
	County General Fund				
	Supervision Fees				
	Other Fees (revenue)				
	Other State or Federal	Grant			
	Other: Please Identify		n.		
			N 2		

Program Name:	SUBSTANC	E ABL	JSE TREATMENT				
Program Category:	Substance /	Abuse					
Program Description;	offenders. A address thin portion of tre to inability to	All subs iking ei eatmer o pay.	and outpatient substance stance abuse treatment groots and thereby change it costs based on a sliding Offenders assessed to notial programs followed b	roups are behavior g fee sca eed inten	e cognitive r. Offende le, no offe sive treatr	bebased progra ers are require nder is refused ment will be re	ams designed to d to pay a d treatment due
Program Objectives:	Offenders w	Offenders needing treatment will be evaluated and referred to treatment programs. Offenders will submit to random urinalysis testing. TCUDS will be completed on all offenders eligible under measure 57.					
Method(s) of Evaluation:		Periodic electronic audits of the CIS treatment module and staff consultation will be accomplished to determine if program objectives are achieved.					
Monthly Average to be Ser			e of Offender(s) Served: Probation Parole/Post-Prison Local Control	⊠ Felo ⊠ Miso	ony demeanor	Gender: ☑ Male ☑ Female	Risk Level: High Medium Low Limited
		nent Pr	rovider(s) Will You Use W				".0
Provider Name		(ie., Ang Diagnos Abus	Treatment Type Jer Management, Cognitive, DV, Dual is, Sex Offender, Inpatient Substance a, or Outpatient Substance Abuse)	CPC	Y/N?	If Yes, U	verall Score
Columbia Community Men	tal health	Outpatient Substance Abuse		⊠ Yes	☐ No	55% SAT (20	009)
Medicine Wheel		Outpa Abuse	atient Substance e	☐ Yes	⊠ No		
Pathways		Inpatient Treatment		∑ Yes	☐ No	51% SAT (20	005)
Funding Sources ☑ State Grant-In-Aid Fun	d		\$0.00				
☐ Inmate Welfare Release	se Subsidy Fu	ınd					
	al Fund		\$10,000.00				
☐ Treatment Transition F	und						
	nent Grant		\$20,000.00				
☐ CJC Treatment Court (Grant						
☐ County General Fund							
Supervision Fees			\$20000.00				
Other Fees (revenue)							
Other State or Federal	Grant						
Other: Please Identify							
OHP/Self Pay							

Program Name:	Columbia C	ounty [Drug Court				
Program Category:	Substance A	Abuse					
Program Description:	discharge of process to re Offenders a supervision,	r felony ehabilit re plac and ad ance d	es options for offenders or diversion, including the tation through an enhanced under intense superviolation, offender communication, offender	opportuni ed superv sion to en inditions.	ty to enter vision and isure com Weekly a	a structured a treatment pro- pliance and co ppearances be	and cooperative cess. onditions of efore the Court
Program Objectives;	to treatment will be given	All clients will participate in substance abuse treatment as recommended. Timely referrals to treatment will be made. Participants who do not comply with the rules of the Drug Court will be given sanction as determined by the Drug Court team. All participants will submit to weekly urinalysis testing.					
Method(s) of Evaluation:			onsultation with supervisi are achieved. Drug cour				o determine if
Monthly Average to be Ser			e of Offender(s) Served: Probation Parole/Post-Prison Local Control rovider(s) Will You Use V	⊠ Felo ⊠ Misc	ny lemeanor		Risk Level: High Medium Low Limited
Provider Name		(ie., And Diagnos	Treatment Type ger Management, Cognitive, DV, Dual iis, Sex Offender, Inpatient Substance e, or Outpatient Substance Abuse)	CPC	Y/N?	If Yes, O	verall Score
Columbia Community Men	tal Health	Outpa	atient/Substance/MH	⊠ Yes	☐ No	55% SAT (20	009)
Redwood Toxicology		Outpa	atient Substance/UA	☐ Yes	☐ No		
				☐ Yes	☐ No		
Funding Sources State Grant-In-Aid Fun Inmate Welfare Release		ınd	\$110,000.00				
	al Fund		\$25,000.00				
☐ Treatment Transition F	und						
CJC Justice Reinvestn	nent Grant		\$0.00				
	Grant						
County General Fund							
☐ Supervision Fees							
Other Fees (revenue)							
Other State or Federal	Grant						
Other: Please Identify							
			-				

