

**TURNING POINT
OF
CENTRAL CALIFORNIA, INC.**

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CHIEF EXECUTIVE OFFICER'S MESSAGE

I am occasionally asked by acquaintances who learn of the work I am involved with at Turning Point, how I know if Turning Point is successful and effective. I often relate a few anecdotal stories of some current consumers I have become aware of that have made a genuine, dramatic, and heartwarming transformation in their lives. These accounts of success are easily relatable and are enjoyed as they spread hope to others that the achievements of positive change and growth are attainable despite the individual circumstances and challenges. Aside from and beyond these anecdotal accounts are many other measures of success that are achieved and could be told.

We appraise success using well-recognized and specialized research tools that measure outcomes individually and collectively, including research by outside agencies, use of benchmarking tools and participation in surveys that compare our activity and productivity with similar programs, and our comparable progress from year to year. We earn the confidence as a measure of our success by the monitoring, compliance audits and program evaluations completed by the governmental agencies that fund our programs. We highly value the supportive and the critical input many of the over 13,000 clients we serve annually as we receive this directly from some clients, and some through anonymous consumer satisfaction surveys, and others from cultural competency appraisals. We acknowledge success in the recent achievement of Accreditation by The Joint Commission and in the utilization of evidence-based and best practices. We practice "fidelity to model" efforts toward our treatment success, and development and piloting of new promising clinical and operational approaches that may lead to success.

We measure success by the satisfaction and development of our employees, their opportunities to learn, grow and advance in their skills, effectiveness, and levels of responsibility, as well as to be respected as a valued member of a team. We strive for success by developing good working relationships with the leaders and staff of organizations we collaborate and interact with, and in the safety, security, and productivity of the communities in which we serve. Our annual growth, (9%) through expansion of our existing programs and addition this year of the new programs of Serenity Village, AOD Works, Falcon Court, Kings Housing and Family Interventions is also a tangible indicator of success.

As we look to the future we will pose additional measures for success. These will include development of our leaders to not only lead those within our agency to impact on our mission but also to advocate in their field of behavioral healthcare and to lead across collaborating agencies for mutual and consumer-beneficial goals. We will seek success by timely adjustment to the rapid changes in the behavioral health care field, meeting new needs in our current service areas and familiar needs in new service areas. We will seek to advance knowledge in the field by participating in selected research projects with Institutes of Learning and providing even more internship opportunities for students in our fields of service. Success will be attained by seeking effective use of leading information technologies such as adaptation to funding source automated information systems, client use of internet resources, social media connectivity, use of Relias on-line staff learning system,

automated supplementation to treatment services by communicating through hand-held devices, and use of business/service analytics software to enhance the resources at our disposal. Success will increasingly involve the integration of many of our services within the health care delivery system and accommodation to the new County-centered Organized Delivery Systems, that expand Substance Use Disorder services utilizing Drug Medi-Cal funding. Ultimately, our overall measure of success will be in how well we maximize the resources and opportunities available to us to help people develop skills, motivation and resources to become productive members of society; healthy in mind, body and spirit, which results in the public benefit that is the mission of Turning Point. We appreciate and thank all the individuals, families and organizations that support and join us in this quest for Success. We feel that your success is our success and our success is your success.



Ray Banks, M.P.A.
Chief Executive Officer



CHILDREN'S MENTAL HEALTH SERVICES

Turning Point Children's mental health for Tulare County is made up of three clinics found in Visalia (Visalia Youth Services) serving Goshen and Ivanhoe, Dinuba (Dinuba Children's Services) serving the northern county from Traver to Cutler-Orosi, and Sequoia (Sequoia Youth Services) serving Exeter, Woodlake, and Farmersville. These three clinics and their satellite offices combine to serve an average of over 3037 unduplicated children and their families in a single year. Combined we have provided over 79,876 individualized therapeutic services to the families in the communities that we serve. These services are provided by our dedicated and committed staff. Across all clinics we have 63 Master-level mental health providers (MHP) of which 29 are bilingual; 34 mental health rehabilitation specialists (MHRS), of which 24 are bilingual; 7 nurses (LVN/LPT) of which 4 are bilingual, and 3 psychiatrists all of which provide their services through telepsychiatry.

The families that we serve typically present with an array of challenges, and given that each circumstance is unique, we precisely offer a range of services from assessment to maintenance to help our families reach their desired goals. These services include assessment and referral, crisis intervention, medication services, case management, mental health rehabilitation services, coping/social skills building groups, group therapy, family therapy and individual therapy. All of our services are provided at locations most comfortable to our clients to minimize the potential barriers to accessing our services. We provide services at schools, at the parks, boys' and girls' clubs, YMCA, consumer's home, in juvenile hall, at any other suitable community location, and of course, at our clinics. We also offer specific forms of treatment modalities to target populations such as families managing with the involvement of probation, families engaged with our child welfare system, families needing assistance with managing the behavior of children under the age of 7, and families managing with a child burdened by hyperactivity and inattention.

To demonstrate our commitment to our clients, we were offered the opportunity by our senior leadership to work towards accreditation. In light of the offer, we selected to work towards the Joint Commission Accreditation which is a nationally recognized accreditation body that has been in existence since 1951. Since its inception, The Joint Commission has accredited over 21,000 different health and behavioral health organizations. This accreditation body enforces safe and effective treatment for all clients at all accredited locations. They have over 1100 reviewable elements and in our initial survey, we were found in need of improvement to meet the standard in only 7. This resulted in a compliance score of over 99%.

In addition to accreditation, we implemented the Children's Assessment of Needs and Strengths (CANS) tool. As of July 1st, 2016, all consumers receiving services at any of our locations will be evaluated using the CANS assessment tool. Said consumer's treatment plan would subsequently be developed in collaboration with the consumer and family participants (we serve children) by the treating therapist. The Consumer Wellness Plan (CWP) will directly target the needs and strengths identified by the consumer and family participants. The assessment tool allows for us to quantify domains of need and offer outcomes and measure progress as treatment advances.

Evidence-Based Practice/Therapy (EBP/T) Utilized In Our Services Include the Following:

Parent-Child Interaction Therapy (PCIT) was implemented in August 2011. This was made possible through a grant for the required equipment by First 5 of Tulare County. PCIT is a parent coaching model for parents of young children ages 2 through 8 years old. PCIT utilizes an in-ear device, an observation room with camera equipment, and a one-way viewing window to offer specific coaching techniques with the parent while working with the child in the therapy room. We were able to serve 22

clients and their families over this past year. This represents 97 children and families that have benefited from this investment in quality evidenced- based practice over the past three years.

