



MCRT | Client Characteristics

13K

Calls Responded To Since Progra...

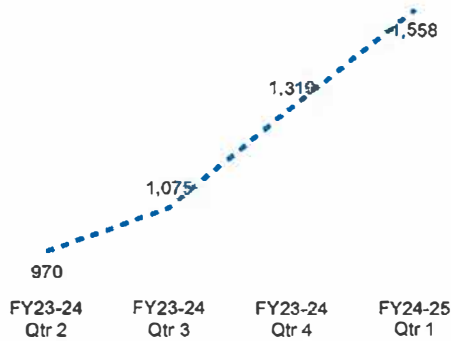
8,751

Unique Clients Since Program St...

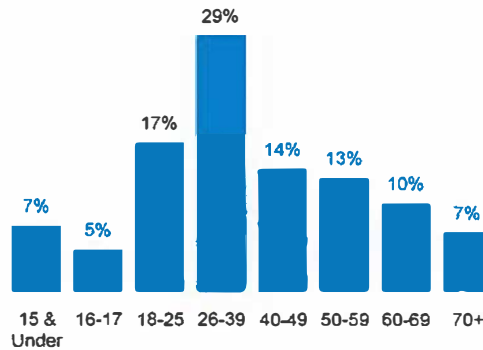
Reporting Period

10/1/2023 to 9/30/2024

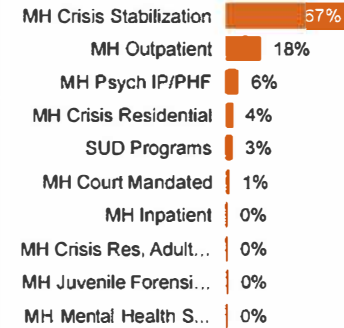
Unique Clients Served over Time



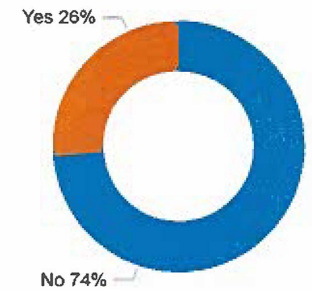
Age



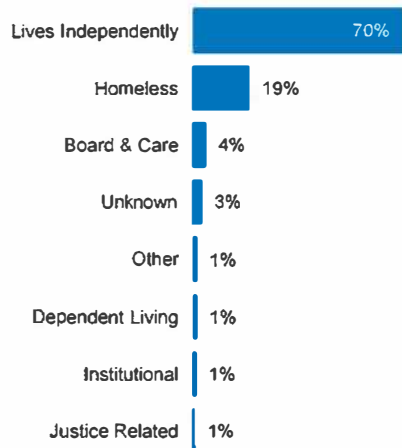
Connecting Programs**



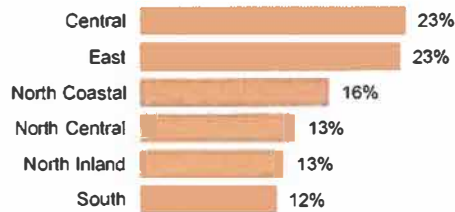
Previous Justice Involvement



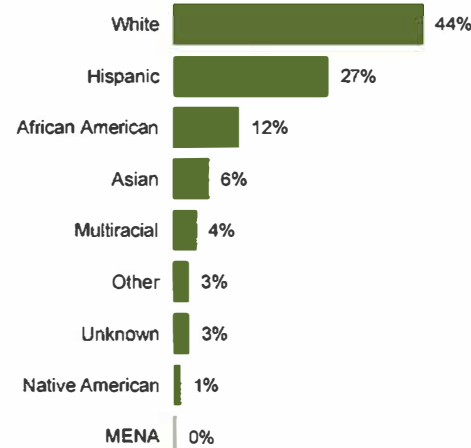
Housing Status



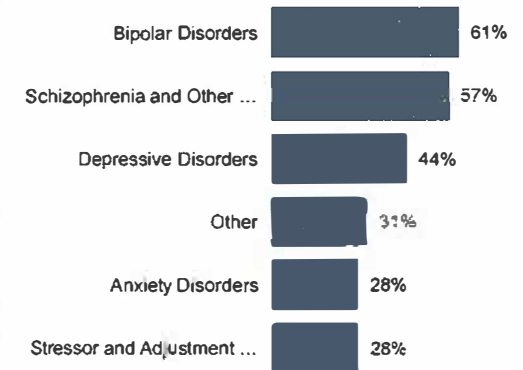
Region of Intervention (by Calls)



Race/Ethnicity



Presenting Mental Health Diagnoses*



Preferred Language



*MCRT does not diagnose clients. Diagnoses are determined when clients are either identified as existing BHS clients, or subsequently connected to the BHS system of care, and provided a diagnosis by program



