

AMENDED IN SENATE AUGUST 31, 2011

AMENDED IN SENATE JUNE 21, 2011

AMENDED IN ASSEMBLY MARCH 31, 2011

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

**ASSEMBLY BILL**

**No. 826**

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**Introduced by Assembly Member Atkins  
(Coauthors: Assembly Members Ammiano, Fong, and Yamada)**

February 17, 2011

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An act to add ~~Article 5 (commencing with Section 2985) to Chapter 7 of Title 1 of Part 3 of the Penal Code, relating to Section 3073.5 to the Penal Code, relating to parolees.~~

LEGISLATIVE COUNSEL'S DIGEST

AB 826, as amended, Atkins. Parolees: mentally ill: services.

Existing law requires that certain mentally disordered prisoners, as a condition of parole, be treated by the State Department of Mental Health, as provided. Existing law authorizes the Department of Corrections and Rehabilitation to obtain day treatment, and to contract for crisis care services, for parolees with mental health problems.

This bill would ~~authorize~~ *require certain program contractors who provide day treatment and crisis care services for those parolees to report to the Department of Corrections and Rehabilitation to create an Integrated Services for Mentally Ill Parolees program, a comprehensive model that provides varied levels of care, supportive and transitional housing, and an array of mental health rehabilitative regarding the outcome of services that assist with the development of independent living in the least restrictive environment possible and report to the Legislature provided to program participants, as provided specified.*

*The bill would also require the department, by February 1, 2012, to report to the chairpersons of specified legislative committees information provided by program contractors, as specified, the recidivism rate of program participants, the number of program participants who recidivate, the annual cost of the program, the funding sources, and the average cost per participant. The bill would require that specified services be provided to qualified mentally ill parolees by department selected providers, as provided.*

~~The bill would require each services provider to report to the department on the outcomes of services and requires the department to file an annual report with the chairpersons of specified legislative committees.~~

~~The bill would provide that its provisions shall only be operative when the Legislature appropriates moneys in the Budget Act for each fiscal year.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 3073.5 is added to the Penal Code, to  
2 read:

3     3073.5. (a) Program contractors who, pursuant to paragraph  
4 (8) of subdivision (a) of Section 7021, provide day treatment and  
5 crisis care services for parolees with mental health problems shall  
6 report to the department on the outcomes of services provided to  
7 participants. Reported outcomes shall include, but not be limited  
8 to, all of the following:

9     (1) The number of participants served, the length, in days, of  
10 the average, median, shortest, and longest periods of consecutive  
11 days in which the participants participated in the program, and  
12 the number of participants who were return participants.

13     (2) The types of services provided to program participants, and  
14 the actual costs of the services and administration, including, but  
15 not limited to, funds spent on case management, supportive  
16 housing, transportation, mental health treatment, and education.

17     (3) The outcomes of participants, including the number of  
18 participants who remain stably housed in permanent supportive  
19 housing, the number of participants who ceased to participate in

1 *the program and the reasons for that cessation, and the number*  
2 *of participants who have been arrested and dates of arrest.*

3 *(4) The number of participants who successfully transitioned*  
4 *to county mental health programs.*

5 *(b) The department shall report by February 1, 2012, to the*  
6 *chairpersons of the Joint Legislative Budget Committee, the*  
7 *Assembly Committee on Budget, the Senate Committee on Budget*  
8 *and Fiscal Review, the Assembly Committee on Public Safety, the*  
9 *Senate Committee on Public Safety, the Assembly Committee on*  
10 *Housing and Community Development, the Senate Committee on*  
11 *Transportation and Housing, the Senate Committee on*  
12 *Appropriations, and the Assembly Committee on Appropriations*  
13 *all of the following information:*

14 *(1) The information provided by program contractors pursuant*  
15 *to subdivision (a).*

16 *(2) The number of program participants who recidivate.*

17 *(3) The recidivism rate of program participants compared to*  
18 *the recidivism rate for Enhanced Outpatient Program and*  
19 *Correctional Clinical Case Management System parolees living*  
20 *in the same county who did not participate in the program.*

21 *(4) The annual cost of the program and the funding sources.*

22 *(5) The average cost per participant.*

23 ~~SECTION 1. The Legislature finds and declares all of the~~  
24 ~~following:~~

25 ~~(a) Almost 20,000 Californians with mental illness are currently~~  
26 ~~on parole. An average of 3,500 of these parolees are homeless.~~  
27 ~~Department of Corrections and Rehabilitation data indicates~~  
28 ~~one-third to one-half of all parolees living in major cities, like San~~  
29 ~~Francisco and Los Angeles, are homeless.~~

30 ~~(b) Each year, over 6,000 parolees suffering from serious mental~~  
31 ~~illness return to prison, often due to technical violations of parole~~  
32 ~~conditions or criminal behavior resulting from mental illness.~~