Dialectic Behavioral Therapy (DBT) – This skills-based training for our high-risk consumers has been ongoing in our clinics for the past three years.

Eye Movement Desensitization and Reprocessing (EMDR) – This cognitive-based therapy is showing positive outcomes with many different types of trauma. We now have 15 fully trained and certified EMDR therapists working in our children’s clinics.

Trauma Focused – Cognitive Behavioral Therapy (TF–CBT) - Through online training, staff utilizes stress reduction training and coping skills training designed for use with children and their parents.

Attention Deficit and Hyperactivity (ADHD) Screening and Treatment – We have currently developed and are refining an evidenced-based approach to screen clients and provide treatment for ADHD diagnoses.

Joven Noble – A youth development, support, and leadership enhancement curriculum designed to strengthen protective factors among the Latino male youth of ages 10-24. This approach is listed on SAMHSA's National Registry of Evidence-based Programs and Practices.

Other Therapeutic Practices that are implemented include:

Cognitive Behavioral Therapy: Cognitive-behavioral therapy is based on the idea that our *thoughts* cause our feelings and behaviors, not external things, like people, situations, and events.

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT): TF-CBT is a short-term treatment approach that targets a client’s presenting symptom with emphasis placed on the trauma as experienced and expressed by the client.

Narrative Therapy: Narrative therapy is a respectful and collaborative approach to counseling that focuses on the stories of people’s lives and is based on the idea that problems are manufactured in social, cultural and political contexts.

Solution Focus Therapy: Solution focus therapy is a brief model of treatment that focuses on clients’ strengths and triumphs. By helping clients find the exceptions to their problem-saturated stories clients begin to see alternatives in the form of solutions and building of self-reliance and confidence.

Family Therapy: Family therapy is used to help clients and their family members identify interactive patterns that maintain problems in place and then to develop new ways of interaction that would foster growth.

Empowered Families: This is a multisystemic approach used to engage and empower families challenged with the presence of probation in their lives. This approach uses the evidenced-based multisystemic model as the foundation for applied interventions.

Other Therapeutic Group Therapy Practices Include the Following:

Pathway Dialectical Behavior Therapy (DBT) Group: Marsha Linehan’s program that is geared to help participants develop an awareness of self and in turn begin to alter the meaning of interactions leading to a change in behavior.

Mind over Mood: This is a Cognitive-Behavioral Therapy (CBT) driven curriculum geared to assist consumers to gain an understanding of the thought and behavior effects linked to mood disorders.

Life Skills Group/training: This is a program that targets life skills and helps to introduce and train young adults to cope with everyday life circumstances and expectations.

LGBTQQA Support Group: LGBTQQA is an art-based support group that focuses on assisting participants in creating community connections, participation in local art and awareness events, and providing psycho-education to build a larger LGBTQQA program to meet the needs of the community.

The Bee Group: An LGBTQQA Teen Support Group for those exploring their identity and seeking acceptance and support in a safe setting. This group focuses on exploring, processing and managing personal responses to bullying or any forms of aggressive encounters. The members learn healthy coping skills, how to build healthy relationships, increasing self-esteem, finding role models, engaging community support groups and supportive service providers.

Parenting: Parenting group is designed to help parents explore their current practices and to work beside them as they begin to incorporate different ways of engaging their children and managing their households and family circumstances.

Symptom Management: Cognitive-Behavioral Therapy (CBT) and Solution-Focused interventions used to help clients manage anxiety symptomology.

Keeping our Youth (KOY): This is a social skills curriculum used to help teach minors how to interact with others in pro-social ways. This curriculum also encompasses the development of anger management skills.

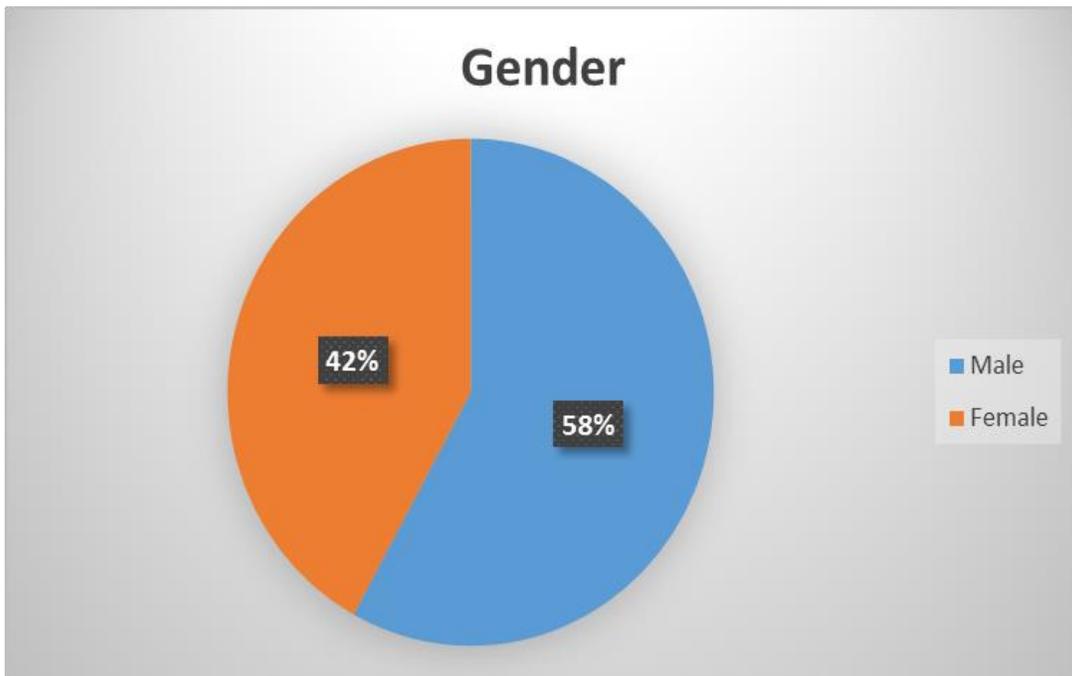
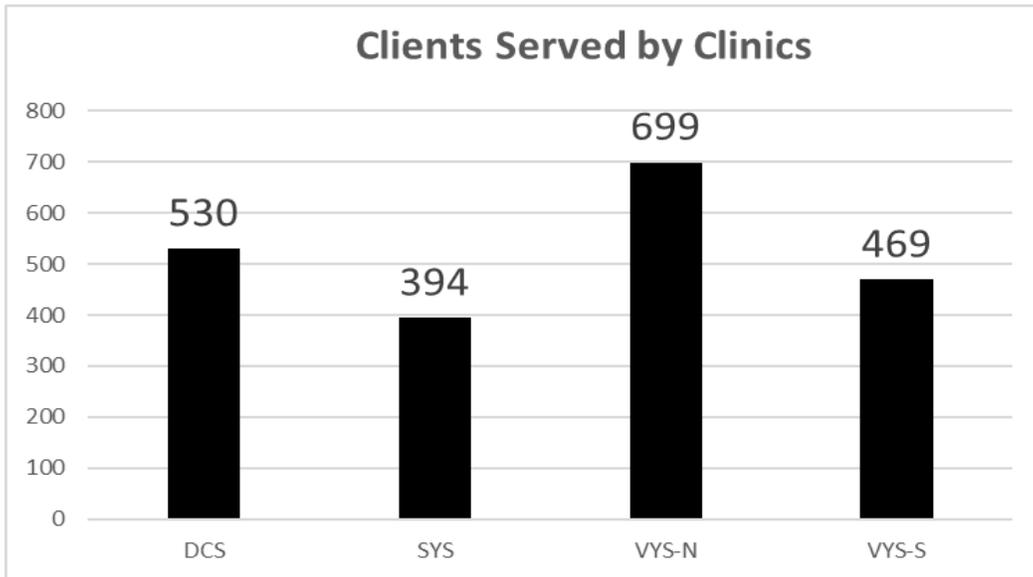
County Designated Supplemental Services Available to Our Clients Include:

Therapeutic Behavioral Services (TBS) – This is a specialty mental health service that helps children and young adults up to age 21. The individuals (a) have severe emotional problems, (b) live in mental health placement, or are at risk of placement, or (c) were recently hospitalized for mental health problems, or are at risk for psychiatric hospitalization. Under the direction of the California Courts and the Department of Health Care Services (DHCS), this service is mandated to increase utilization across California. As such, the DHCS has reduced barriers and restrictions to this service to promote utilization.

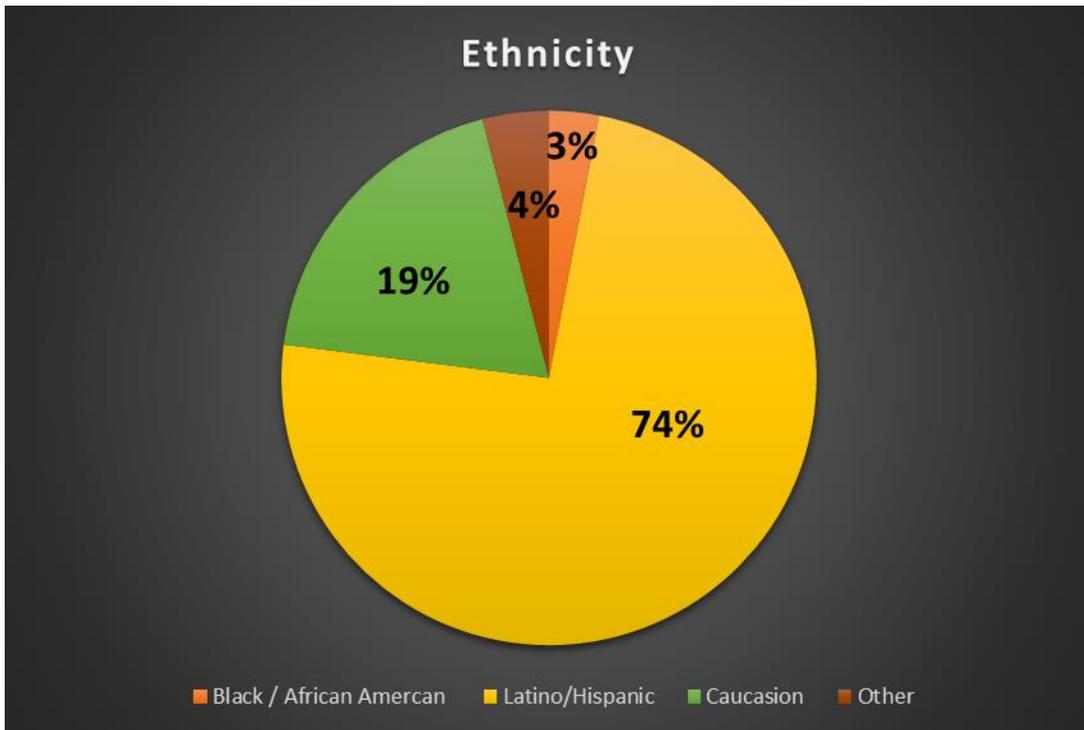
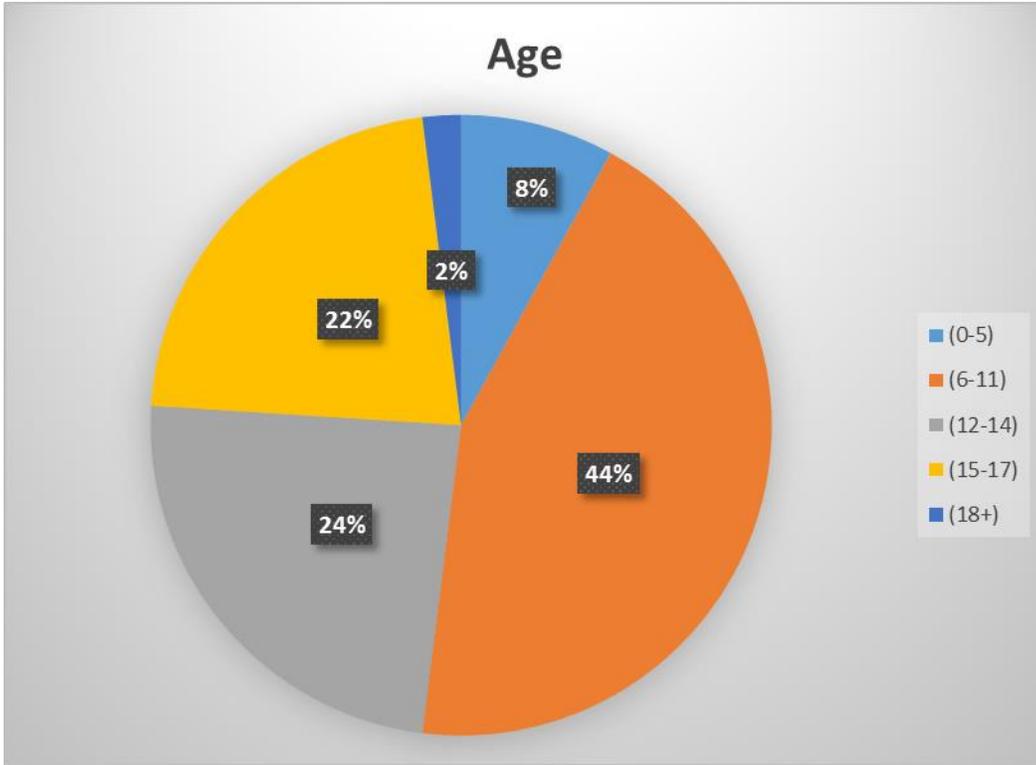
Turning Point Clinics have maintained treatment teams to provide these intensive services on a 24-hour day seven days per week basis, or as needed. We work with other providers in the County to identify consumers eligible for the services, to promote and increase the utilization of the services. These services are intensive and can be provided in any setting. The focus is on working with the consumer and significant support persons, to reduce the behaviors that place them at risk. During this year 35 consumers were served by the Turning Point TBS team.