MCRT | Client Characteristics

14K

Calls Responded To Since Program Start

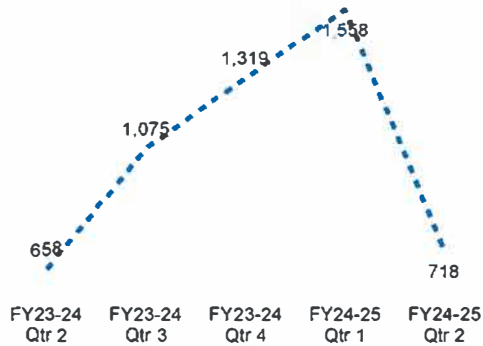
9,250

Unique Clients Since Program Start

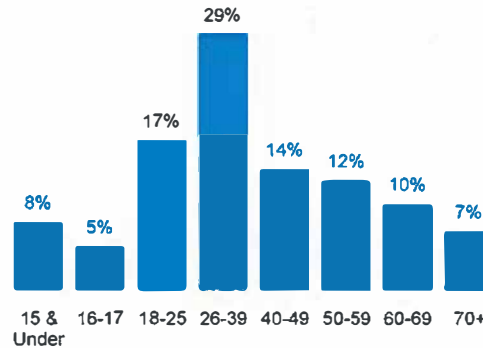
Reporting Period

11/1/2023 to 10/31/2024

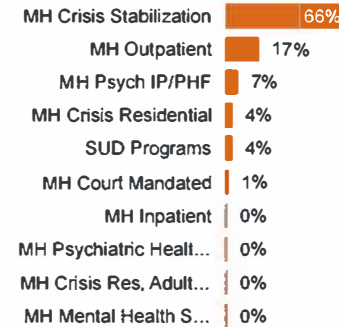
Unique Clients Served over Time



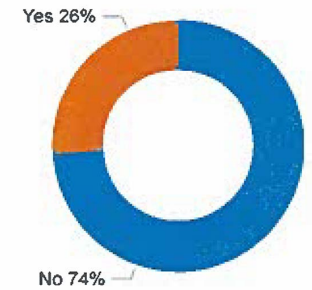
Age



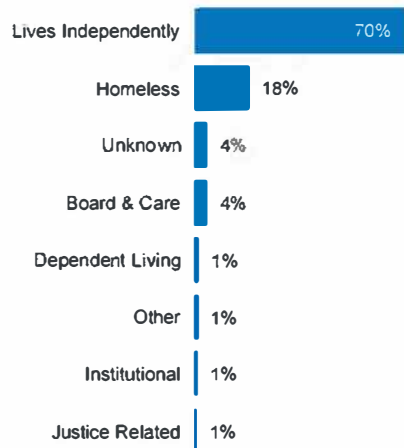
Connecting Programs**



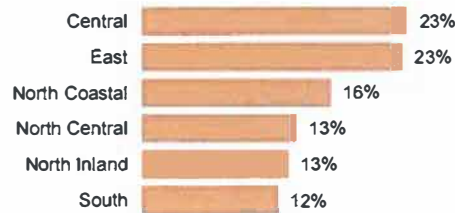
Previous Justice Involvement



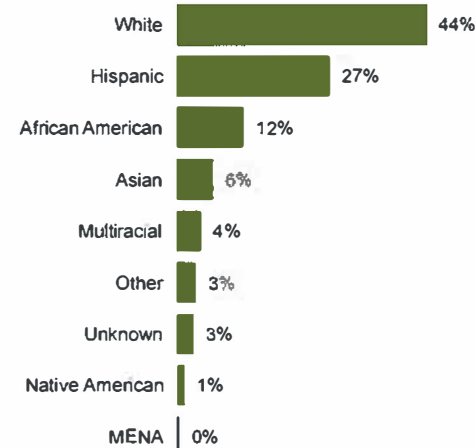
Housing Status



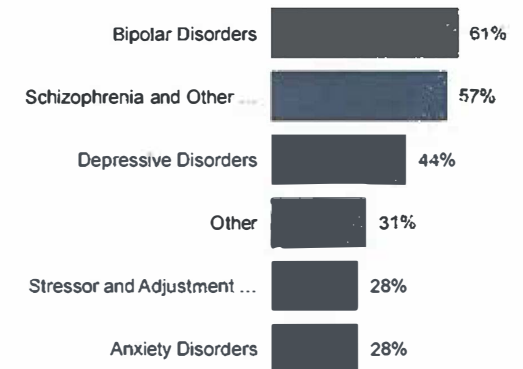
Region of Intervention (by Calls)



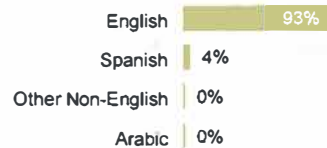
Race/Ethnicity



Presenting Mental Health Diagnoses*



Preferred Language



*MCRT does not diagnose clients. Diagnoses are determined when clients are either identified as existing BHS clients, or subsequently connected to the BHS system of care, and provided a diagnosis by program



CBHDA 2023-2024 Legislative Bill Matrix- Watch and Under Review
As of 11/26/2024

Bill Author	Description	Position
AB 1788 Quirk-Silva D	<p>Mental health multidisciplinary personnel team. (Vetoed: 9/28/2024) Current law authorizes a county to establish a homeless adult and family multidisciplinary personnel team, as defined, with the goal of facilitating the expedited identification, assessment, and linkage of homeless individuals to housing and supportive services within that county and to allow provider agencies to share confidential information for the purpose of coordinating housing and supportive services to ensure continuity of care. This bill would authorize counties to also establish mental health multidisciplinary personnel team, as defined, with the goal of facilitating the expedited identification, assessment, and linkage of justice-involved persons diagnosed with a mental illness to supportive services within that county while incarcerated and upon release from county jail and to allow provider agencies and members of the personnel team to share confidential information, as specified, for the purpose of coordinating supportive services to ensure continuity of care. The bill would require the sharing of information permitted under these provisions to be governed by protocols developed in each county, as specified, and would require each county to provide a copy of its protocols to the State Department of Health Care Services.</p> <p>Status: 9/28/2024 - Vetoed by Governor. Hearing: 11/29/2024 #94 ASSEMBLY VETOED</p>	8. Watch