33 ~~(c) Many of these parolees are homeless. Homeless parolees~~  
34 ~~have difficulties taking medications regularly, accessing~~  
35 ~~appropriate health and behavioral health treatment, eating a healthy~~  
36 ~~diet, sleeping regularly, and maintaining sobriety. As a result of~~  
37 ~~these factors, homeless parolees are seven times more likely to~~  
38 ~~recidivate than parolees who are housed.~~

1 ~~(d) The success of efforts to stabilize a parolee's health and~~  
2 ~~reduce recidivism rates is predicated on the parolee's housing~~  
3 ~~stability.~~

4 ~~(e) Parolees often lack identification when released, causing~~  
5 ~~difficulties for these parolees to access housing, work, and other~~  
6 ~~income sources.~~

7 ~~(f) Supportive housing and housing affordable to the tenant that~~  
8 ~~links tenants to health, single point of contact case management,~~  
9 ~~behavioral health, transportation, and other services create~~  
10 ~~long-term savings, enhance public safety, and increase a~~  
11 ~~neighborhood's property values. Most importantly, data show~~  
12 ~~supportive housing reduces recidivism among parolees.~~

13 ~~(g) The Mental Health Services Act, Proposition 63, as approved~~  
14 ~~at the November 2, 2004, statewide general election, like its~~  
15 ~~predecessor, Assembly Bill 2034 of the 1999-2000 Regular Session~~  
16 ~~of the Legislature, provides a full array of services, including~~  
17 ~~supportive housing, to nonparolees with serious mental illness and,~~  
18 ~~in so doing, has reduced risk of arrest by 56 percent among~~  
19 ~~participants. Parolees are not eligible for Proposition 63 services.~~

20 ~~(h) Due to the exclusion of parolees from Proposition 63~~  
21 ~~services, budget measures over the last four years have included~~  
22 ~~funding for the Integrated Services for Mentally Ill Parolees~~  
23 ~~(ISMIP) program at the Department of Corrections and~~  
24 ~~Rehabilitation. The ISMIP program offers opportunities to provide~~  
25 ~~comprehensive mental health and supportive services, including~~  
26 ~~housing, to parolees with mental illness at risk of homelessness~~  
27 ~~upon release, to reintegrate offenders at risk of homelessness into~~  
28 ~~the community, to increase public safety, and to reduce state costs~~  
29 ~~of recidivism. These services should be comparable to services~~  
30 ~~available pursuant to Section 5806 of the Welfare and Institutions~~  
31 ~~Code.~~

32 ~~SEC. 2. Article 5 (commencing with Section 2985) is added~~  
33 ~~to Chapter 7 of Title 1 of Part 3 of the Penal Code, to read:~~

34  
35 ~~Article 5. Integrated Services for Mentally Ill Parolees~~  
36

37 ~~2985. (a) Pursuant to the provisions of Section 3073, the~~  
38 ~~Department of Corrections and Rehabilitation is authorized to~~  
39 ~~create an Integrated Services for Mentally Ill Parolees (ISMIP)~~  
40 ~~program.~~

1 ~~(b) The “Integrated Services for Mentally Ill Parolees” or~~  
2 ~~“ISMIP” program is a comprehensive model that provides varied~~  
3 ~~levels of care, supportive and transitional housing, and an array~~  
4 ~~of mental health rehabilitative services that assist with the~~  
5 ~~development of independent living in the least restrictive~~  
6 ~~environment possible.~~

7 ~~(e) (1) An inmate is eligible for ISMIP participation and shall~~  
8 ~~qualify for the program if all of the following are applicable:~~

9 ~~(A) He or she participates in the Enhanced Outpatient Program,~~  
10 ~~the Correctional Clinical Case Management System, or receives~~  
11 ~~a higher level of mental health care while in prison.~~

12 ~~(B) The inmate voluntarily chooses to participate in the ISMIP~~  
13 ~~program.~~

14 ~~(C) He or she is assigned a date of release within 60 to 180 days.~~

15 ~~(2) The department shall prioritize for participation in ISMIP~~  
16 ~~inmates designated as eligible for the Enhanced Outpatient Program~~  
17 ~~and who are likely to become homeless upon release, as defined~~  
18 ~~in paragraph (3). Afterwards, the department shall give priority to~~  
19 ~~inmates participating in the Correctional Clinical Case Management~~  
20 ~~System and who are likely to become homeless upon release, as~~  
21 ~~defined in paragraph (3). Once participants likely to become~~  
22 ~~homeless are served, the department shall prioritize, for ISMIP~~  
23 ~~participation, all other Enhanced Outpatient Program then~~  
24 ~~Correctional Clinical Case Management System participants.~~

25 ~~(3) Parolees who are “likely to become homeless upon release”~~  
26 ~~are individuals who have a history of homelessness and who satisfy~~  
27 ~~either of the following:~~

28 ~~(A) Lacking an identified fixed, regular, and adequate nighttime~~  
29 ~~residence for release.~~