The Early Childhood Success Program (ECSP) is funded by a grant with Tulare County Office of Education, Headstart/Homebase. The program element works with children ages 0-5 years old, their parents and childcare providers to develop workable responses to address early-diagnosed behavioral problems. During the year, the program provided consultation, direct service and training in prevention of mental health issues relating to preschoolers for the Headstart/Homebase providers in Tulare County.

Children's Mental Health Clients



Children's Mental Health Clients



ADULT MENTAL HEALTH SERVICES

We operated many programs that provide adult mental health services in Fresno, Tulare, and Kern Counties.

In Tulare County, Turning Point Mental Health Services Act (MHSA) Programs provide Outreach and Engagement, System Development Services, and Full Service Partnership services that target underserved and un-served populations. MHSA Programs are designed to expand and transform the mental health system. They increase access, cultural competency and use a holistic health approach which includes recovery, wellness, and resiliency treatment principles. Treatment services address (a) mental health, (b) alcohol and other substance use, (c) physical health, (d) food and housing, (e) vocational and (f) educational needs. The three Turning Point MHSA programs under the Tulare County Health & Human Services Agency are the North County One Stop Program, Central County One Stop and the North County Mobile Unit, “Unidos Para La Salud.”

The North County One Stop Program serves transitional age youth (ages 16-24 years) throughout northern Tulare County. A culturally diverse and linguistically appropriate group of employees work with youth who have barriers to accessing traditional mental health services. Youths are (a) linked to existing community services, (b) assessed for immediate mental health, alcohol/drug use, physical health treatment needs, and (c) assessed for psychiatric services, educational and vocational needs. High-risk need consumers are referred for Full Service Partnership services, which provide (a) independent living support, (b) psychiatric medication support, (c) intensive mental health and case management services and (d) crisis intervention services on a 24-hour, seven-day per week basis. Services are provided to consumers in the location that is most accessible to the consumer, e.g., their home, school or other community locations. This program collaborates with numerous community and public agencies including EMQ/Families First, Tulare County Department of Probation and Tulare County Child Welfare Services.

“Unidos Para La Salud” (United for Health) is the North Tulare County Mobile Unit Program. With the Mobile Unit, Program, culturally diverse staff members provide intensive outreach to the rural communities of northern Tulare County. This program offers services to mental health consumers of all ages. Consumers with access barriers are identified and assessed for immediate (a) mental health, (b) physical health, (c) alcohol and other drug abuse treatment, (d) medication and medication support services, and (e) educational needs. High-risk consumers are referred for eligibility for the Mobile Unit’s Full Service Partnership services, which provide intensive crisis intervention, mental health, and case management services on a 24-hour, seven-day per week basis. Services to un-served and underserved adults and older adult populations are the focus of this program. Transportation and supportive housing services are provided when needed. The Mobile Unit uses an RV type vehicle to outreach to underserved areas within the northern half of the County.

The Central County One Stop Program serves transitional age youth (ages 16-24 years) throughout central Tulare County. This program provides intensive mental health services to consumers facing barriers in accessing traditional mental health services. These consumers are assessed for needs in the areas of mental health, alcohol/drug abuse, physical health treatment, psychiatric services, education, and vocation. Beyond the assessment, this program refers high-risk need consumers for Full Service Partnership services, links consumers to existing community services, refers to medication support, provides living support and transportation as well as mental health, case management services and crisis intervention services on a 24-hour, seven-day per week basis. Services are provided to consumers in the location that is most accessible to the consumer (e.g., their home, school or other community locations). This program collaborates with numerous community and public agencies including the Wraparound Services Program, Tulare County Department of Probation and Tulare County Child Welfare Services.

Number Served	Central County One Stop	North County One Stop	North County Mobile Unit	Totals
Full Service Partnership	17	21	29	67
System Development	76	82	138	296
Totals	93	103	167	363



Hope House is a drop in socialization center and peer support program for people at risk or currently diagnosed with a mental illness. It functions to bring new potential consumers of the mental health system into very accommodating services and client resources, which often lead to additional services by the County Behavioral Health Care system. It is supported through Madera County Behavioral Health Services (MCBHS) and the Mental Health Services Act (MHSA). During our 2015-2016 fiscal year, Hope House served 400 unique individuals and was visited a total of 12,115 times.

SERVICES AVAILABLE

- Consumer Employment Opportunities
- Peer Support Groups
- Addiction Recovery Groups
- Socialization Skills
- Computer Lab
- Laundry Facilities
- Showers
- Cooking Classes
- Outreach Services in Chowchilla
- Transportation and Resources Linkage

MEMBERSHIP

Membership is open to all current, former, and prospective consumers of Madera County Behavioral Health Services (MCBHS).