SB 1184 Eggman D	<p>Mental health: involuntary treatment: antipsychotic medication. (Chaptered: 9/27/2024) The Lanterman-Petris-Short Act provides for the involuntary commitment of persons who are a danger to themselves or others, or who are gravely disabled, due to a mental disorder or chronic alcoholism or drug abuse for 72 hours for evaluation and treatment, as specified. If certain conditions are met after the 72-hour detention, the act authorizes the certification of the person for a 14-day maximum period of intensive treatment and then another 14-day or 30-day maximum period of intensive treatment after the initial 14-day period of intensive treatment. Existing law, during the 30-day period of intensive treatment, as specified, also authorizes up to an additional 30 days of intensive treatment if certain conditions are met. Current law authorizes the administration of antipsychotic medication to a person who is detained for evaluation and treatment for any of those detention periods, except for the second 30-day period. Current law establishes a process for hearings to determine a person's capacity to refuse the treatment. Current law requires a determination of a person's incapacity to refuse treatment with antipsychotic medication to remain in effect only for the duration of the 72-hour period or initial 14-day intensive treatment period, or both, until capacity is restored, or by court determination. Current law generally requires the capacity hearings described above to be held within 24 hours of the filing of a petition to determine a person's capacity to refuse treatment. Current law authorizes the hearing to be postponed in certain circumstances, but prohibits the hearing from being held beyond 72 hours of the filing of the petition. This bill would authorize, except as specified, a person's treating physician to request a hearing for a new determination of a person's capacity to refuse treatment with antipsychotic medication at any time in the 48 hours prior to the end of the duration of the current detention period when it reasonably appears to the treating physician that it is necessary for the person to be detained for a subsequent detention period and their capacity has not been restored.</p> <p>Status: 9/27/2024 - Approved by the Governor. Chaptered by Secretary of State. Chapter 643, Statutes of 2024.</p>	8. Watch
SB 1317 Wahab D	<p>Inmates: psychiatric medication: informed consent. (Chaptered: 9/20/2024) Current law prohibits, except as specified, a person sentenced to imprisonment in a county jail from being administered any psychiatric medication without prior informed consent. Current law authorizes a county department of mental health, or other designated county department, to administer to an inmate involuntary medication on a nonemergency basis only after the inmate is provided, among other things, a hearing before a superior court judge, a court-appointed commissioner or referee, or a court-appointed hearing officer. Current law, until January 1, 2025, additionally protects all inmates in a county jail from being administered any</p>	8. Watch

