

FACT SHEET FOR PROPOSAL TO ESTABLISH THE PROGRAM FOR RETURNING OFFENDERS WITH MENTAL ILLNESS SAFELY AND EFFECTIVELY (PROMISE) PILOT PROGRAM

The Problem: The mentally ill parolee population served by the California Department of Corrections and Rehabilitation (CDCR) currently consists of 3,540 Enhanced Outpatient Program (EOP) and 15,991 Correctional Clinical Case Management System (CCCMS) for a total of 19,531 parolees, of which an average of 3,500 are homeless.

Each year over 6,000 parolees suffering from serious mental illness are returned to prison for periods ranging from a few months up to one full year or longer if they receive a new term. This is primarily due to technical violations of parole conditions or other criminal behavior that can result from mental illness. Homelessness is a key contributor to the high recidivism rate of mentally ill parolees. Parolees without homes are much less likely attend medical or counseling sessions and stay on medications, thereby exacerbating symptoms and increasing parole violations.

Returning mentally ill parolees to state prisons is a very expensive proposition. The annual average cost of housing a general inmate in state prison is \$43,287. The cost of housing an EOP participant in prison is roughly \$110,000 per year.

As a result, the lack of transitional and permanent supportive housing for mentally ill prisoners reentering the community worsens outcomes for the parolees themselves, decreases public safety, and significantly increases state costs related to recidivism.

The Solution: The PROMISE Pilot Program seeks to transition homeless offenders with mental illness exiting prison into permanent supportive housing in order to successfully reintegrate them into the community, increase public safety, and reduce state costs from recidivism. The pilot program will provide enhanced case management and “in-reach” services to EOP and CCCMS inmates prior to release with the goal of ensuring identification, income and housing upon release; seek placement for parolees in permanent supportive housing; and where necessary, provide transitional supportive housing for up to one year.

Subject to available funding, CDCR will operate the pilot program in select locations within three of the four parole regions, serving up to 100 participants in each region. The pilot program will run for four years with an evaluation during the fourth year to ascertain the outcomes of the pilot, describe the lessons learned, and determine the cost savings to the state.

By providing supportive housing to mentally ill parolees, the state is likely to save significant resources relative to re-housing these parolees in prison.