Hope House	New Members	Average Daily Weekday Participation	Average Daily Weekend Participation
Objective	150	25	10
Actual	176	43	16

The Rural Mental Health (RMH) program is proud to provide outpatient mental health services to children and adults that live in rural Fresno County. Services are provided at six established rural service sites including Reedley, Pinedale, Sanger, Selma, Kerman, and Coalinga. The Rural Mental Health (RMH) Program is a Mental Health Services Act (MHSA) funded Full-Service Partnership (FSP), Intensive Case Management (ICM), and Outpatient (OP) treatment program. The level of service provision (FSP, ICM, or OP) is determined after the client has been assessed. The population for the FSP program includes adults with severe mental illness (SMI), children with serious emotional disturbance (SED), and adults/children who have had recent admissions to the County's crisis intervention services (acute inpatient or incarcerated clients). FSP services are available 24 hours per day, seven days per week. The FSP program serves 162 clients at any given time. ICM services are provided to clients in need of case management and community-based crisis intervention services. The ICM population includes adults with severe mental illness and children with serious emotional disturbance who are in need of ongoing community-based services. In general, the ICM population requires less than three contacts per week from the RMH staff to sustain a largely independent level of functioning. The ICM program serves 1517 clients a year. OP services are provided to those who are Medi-Cal eligible and meet the State Department of Health Care Service's medical necessity criteria. In general, the OP population requires infrequent interaction with the RMH staff to sustain a largely independent level of functioning. The OP program serves 947 clients a year. ICM and OP services are available 8 hours per day and five days per week. RMH Clinics are designed to be welcoming, empathetic, culturally competent; trauma-informed and community-based. The majority of the staff is bilingual and bicultural.

RMH is dedicated to empowering its consumers to recognize their strengths and abilities to regain wellness successfully and achieve independence and self-sufficiency in the community. Services provided include 24/7 crisis response; mental health services; psychiatric and nursing services; rehabilitation services focusing on life skills and symptom management training; and case management services (including attainment of entitled benefits, housing assistance, Medi-Cal benefits, transportation assistance, general relief assistance, and other identified community resource needs). Basic psychiatric and associated medical issues are addressed while providing linkages to primary care physician coverage.

The **First Street Center (FSP)** program is a Mental Health Service Act (MHSA) funded Full-Service Partnership (FSP) serving approximately 105 individuals at any given time. The First Street Center FSP Program's mission is to provide comprehensive mental health and co-occurring treatment services to AB 109 adult offenders referred by the Fresno County Department of Probation. In collaboration with Probation, Department of Behavioral Health and other community providers, the team strives to assist with successful re-entry into society utilizing evidenced-based mental health rehabilitation interventions and wellness and recovery principles. Our services are client and family driven. The services are culturally sensitive and individualized with the needs and goals of each client, and they aim to reduce recidivism and promote independence and self-sufficiency. Services include crisis response 24/7, daily program rehabilitation and support, intensive case management, individual and family therapy, social and recreational activities, transportation, educational and peer support groups, psychopharmacological treatment, housing support, consultation with landlords, hospitalization support, and probation and court engagement.

The **Transitional Age Youth (TAY)** program is a Full Service Partnership (FSP) providing intensive outpatient mental health services to young adults ages 16-25 within their own community. The TAY Program offers recovery-oriented mental health services that provide opportunities for TAYs to utilize their strengths and abilities to gain independence and self-sufficiency in the community. The program supports young adults in their own chosen environment transitioning from childhood to adulthood and

empowers them to set attainable goals and work toward them with the support of their team at their own pace. The TAY program has a welcoming and safe drop-in center where TAY Youth can come for daily groups, to see the psychiatrist, receive individual therapy, or even interact with other “Taysters”. Case managers provide services in the individual’s home, school, work, or anywhere else in the environment they feel they can benefit from support. The TAY Program believes in “meeting the TAYs where they are at” by supporting them in wherever they are in their process of recovery and supporting them in their progress into adulthood.

The **VISTA Program** is a Full-Service Partnership (FSP) and serves those suffering from a severe mental illness (SMI). Vista is an outpatient mental health program serving individuals referred by the County of Fresno Department of Behavioral Health. The Vista Program is funded by the Mental Health Services Act and provides an opportunity for its consumers to receive mental health services, secure affordable housing, and to recognize their strengths and abilities to successfully regain and achieve independence and self-sufficiency in the community. Our team at Vista hopes that eligible Fresno County residents interested in the program allow us the chance to provide excellent mental health services. We also welcome family members and significant other’s involvement in the recovery process.

Sometimes daily life appears to be a puzzle that just doesn’t seem to fit together. The Vista team will be there to assist in putting that puzzle together. This will be done by our team approach in delivering the following services;

- Psychiatric Evaluations
- Medication Management
- Health Education
- Case Management
- Individual Psychotherapy
- Educational Groups
- Supportive Housing Placement
- Social/Educational/Employment Skills Development
- Substance Abuse Treatment, NA, AA Meetings
- Money Management/Payee Services
- Assistance with Applying for SSDI, GR, Medi-Cal, MISP, SDI, WIC, TANF, and Other Resources

Program Objectives	Rural Mental Health-FSP	Rural Mental Health-OP	Rural Mental Health-ICM	TAY	FSC - FSP	VISTA	Total
Number of Clients Served	162	947	1,517	195	184	329	3,334

EMPLOYMENT SERVICES

The **Monterey County Adult Employment Program** has been operating job training, placement and related services for adult offenders in Monterey County since 1975. Turning Point is part of a collaborative service delivery system specifically designed for adult probationers who face multiple barriers to employment and endeavors to place them in productive work. The program focuses on integrated, comprehensive services to increase the employment, retention, earnings and occupational skill attainment of participants. Job retention is addressed through comprehensive assessment, pre-employment skills training, individual and group counseling, supportive services, intensive case management and follow-up services. The Adult Employment Program is funded by AB109 Safety Realignment funds.

The **Youth Employment Program** is a key partner in the Rancho Cielo Day Reporting Center for youth on probation ages 16 to 24. The youth program has just completed its 14th successful year of operation in collaboration with Monterey County Probation, Behavioral Health, Office of Education, and Community Action Partnership. The newest services are for low-income youth, ages 15-18, which provide paid internships and employment opportunities following pre-employment and life skills education. County-wide vocational and employment-related services are provided to all eligible court-involved youth by effectively weaving a job and a paycheck with educational achievement. Successful completion of probation, employment, vocational certification, and education are the focus of all program activities. The Program is funded by Monterey County Workforce Innovation and Opportunity Act, Juvenile Justice Crime Prevention Act, Monterey County Office of Education, Community Action Partnership and Community Foundation for Monterey County.