psychiatric medication without prior informed consent, with certain exceptions, and imposes additional criteria that must be satisfied before a county department of mental health or other designated county department may administer involuntary medication, including a requirement that the jail first make a documented attempt to locate an available bed for the inmate in a community-based treatment facility, under certain conditions, in lieu of seeking involuntary administration of psychiatric medication. Until January 1, 2025, if an inmate is awaiting resolution of a criminal case, current law requires that a hearing to administer involuntary medication on a nonemergency basis be held before, and that any requests for ex parte orders be submitted to, a judge in the superior court where the criminal case is pending. Current law, also until January 1, 2025, sets limits on the amount of time such orders are valid and requires any court-ordered psychiatric medication to be administered in consultation with a psychiatrist who is not involved in the treatment of the inmate at the jail, if one is available. This bill would extend these provisions until January 1, 2030. The bill would also require any county that, between January 1, 2025, and July 1, 2028, administers involuntary medication to any inmate awaiting arraignment, trial, or sentencing, to prepare and submit a report to the Legislature, as specified.

Status: 9/20/2024 - Approved by the Governor. Chaptered by Secretary of State. Chapter 326, Statutes of 2024.

Total Measures: 3

Total Tracking Forms: 3

11/26/2024 7:35:34 AM

Post Release Community Supervision Fact Sheet

Public Safety Realignment (AB109) established a population of Post Release Community Supervision (PRCS) clients. PRCS clients are supervised by county probation departments upon their release from state prison. Prior to AB109, PRCS clients were supervised by state parole.