Additional Comments: .5 FTE probation officer II

2017-2019 Biennial Plan Program Description

Program Name:	SEX OFFEN	1DER	TREATMENT							
Program Category:	Sex Offende	er Serv	ices							
Program Description:	offender trea	atment havior	ent to offenders convicted by the Court and will inc control to offenders. Tre sting	lude	e grou	up and in	divid	lual treatme	ent to assist in	
Program Objectives:	All offenders plethysmogr		ng treatment will be refersting	rred	and	will inclu	de po	olygraph a	nd	
Method(s) of Evaluation:			audits of the CIS treatmetermine if program object					onsultation	ns will be	
Monthly Average to be Ser			e of Offender(s) Served: Probation Parole/Post-Prison Local Control	\boxtimes] Fel	ony demean	or 🛭	Gender: ☑ Male ☑ Female	Risk Level: High Medium Low Limited	
		nent Pi	rovider(s) Will You Use V	Vith			m?	1000 0		_
Provider Name		(ie., Ang Diagnos Abus	Treatment Type ger Management, Cognitive, OV, Dual is; Sax Offender, Inpatient Substance ø, or Outpatient Substance Abuse)		CPC	Y/N?		If Yes, C	Overall Score	
RDForensics		Sex C	Offender treatment		Yes	⊠ No				
Bridgetown Polygraph		Sex C	Offender] Yes	⊠ No				
] Yes	☐ No				
Funding Sources State Grant-In-Aid Fun	nd		\$5,000.00							
☐ Inmate Welfare Releas	se Subsidy Fu	ınd	\$1893							
☐ DOC M57 Supplement	tal Fund									
☐ Treatment Transition F	und									
☐ CJC Justice Reinvestm	nent Grant		\$0.00							
☐ CJC Treatment Court (Grant									
☐ County General Fund										
Supervision Fees										
Other Fees (revenue)										
Other State or Federal	Grant									
Other: Please Identify										
⊠ self pay			=======================================							
Additional Comments:										

2017-2019 Biennial Plan Program Description Revised: 12/1/2017

Program Name:	DOMESTIC	VIOL	ENCE TREATMENT SER	RVICES				
Program Category:	Other Progr	ams						
Program Description:	evaluate an The prograr individual ar manage and	d treat n cons nd grou ger and mplian	and anger management offenders who have been ists of education and treaup therapy sessions and to behavior without violence and focuses on achievanseling.	n convicte atment to tools to he ce. Office	ed of or dis prevent fu elp the offe ers work cle	splay assaultiverther violence ender understander understa	ve behavior. It includes and and atment providers	
Program Objectives:	Offenders o	Offenders ordered to treatment will be referred to appropriate programs.						
Method(s) of Evaluation:	Periodic electronic audits of CIS conditions and treatment module will be accomplished to determine if program objectives are achieved.						complished to	
Monthly Average to be Se	rved: 10		e of Offender(s) Served: Probation Parole/Post-Prison Local Control			Gender: Male Female	Risk Level: High Medium Low Limited	
	Which Treatr	nent P	rovider(s) Will You Use V	Vithin This	s Program	?		
Provider Name		(ia., An Diagno	Treatment Type ger Management, Cognitive, DV, Dual sis, Sex Offender, Inpatient Substance se, or Outpatient Substance Abuse)	CPC	Y/N?	If Yes, O	verall Score	
Counseling & Wellness			valuation & Treatment	☐ Yes	⊠ No			
				☐ Yes	☐ No			
				☐ Yes	☐ No			
Funding Sources ⊠ State Grant-In-Aid Fur			\$2,000.00					
Inmate Welfare Releas	se Subsidy Fu	ınd						
☐ DOC M57 Supplemen	tal Fund		\$1,000.00					
☐ Treatment Transition F	Fund							
	ment Grant		\$0.00					
CJC Treatment Court	Grant							
☐ County General Fund								
☐ Supervision Fees			\$2,000.00					
Other Fees (revenue)								
Other State or Federal	Grant							
Other: Please Identify								