30 ~~(B) His or her only identified nighttime residence for release~~  
31 ~~includes a supervised publicly or privately operated shelter~~  
32 ~~designed to provide temporary living accommodations, or a public~~  
33 ~~or private place not designed for, or is not ordinarily used as, a~~  
34 ~~regular sleeping accommodation for human beings.~~

35 ~~(d) To implement this article, the department shall contract with~~  
36 ~~ISMIP service providers that have at least five years of experience~~  
37 ~~providing integrated services to homeless people with mental~~  
38 ~~illness. Selected providers shall offer whatever services participants~~  
39 ~~require to obtain and maintain health and housing stability, as~~  
40 ~~detailed in Section 5806 of the Welfare and Institutions Code,~~

- 1 while participants are on parole, including, but not limited to, all  
2 of the following:
- 3 (1) ~~Case management services.~~
  - 4 (2) ~~Coordination of mental health, medical, and substance abuse~~  
5 ~~services.~~
  - 6 (3) ~~Parole discharge planning.~~
  - 7 (4) ~~Housing location services.~~
  - 8 (5) ~~Rental subsidies.~~
  - 9 (6) ~~Linkage to other services, as needed.~~
- 10 (e) ~~At least 60 days prior to the release of an ISMIP participant,~~  
11 ~~a department-selected ISMIP service provider shall do, or~~  
12 ~~coordinate with a subcontractor to do, all of the following:~~
- 13 (1) ~~Draft a discharge plan with the participant that includes~~  
14 ~~transition into housing that serves the participant's needs and is~~  
15 ~~affordable, such as permanent supportive housing or a transitional~~  
16 ~~housing program that includes support services and demonstrates~~  
17 ~~a clear transition pathway to permanent housing.~~
  - 18 (2) ~~Engage the participant to actively participate in services~~  
19 ~~upon release, including connecting the participant with the~~  
20 ~~participant's parole case manager.~~
  - 21 (3) ~~Assist the participant in obtaining identification, if necessary.~~
  - 22 (4) ~~Assist the participant in applying for any benefits for which~~  
23 ~~the participant is eligible.~~
- 24 (f) (1) ~~To facilitate the transition of ISMIP participants into~~  
25 ~~permanent supportive housing, ISMIP service providers shall~~  
26 ~~prioritize housing opportunities that are supported by the Mental~~  
27 ~~Health Services Act, the Mental Health Services Act Housing~~  
28 ~~Program, or other funding sources that finance permanent~~  
29 ~~supportive housing for persons with mental illness.~~
- 30 (2) ~~ISMIP service providers shall also identify housing~~  
31 ~~opportunities that satisfy both of the following:~~
- 32 (A) ~~Are located in apartments, single-room occupancy buildings,~~  
33 ~~townhouses, or single-family homes or provided through~~  
34 ~~rent-subsidized apartments leased in the open market or set aside~~  
35 ~~within privately-owned buildings.~~
  - 36 (B) ~~Are not subject to community care licensing requirements~~  
37 ~~or are exempt from licensing under Section 1504.5 of the Health~~  
38 ~~and Safety Code.~~
- 39 (g) (1) ~~ISMIP service providers shall report to the department~~  
40 ~~on the outcomes of services provided to ISMIP participants within~~

1 12, 24, and 36 months of contract implementation. Reported  
2 outcomes shall include, but not be limited to, all of the following:

- 3 (A) The number of participants served.
- 4 (B) The types of services provided to program participants.
- 5 (C) The outcomes of participants, including the number of  
6 participants who remain stably housed in permanent supportive  
7 housing, the number of participants who ceased to participate in  
8 the program and the reasons, and the number of participants who  
9 have been arrested and dates of arrest.

10 (D) The number of participants who successfully transitioned  
11 to county mental health programs.

12 (E) The recidivism rate of program participants compared to  
13 the recidivism rate for Enhanced Outpatient Program and  
14 Correctional Clinical Case Management System parolees living  
15 in the same county who did not participate in ISMIP.

16 (2) Notwithstanding Section 10231.5 of the Government Code,  
17 the department shall report annually by February 1, 2013, and  
18 every February 1 thereafter, to the chairpersons of the Joint  
19 Legislative Budget Committee, the Assembly Committee on  
20 Budget, the Senate Committee on Budget and Fiscal Review, the  
21 Assembly Committee on Public Safety, Senate Committee on  
22 Public Safety, the Assembly Committee on Housing and  
23 Community Development, and the Senate Committee on  
24 Transportation and Housing all of the following information:

- 25 (A) The number of individuals who participated in the ISMIP  
26 program during the previous fiscal year.
- 27 (B) The number of participants who remain housed.
- 28 (C) The number of participants who returned to prison or jail.

29 SEC. 3. (a) The provisions of this act shall only be operative  
30 when the Legislature appropriates moneys for Integrated Services  
31 for Mentally Ill Parolees (ISMIP) in the Budget Act for each fiscal  
32 year.

33 (b) All activities identified in this act as the responsibility of  
34 ISMIP service provider contractors shall be deemed appropriate  
35 expenditures of ISMIP funds.