 **Individuals Under Supervision: 1,393**

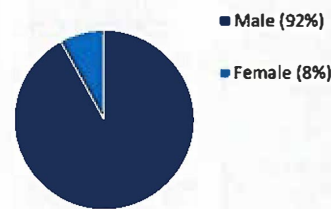
 **Registered Sex Offenders:* 42**

City	Housed	Transient / Homeless	City	Housed	Transient / Homeless
Alpine	7	0	Mount Laguna	0	0
Bonita	2	0	National City	17	0
Bonsall	0	0	Oceanside	51	11
Borrego Springs	0	0	Pala	0	0
Boulevard	0	0	Palomar Mountain	0	0
Camp Pendleton	0	0	Pauma Valley	0	0
Campo	5	0	Pine Valley	0	0
Cardiff By The Sea	1	0	Potrero	0	0
Carlsbad	4	0	Poway	2	3
Chula Vista	37	5	Ramona	9	1
Coronado	0	0	Ranchita	0	0
Del Mar	0	0	Rancho Santa Fe	1	0
Descanso	1	0	San Diego	558	44
Dulzura	0	0	San Luis Rey	0	0
El Cajon	57	9	San Marcos	22	1
Encinitas	1	1	San Ysidro	8	0
Escondido	70	13	Santa Ysabel	0	0
Fallbrook	8	2	Santee	10	8
Guatay	0	0	Solana Beach	0	1
Imperial Beach	2	0	Spring Valley	32	0
Jacumba	0	0	Tecate	0	0
Jamul	0	0	Valley Center	5	4
Jullian	0	0	Vista	75	8
La Jolla	2	0	Warner Springs	1	0
La Mesa	7	1	Out of County	18	0
Lakeville	12	2	No Known City	118	49
Lemon Grove	31	0			
Lincoln Acres	0	0	TOTAL***	1170	155

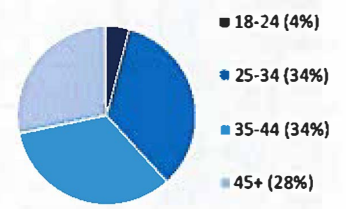
Successful Terminations	
Full Term-No Recidivism	Early Discharge
<p>26</p> <p>Oct 15 – Nov 15</p>	<p>8</p> <p>Oct 15 – Nov 15</p>

	In County	Out of County	Unknown
Housed	1036	16	118
	89%	1%	10%
Transient/ Homeless	106	0	49
	68%	0%	32%

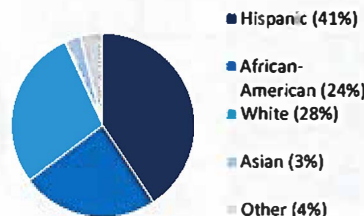
Gender



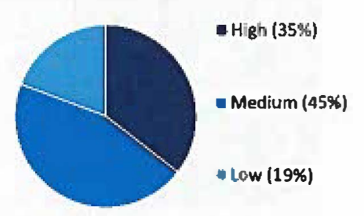
Age



Ethnicity

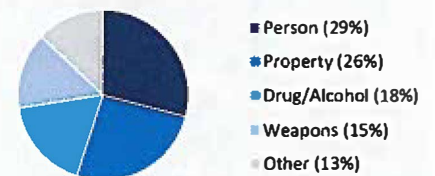


Assessed Risk Level



Committing Offense	DUI	51	Sex Crimes**	59	
Arson	15	Escape	1	Theft	115
Assault	334	Forgery/Checks	1	Weapons	200
Auto Theft	89	Hit and Run	8	Other Felonies	218
Burglary	73	Homicide	0	Other Misdemeanors	23
Drugs	186	Robbery	1	Other/Unknown	19

Committing Offense Type



*Low/Medium-Risk per Static 99/SARATSO; subset of overall population
 ** Not all sex crimes are committed by registered sex offenders

***Individuals with no known address: 68
 For additional information please go to: <http://www.sdcountry.ca.gov/probation/ccp.html>

Mandatory Supervision Fact Sheet

Public Safety Realignment (AB109) established a population of Mandatory Supervision (MS) clients. MS clients receive a "split" sentence, meaning a portion of their time is completed in local custody, with the remaining balance spent in the community under probation supervision.