Additional Comments:

Program Category:	Mental Heal	th Serv	vices				
Program Description:	system with	the go Service	ndividuals with mental illoal of increasing their abilities will include evaluation	ity to retu	ırn to full a	nd productive	lives in the
Program Objectives:			treatment services who tram or offenders who are				
Method(s) of Evaluation:			f the CIS treatment modu ogram objectives are ach		aff consult	ations will be	accomplished to
Monthly Average to be Ser			e of Offender(s) Served: Probation Parole/Post-Prison Local Control	⊠ Feld ⊠ Mis	ony demeanor		Risk Level: High Medium Low Limited
Provider Name		nent Pi	rovider(s) Will You Use V Treatment Type		s Program Y/N?		Iverall Score
Trovide Name		(le , Ang Diagnos Abus	ger Management, Cognitive, DV, Dual iis, Sex Offender, Inpatient Substance e. or Outpatient Substance Abuse)	0.0		10.	
Columbia Community Men	tai Health	Menta Diagr	al health/Dual nosis	☐ Yes	⊠ No		
				☐ Yes	☐ No		
				☐ Yes	☐ No		
Funding Sources							
☐ State Grant-In-Aid Fun	ıd		\$0.00				
	se Subsidy Fu	ınd	\$5,000.00				
	al Fund		\$5,000.00				
☐ Treatment Transition F	und						
☐ CJC Justice Reinvestn	nent Grant		\$20,000.00				
☐ CJC Treatment Court (Grant						
☐ County General Fund							
☐ Supervision Fees							
Other Fees (revenue)			**************************************				
Other State or Federal	Grant						
Other: Please Identify			-				

MENTAL HEALTH SERVICES

2017-2019 Biennial Plan Program Description

Additional Comments:

Program Name:

Program Name:	I ANOLL &	PROBATION SUPERVISION		
Program Category:	Supervision			
Program Description:	County. Superior Superior Supervision.	ervision to parole, post-prison, pervision includes, but not limite and collection of court-ordered ferrals to treatment, assessmentoring for substance abuse. One and release plans for each one Caseloads are assigned with and drug court.	ed to office contacts inancial obligations, ents of offender risk, officers complete in-	, residence checks, imposition of structured pre-sentence investigation state and out-of-state to parole or post-prison
Program Objectives:	obligations in fees will be in successful of before closing offenders wi	pervision using OCMS, contact ncluding restitution, fines, unita monitored by supervising office ase closure rate. Officers will use to warrant status; Random uth a history of substance abuse offender has been using contro	ry assessments, attures; Columbia County use all reasonable main rinalysis samples we or when the officer	orney fees, and supervision y will strive to maintain a neans to locate an offender ill be obtained from all
Method(s) of Evaluation:	performance to programs	ndards will be measured by ann e outcome report. Electronic au . Contacts, urinalysis, payment s will be accomplished to deter	idits of caseloads w of fees, fines, and r	ill be used to monitor referrals estitution and staff
Monthly Average to be Ser		Type of Offender(s) Served: Probation Parole/Post-Prison Local Control ment Provider(s) Will You Use V	☑ Felony☑ Misdemeanor	⊠ Low ⊠ Limited
Provider Name		Treatment Type (ie., Anger Management, Cognitive, DV, Dual	CPC Y/N?	If Yes, Overall Score
		Diagnosis, Sex Offender, Inpatient Substance		
			☐ Yes ☐ No	
		Diagnosis, Sex Offender, Inpatient Substance	Yes No	
		Diagnosis, Sex Offender, Inpatient Substance		
Funding Sausas		Diagnosis, Sex Offender, Inpatient Substance	☐ Yes ☐ No	
Funding Sources ☑ State Grant-In-Aid Fun	ıd	Diagnosis, Sex Offender, Inpatient Substance	☐ Yes ☐ No	
		Diagnosis, Sex Offender, Inpatient Substance Abuse, or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
State Grant-In-Aid Fun	se Subsidy Fu	Diagnosis, Sex Offender, Inpatient Substance Abuse, or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
☑ State Grant-In-Aid Fun☑ Inmate Welfare Release	se Subsidy Fu tal Fund	Diagnosis, Sex Offender, Inpatient Substance Abuse, or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
☑ State Grant-In-Aid Fun☐ Inmate Welfare Releas☑ DOC M57 Supplement	se Subsidy Fu tal Fund Tund	Diagnosis, Sex Offender, Inpatient Substance Abuse, or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
 ✓ State Grant-In-Aid Fund ☐ Inmate Welfare Release ✓ DOC M57 Supplement ☐ Treatment Transition Fundament 	se Subsidy Futal Fund Fund nent Grant	Diagnosis, Sex Offender, Inpatient Substance Abuse. or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
 ✓ State Grant-In-Aid Fund ☐ Inmate Welfare Release ✓ DOC M57 Supplement ☐ Treatment Transition F ✓ CJC Justice Reinvest 	se Subsidy Futal Fund Fund nent Grant	Diagnosis, Sex Offender, Inpatient Substance Abuse. or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
 State Grant-In-Aid Fund Inmate Welfare Release DOC M57 Supplement □ Treatment Transition F □ CJC Justice Reinvestr □ CJC Treatment Court 0 	se Subsidy Futal Fund Fund nent Grant	Diagnosis, Sex Offender, Inpatient Substance Abuse. or Outpatient Substance Abuse) \$1,635,900.00	☐ Yes ☐ No	
 State Grant-In-Aid Fund Inmate Welfare Release DOC M57 Supplement Treatment Transition F CJC Justice Reinvestn CJC Treatment Court C County General Fund 	se Subsidy Futal Fund Fund nent Grant	\$1,635,900.00 \$1,89,000.00	☐ Yes ☐ No	
 State Grant-In-Aid Fund Inmate Welfare Release DOC M57 Supplement Treatment Transition F CJC Justice Reinvestn CJC Treatment Court C County General Fund Supervision Fees 	se Subsidy Fu tal Fund Fund nent Grant Grant	\$1,635,900.00 \$1,89,000.00	☐ Yes ☐ No	
 State Grant-In-Aid Fund Inmate Welfare Release DOC M57 Supplement Treatment Transition For CJC Justice Reinvestre CJC Treatment Court County General Fund Supervision Fees Other Fees (revenue) 	se Subsidy Futal Fund Tund Tent Grant Grant Grant	\$1,635,900.00 \$1,89,000.00	☐ Yes ☐ No	

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Additional Comments:	

Program Name:	Columbia County Justice Reinvestment Program/Downward Departure				
Program Category:	Community-	Community-Based Custodial Alternatives			
Program Description:	Columbia County Justice Reinvestment Program (CCJRP) is designed to be an evidence-based curriculum of community programs that provide alternative strategies to addressing adult offender behavior. Through appropriate assessment, referrals, and integral delivery of services, the program is designed to increase public safety, reduce offender recidivism, while reducing prison sentences and jail utilization. The program is intended to move Columbia County Department of Community Justice towards developing long term sustainable evidence-based programming that serve high risk/high need offenders under community supervision which include alternative incarceration programs/short-term transitional leave, probation, and offenders on post-prison supervision. The model is composed of three equal components: evidence-based practice, organizational development, and system-wide collaboration to provide a balance of evidence-based services/programs, community-based supervision strategies and alternative sanctions to enhance risk reduction.				
Program Objectives:	Increase Pu Reduce Pris	blic Safety, Increase Offender son Sentences; Develop EBDM	Accountability, Red Lacross criminal jus	uce Offender Recidivism and stice continuum	
Method(s) of Evaluation:	Data-analys	sis; program fidelity			
Monthly Average to be Served: 15-30 Type of Offender(s) Served: Crime Category: Gender: Risk Level: □ Probation □ Parole/Post-Prison □ Misdemeanor □ Female □ Low □ Limited					
Provider Name		ment Provider(s) Will You Use \ Treatment Type	CPC Y/N?	If Yes, Overall Score	
	(io., Anger Management, Cognitive, DV, Dual Diagnosis, Sax Offender, Inpalient Substance Abuse, or Outpatient Substance Abuse)				
Dr.Roger Cook		EMDR/Cognitive programs	☐ Yes ⊠ No		
NW parenting	Parenting Education		☐ Yes ⊠ No		
			Yes No		
Funding Sources State Grant-In-Aid Fur		\$0.00			
Inmate Welfare Release					
DOC M57 Supplemen		\$57,796.00			
Treatment Transition F					
☐ CJC Justice Reinvestr		\$386,637.00			
☐ CJC Treatment Court	Grant				
County General Fund					
Supervision Fees					
Other Fees (revenue)					
Other State or Federa					
Other: Please Identify	1				