Program Objectives	Monterey County Employment Program	Monterey County Youth Employment Program	Totals
Number of Clients Served	161	475	636
Successful Completions	100%	97%	Average 99%
Number of Unemployed Individuals Placed in Employment	52	253	305
Average Initial Employment Wage	\$16.00	\$10.75	Average \$13.37

COMMUNITY CORRECTIONAL TREATMENT SERVICES

Turning Point operates five community correctional programs in Salinas, Visalia, Fresno, and Bakersfield. These programs are similar in nature and have operated for over 30 years. All of them serve selected offenders in the community. The programs provide a range of services designed to reduce the likelihood of a return to crime. Primary services include:

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Job development 2. Substance abuse treatment and relapse prevention training 3. Victim awareness training 4. Life management skills 5. Stress management 6. Conflict resolution 7. Family reunification services 8. Voluntary Religious activities | <p>Other ancillary services include:</p> <ol style="list-style-type: none"> 1. Financial management 2. Drug and alcohol monitoring 3. Literacy training 4. Activity and Behavior accountability 5. Correctional Counseling |
|--|---|

Opportunities for people to change their thinking, feelings and behaviors toward the direction of positive law-abiding constructive patterns of living are guided and closely monitored and managed to maximize community safety and individual growth. Turning Point Community Treatment Programs are centrally located, to provide residents with easy access to (a) public transportation, (b) places of business for employment opportunities, (c) adult education sites, (d) substance abuse/mental health clinics, and (e) medical/dental offices when the need arises. A major goal of Turning Point Community Treatment Centers is to provide quality case management, treatment, supervision, and in-house services to residents. It is the mission of these centers to assist offenders in the establishment of law-abiding behavior and self-sufficient living.

The **Salinas Residential Reentry Center** is a 51-bed residential program, operating for over 30 years, for inmates returning to Monterey County from the Federal Bureau of Prisons and parolees supervised by the California Department of Corrections and Rehabilitation. The objective of the Residential Reentry Center program is for inmates and parolees to become aware of their responsibility to society and to assist them with education and employment to enhance their success in obtaining and maintaining employability while in the program and after their return to the community. The program assists inmates and parolees in becoming productive citizens through transitional housing, supportive services, and correctional programming. As individual needs vary greatly, comprehensive assessments and effective case management are an integral part of the program. A combination of on-site and community-based services are utilized to ensure the full array of assistance necessary to support residents in their development of crime/drug-free, self-sufficient lifestyles. Partnership activities are an essential service component to assist residents in the development of a reliable support system before program completion.

Salinas Residential Reentry Center	Total Clients Served	Federal Bed Days	AB109 Bed Days	Total Bed Days
Fiscal Year 2015-2016	171	10,401	1,267	11,668

In July 2015, the **Visalia Reentry Center (VRC)** converted from a 40-bed community corrections facility to a 32-bed, all male, long-term residential Substance Use Disorder(SUD) treatment program serving parolees in the CDCR STOP program and Tulare County probationers. Our residential treatment program is a 90-day, intensive program, designed to address the resident's substance use disorder impairments, enhance life and coping skills, and increase self-sufficiency – with the primary goal of preparing clients to live alcohol/drug-free, healthy, and productive lives. Residents and counselors work together to complete an assessment and prepare an individualized treatment plan that identifies the client's SUD impairments, treatment goals and objectives, and program services to be provided. Residents must complete an average of 25 hours per week of treatment services, including cognitive behavioral therapy, drug education, relapse prevention planning, anger and stress management, criminal thinking, parenting, and job readiness. Residents are prepared and encouraged to job search and work while in the program. Clients may voluntarily request a 90-day extension of the program so they can continue to make progress on their treatment goals. In Fiscal Year 2015-16, VRC provided 7,696 of man-days of services and had 41 residents successfully completed the residential treatment program.

VRC also provided transitional housing and sober living services to men in our community through a grant from HUD, contract with Tulare County Probation Department and private pay agreements. In Fiscal Year 2015-16, VRC provided 558 of man-days of transitional and sober living services to 14 clients, 3 of whom left with permanent housing.

The **Bakersfield Reentry** program has undergone numerous changes in the last three months and will continue to grow as a valued part of Region II and Turning Point as a whole. New management has taken over and has begun the task of reevaluating and redesigning all programs. We are currently a 125-bed facility, serving the needs of State Parolees, as well as Federal inmates and probationers. Under the umbrella of Bakersfield Reentry are several Federal Bureau of Prisons programs which include an inmate population, transitional drug abuse treatment population, pre-trial population, and aftercare population. Our state contract with California Department of Corrections and Rehabilitation (CDCR) was awarded an extension of our current Parole Services Center (PSC) contract which allows for an additional 35 beds servicing the lifer and long term offender population. The PSC offers the following services: anger and stress management, victim awareness training, parenting and family reintegration, budgeting and money management training, substance abuse education, HIV/STD awareness training and screening, computer training and open lab hours, community reentry planning, and job readiness which includes resume building, interview skills training, Men's Warehouse Suit program for job search, and referral for vocational training. In the 2015/2016 year, PSC serviced 346 state parolees.

Federal services for our inmate population allow for current federal inmates to serve out the remainder of their term in a residential setting, focusing on successfully reintegrating back into society, through incremental levels of trust in our community, up to and including a home confinement phase. Other services offered for our federal population include mental health, substance abuse, and medication monitoring. Under new management, Bakersfield Reentry has strengthened all relationships with community and state stakeholders and looks forward to blossoming new opportunities. We are currently in the process of implementing new roster systems for all Federal and State programs, and a new intake system for all Federal and State participants. This will allow for a systematic approach to capturing all data relevant to our programs. There have been many changes this year, and we anticipate many more in the months to come. We are looking forward to the coming year, with renewed relationships with BOP and CDCR, and the growth that results when driven by performance appraisal.

The **Fresno G Street Parolee Service Center (PSC) Program** serves 45 state and up to 15 Long-Term Offender (LTO) residents. Each resident is assigned to a Case Management Team (CMT) which consists of a Case Worker and Job Developer to develop a Case Management Plan (CMP) that is tailored to meet their specific needs. A Case Management team is assigned to assist residents in a 90-day Program. When a resident needs additional services, they can request an extension and remain in the program up to one year. Upon satisfactory conduct residents are offered social passes such as Temporary Community Leave (TCL) passes where they can leave the facility for 24 or 36 hours to build relationships with their families, sponsors and support systems. Monday through Friday residents attend groups and are required to attend and meet 35 weekly hours for a total of 255 hours of programming and receive a Certificate of Completion, and thereupon a graduation is held in their honor. Families are encouraged to attend graduation ceremonies and learn how their family members overcame obstacles and achieved success.