Individuals Under Supervision: 342

Registered Sex Offenders:* 1

City	Housed	Transient / Homeless	City	Housed	Transient / Homeless
Alpine	0	0	Mount Laguna	0	0
Bonita	2	0	National City	10	0
Bonsall	0	0	Oceanside	15	0
Borrego Springs	0	0	Pala	0	0
Boulevard	0	0	Palomar Mountain	0	0
Camp Pendleton	0	0	Pauma Valley	0	0
Campo	0	0	Pine Valley	0	0
Cerdiff By The Sea	1	0	Potrero	0	0
Carlsbad	2	0	Poway	1	0
Chula Vista	34	0	Ramona	0	0
Coronado	0	0	Ranchita	0	0
Del Mar	0	0	Rancho Santa Fe	0	0
Descanso	0	0	San Diego	150	0
Dulzura	0	0	San Luis Rey	0	0
El Cajon	17	0	San Marcos	2	0
Encinitas	0	0	San Ysidro	9	0
Escondido	15	0	Santa Ysabel	0	0
Fallbrook	2	0	Santee	4	0
Guatay	0	0	Solana Beach	0	0
Imperial Beach	4	0	Spring Valley	8	0
Jacumba	0	0	Tecate	0	0
Jamul	1	0	Valley Center	0	0
Julian	0	0	Vista	23	0
La Jolla	2	0	Warner Springs	0	0
La Mesa	2	0	Out of County	23	0
Lakeside	4	0	No Known City	2	0
Lemon Grove	8	0			
Lincoln Acres	0	0	TOTAL***	341	0

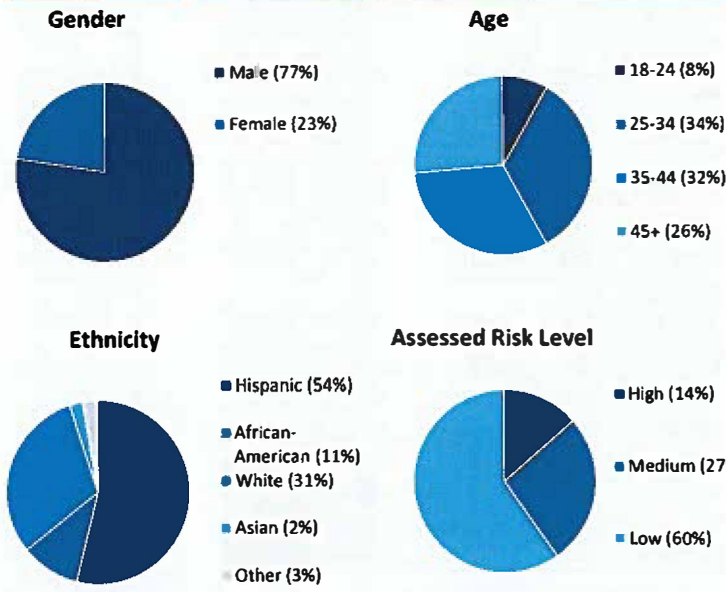
Successful Terminations

Full Term-No Recidivism

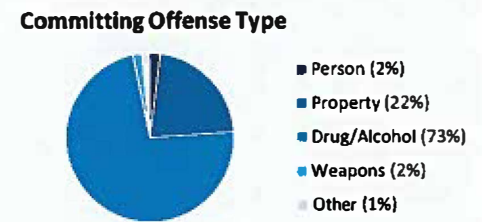
9

Oct 15 – Nov 15

	In County	Out of County	Unknown
Housed	316	23	2
	92%	7%	1%
Transient/ Homeless	0	0	0
	0%	0%	0%



Committing Offense	DUI	4	Sex Crimes**	0	
Arson	0	Escape	0	Theft	36
Assault	4	Forgery/Checks	7	Weapons	6
Auto Theft	19	Hit and Run	0	Other Felonies	11
Burglary	9	Homicide	0	Other Misdemeanors	0
Drugs	245	Robbery	0	Other/Unknown	1



*Low/Medium-Risk per Stat c 99/SARATSO; subset of overall population
 ** Not all sex crimes are committed by registered sex offenders

***Individuals with no known address: 1
 For additional information please go to: <http://www.sdcounty.ca.gov/probat/on/cco.html>