Program Name:	TRANSITIONAL SERVICES/SUBSIDY							
Program Category:	Transition Services							
Program Description:	Services are provided to incarcerated offenders to assist in the transition from custody to the community. Transition services provide release planning, financial assistance for offenders to purchase food, transportation ,work clothing, crisis and transition housing. It also provides assistance to offenders for treatment, employment, and other services to enhance productiveness in the community. Residents of the Transitional Housing Facility are required to submit to random drug and alcohol testing, random searches, mandatory curfew, household chores. Participation in work crew to offset rent is offered to offenders unable to pay rent. Release planning also includes coordination of services with appropriate agencies. Services will be subsidized for offenders who qualify for Measure 57 funding.							
Program Objectives:	Assist offenders post-incarceration to reconnect with a productive lifestyle, return to or locate a job, or re-establish a family relationship. Utilize available community resources and provide appropriate support to assist in a successful transition back into the community. Provide assistance to offenders in need of transition services and subsidy.							
Method(s) of Evaluation:	The evaluation of this program is measured as an offender successfully transitions back into the community by obtaining employment, attending treatment, establishing family relationships, and securing an appropriate residence. Periodic case audits and staff consultations will be accomplished to determine if the program objectives are achieved							
Monthly Average to be Served: 15 Type of Offender(s) Served: Crime Category: Gender: Risk Level: □ Probation □ Parole/Post-Prison □ Local Control □ Misdemeanor □ Female □ Local Control □ Limited				☑ High☑ Medium☑ Low				
		nent Pi	ovider(s) Will You Use V	Vithi	Thi:	s Program	?	
Provider Name Treatment Type (ie., Anger Management, Cognitive, DV, Diagnosis, Sex Offender, Inpetient Sulvagues Abus		or Management Cognitive DV Dust		CPC	Y/N?	If Yes, O	verall Score	
					Yes	☐ No		
					Yes	☐ No		
					Yes	☐ No		
Funding Sources								
☐ State Grant-In-Aid Fur	nd		\$0.00					
☐ Inmate Welfare Releas	se Subsidy Fu	ind	\$1,893.00					
□ DOC M57 Supplemental Fund		\$50,000.00						
☐ Treatment Transition F	Fund							
☐ CJC Justice Reinvestr	ment Grant		\$0.00					
CJC Treatment Court	Grant							
☐ County General Fund								
☐ Supervision Fees								
☐ Other Fees (revenue)								
Other State or Federa	l Grant							
Other: Please Identify	1							
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Additional Comments:	

Additional Comments:	

Columbia County 2017-2019 Sanctions and Services

Please indicate the *monthly average* number of offenders that participate in the sanctions/services listed below; <u>regardless of the funding source or how the sanction/service is paid for</u>. In other words, even if it's paid for by grants, levy's, or the offender, it should be counted in the total.

Corrections/Work Center 0 Electronic Home Detention 0 Jail 11.27 Substance Abuse - Inpatient 25 Non-Custody Community Service/Work Crew 145 Cognitive 20 Day Reporting Center 0 Domestic Violence 18 Drug Court 30 Employment 25.27 Intensive Supervision 9 Mental Health Services 28 Polygraph 3 Sex Offender 26 Subsidy .45 Substance Abuse - Outpatient 84 **Transition Services 15**

Urinalysis 326.36

Custody

Other program/service provided that does not fit into any of the above categories Parenting Education -20 per year