P.S.C. provides services with recovery issues concerning Mental Health maintenance for all Correctional Clinical Case Management System (CCCMS) and Enhanced Out Patient (EOP) residents. Caseworker ensures that they receive professional care by referring them to (P.O.C.) Parole Outpatient Clinic and provide healthy and necessary redirection when needed. The Caseworker will assist the residents with basic needs such as social security, medical, future housing, and referrals in legal assistance. The cooperative effort between Caseworker and parole agent provides the resident with a stable P.S.C. placement and transition. The onsite Job Developer provides all residents with an up-to-date Information and Job lead board in which residents will find current employment leads, vocational trade information and provide assistance in completing employment applications. The Program also offers a break from the daily schedules to celebrate holidays and special occasions through barbecues, contests, weekly bingo games, etc. When residents complete the program, they leave with the knowledge and resources necessary to continue living a positive and healthy lifestyle and have the ability to reintegrate into the mainstream of productive community living. Also, the “G” Street facility continues to house Federal residents for the Golden State Facility. Golden State staff are located on-site which includes a Social Services Coordinator, two Case Managers and Resident Client supervisors to assist and serve Federal residents.

Fresno G Street Parolee Service Center	PSC	Federal
PSC In Placement for Fiscal Year 2015-2016	411	127



The **Golden State Residential Reentry Center (RRC)** has been consistent with maintaining a stable residential / transition resource for federal inmates and federal probationers for nearly 34 years. As a support system for housing, employment, drug counseling and life coaching, our RRC has been a positive center for help and meeting transition challenges. As a 40 bed co-ed facility and with an annex equal in size and services, the RRC has been able to accomplish many agency mission priorities and goals. With a Home Confinement population nearing the 60 percent average of our facility population, we have consequently increased our service providers by nearly one-third.

This year our facility was certified for PREA (Prison Rape Elimination Act), in compliance with our federal contract. In addition to structural improvements to the facility, our aim is to modernize areas of operation and provide our clients with more choices to improve their commitment to productive lives in the community. Our program supports community volunteerism, as well as remedial and higher education.

Finally, this year was also marked by personnel changes, within our program, and with our contract providers. From recent retirements to the untimely passing of our extended family members, change and transition are inevitable. Our program looks forward to what is positive from the legacy left by others, to innovations and ideas still ahead.

Substance Abuse Treatment/PVSP (SAT) is an in-prison substance abuse program at Pleasant Valley State Prison on “B” yard. We opened the program in July of 2014. The program targets incarcerated males that have drug or alcohol problems. Cognitive Behavioral Intervention curriculum also targets negative Criminal and Anti-Social behaviors. The program serves 120 participants. The program has three phases: Modified Therapeutic Community phase is a six-month program, five days a week, for 3.15 hours a day; the second phase is Intensive Outpatient, which is a 5-month program, five days a week, for 3.15 hours a day; and the third phase is Outpatient, which is a three-month program, three days a week, for 3.15 hours a day. The curriculum varies from each phase of the program.

The curriculum for all three phases are evidenced based and is included in the following: Modified Therapeutic Community, Cognitive Behavioral Interventions, Criminal Addictive Thinking, Self-Control Model, Addiction Offenders Cycle, Anger, Aggression, Hostility, and Violence, Parenting/Family Component, Core Skills/with assessed need, Domestic Violence/with assessed need, Principles of Recovery, Life Skills, Thinking Errors, Substance Abuse/Pharmacology Education and Interactive Journals, Relapse Prevention, Self-Help Support, Health and Wellness Education, Caseload Group Process, Individualized Treatment Planning, and Individual Sessions.



In addition to the services listed above all phases are eligible for aftercare services funded by the Specialized Treatment for Optimal Programming (STOP) program. These services include outpatient and residential services for parolees for 12 months of programming after the participants are released from prison. Transitions assist parolees and probationers with residential placement, pick-ups from the prison to a program, signing up for medical and social security cards. The Transitions counselor also facilitates an Alumni group two times a month in addition to regular programming. This allows the graduates to stay connected and practice the tools they acquired previously in the program; lifers and mentors also attend this group. The staff assists the lifers with preparing for the Parole Board and committee. The program also has participants that are potential mentors in the program. They assist with the relationships between counselors and participants and are preparing to go to Solano Prison to become certified as AOD counselors. These potential mentors go through the entire program while preparing for Solano. Since the program opened in July of 2014, we have served 480 participants, and 38 participants have signed up for Residential Aftercare Treatment. We have recently signed a contract to open up a SAT program at Pleasant Valley State Prison on C yard. This program will consist of 24 additional participants and two additional staff. The projected start date for this program was August 2015.

The **ISMIP Program (Intensive Services for Mentally Ill Parolees)** is an out-patient, day treatment, case management and housing assistance program for parolees who suffer from substance abuse as well as a diagnosed serious mental illness. The program focus is stabilization of parolees to provide a safe haven for reintegration into the community and the reduction of recidivism. The ISMIP Program served 186 participants throughout the 2015-2016 fiscal year.



SERVICES FOR THE INTELLECTUALLY DISABLED

This year we were awarded a contract for a four-bed crisis facility in San Luis Obispo which will replace the existing two-bed home in Atascadero. The Tri-Counties Regional Center is working with C.C.P. funds in securing the home and facilitating structural improvements specific to some of the behavioral issues the children we support in Crisis. The Department of Developmental Services issued a State-wide wage study, which included our Porterville and Lake County Homes, to determine the level of payment rate increases needed by providers in order to support livable wages for direct support staff and administrative costs. These rate increases are specific to the type of service model and issued as a percentage rather than a dollar figure. Crisis Home services were issued a 7.75% increase, and our Step-down/Long-term homes were issued 6.95%. This is very helpful as our costs are increased over the years without an adjacent funding increase making it difficult to produce a viable program with anything less than 100% occupancy.

Despite the funding rate increase outlined above we made the painful decision to close our Porterville Group Home June 30th. This decision was not an easy one to make as we have worked with the Central Valley Regional Center for almost 20 years implementing both the Crisis Home model and Step-down model of service delivery. Unfortunately, CVRC was unwilling to evaluate the extremely high level of service hours outlined in our contract and even with the funding rate increase we could not operate this facility in a financially sound manner without 100% occupancy. The children in residence at the time were all successfully transitioned to a lower level of care.

Overall, these programs were successful in meeting the training needs of our staff along with the training needs of the children and parents. We supported a total of 33 children, and they participated in school functions, were involved in the use of community supports and activities in a positive fashion and with only one short 1-day exception no child was hospitalized due to behavioral issues. We did have one child discharged to a higher level of care from our Journey On home.

Program Objectives	Porterville	Ukiah Journey On	Ukiah Country Roads	Atascadero	Ukiah Northern Lights	Prairie House	Lake House	Total
Number of Children Served	5	9	7	6	6	4	4	41
Occupancy Rate	85%	91%	54%	74%	87%	98%	100%	83%
Successful Transitions to Less Restrictive Environment	100%	100%	100%	100%	100%	100%	100%	100%
Number of Hospital Visits due to behavioral issues	0	0	1	0	0	0	0	.03%

OUTPATIENT DRUG AND ALCOHOL SERVICE

The Turning Point **Federal Aftercare Programs (Bakersfield)** has had another year of unparalleled success for the aftercare program that served 124 participants last year. There were 84, completions, 32 transfers to Sacramento, 2 Return to Custody, and 6 Mental Health support cases which consist of individual Mental Health counseling as well Medication Monitoring by our Psychiatry Provider. Clients acquired the tools of a cognitive approach to effecting behavioral change in the Prison system and through the Residential Drug Abuse (RDAP) program. The clients utilized these tools to acclimate themselves back into society. Eighty percent of the clients have found jobs while on home confinement as well as working on family reunification in their communities.

The Turning Point **Federal Aftercare Programs (Fresno)** provide Mental Health support, Substance Use Disorder Treatment and drug testing services for the U.S. District Court Systems in Fresno. Most of our clients suffer from the disease of addiction and receive random drug testing to ensure they are in compliance. Nearly 60 percent of our clients receive either individual or group substance abuse counseling. We work in close communication with Probation and Pretrial Parole Officers to ensure the assessments reflect the needs of our clients. A total of 145 clients were serviced with only 9 percent being discharged for failure to comply with program expectations. The past year we achieved a success rate of 92 percent.

Turning Point Youth Services (TPYS): This program assists youth in Tulare County to obtain and maintain a drug-free lifestyle. Program outcomes for the three major program components, Treatment, Student Assistance Prevention Programs and Aggression Replacement Training (ART) are as follows:

Outpatient Drug-Free Treatment Component: Teens are involved in group and individual counseling for approximately six months. The majority of referrals comes from Probation and Schools. Recovery skills, family support, and development of self-efficacy skills are the primary focus of treatment groups. This year, clients have had more difficulty completing the program due to more stringent requirements for successful completion along with more complex challenges related to gang involvement, behavioral complications and a lack of family support. Additionally, as a result of the current economic environment, other community resources are less available to provide a safety net for these troubled youth.

- 579 of Unduplicated Clients Served
- 4,630 Individual Counseling sessions completed
- 9,020 Group Counseling contacts completed
- 17 Family Support Groups completed, 42 Parent contacts
- 13,584 Informational/Referral Contacts
- 29% of discharged clients completed program requirements
- 49% of discharged clients had achieved 30 days or more of continuous clean time at the time of discharge
- 42% of discharged clients had achieved 60 days or more of continuous clean time at the time of discharge.
- 36% of discharged clients had achieved 90 days or more of continuous clean time at the time of discharge. (19,075.67 Staff hours devoted to this program component.)

Student Assistance Program, Prevention Component: Middle School and High School students are seen on school campuses throughout Tulare County to gain an understanding of how alcohol and other drugs may negatively affect their lives. Throughout the school year, educational/support groups are provided to give information and skills to make healthy choices and develop beneficial relationships with peers and family. Students are also referred to community supports and linkages as needed, including the following examples:

- 11 Schools served in Tulare County
- 932 Students served (an assessment was completed for each)
- 812 Educational/Counseling groups provided
- 2,538 Student Contacts in all groups (1,601.70 Staff hours devoted to this program component)

Anger Replacement Training (ART) Universal Population, High School Students: This program, funded through the City of Visalia community prevention grant, identifies aggressive or antisocial behaviors, and increases student awareness and skills related to:

- 1) Peer Pressure and Tools to Resist
- 2) Stopping the cycle of abuse
- 3) Teaching youth to control impulsivity and anger
- 4) Positive self-awareness
- 5) Life management lessons
- 6) Helping students cope with situations that they have no control over
 - 37 support groups completed
 - 21 Assessments/Individual sessions
 - 98 Participants during the 20 weeks (101.20 Staff hours devoted to this project)

The FIRST STREET CENTER OUTPATIENT PROGRAM (FSC-OP) In Fresno has provided substance use disorder, co-occurring disorder, and outpatient mental health treatment services to 517 clients during fiscal year 2015/2016. FSC-OP aims substance use and psychoeducational groups toward the common goals of developing life skills to handle stressors, creating motivation to succeed, and providing resources to become productive members of society. FSC-OP assists clients in becoming productive members of society and lead by example within a setting that fosters trust and overall positive well-being.

Co-Occurring clients are clients who have been diagnosed with a Mental Health Disorder but who also struggle with some form of addiction, which comprise a high percentage of participants. Co-Occurring Treatment was once thought of as Dual Diagnosis because it was believed that the Mental Health diagnosis should be treated separately from their addiction. FSC-OP believes that all people who struggle with a co-occurring disorder will benefit from integrated treatment, where the mental health and substance use conditions are addressed at the same time and in an integrated manner.

All Co-Occurring clients are assigned to a Substance Use Disorder (SUD) Counselor as their primary contact for the program and a Mental Health Clinician. The SUD Counselor will meet with their assigned client based upon their assessed needs and level of care (there are five co-occurring levels of care at FSC-OP). The SUD Counselor will tailor a treatment plan that is unique to the individual client and their needs. Clients are also given the opportunity to meet with a mental health clinician for individual therapy on a weekly or bi-weekly basis based on client needs. When clients require more than psychotherapeutic interventions alone, FSC-OP provides telepsychiatry services which allow clients to meet with a psychiatrist via the internet for medication services.

Program Objectives	Federal Aftercare Outpatient (Fresno)	Federal Aftercare Program (Bakersfield)	TPYS	First Street Center Out Patient AB109	Totals
How Many Clients Served	137	132	579	517	1,365
Percentage Successfully Completing Full Program	87%	87%	29%	61%	66%



RESIDENTIAL DRUG AND ALCOHOL SERVICES

The Quest House is a structured, 30-bed residential recovery home designed to treat adults with primary Substance Abuse/Addiction problems, as well as other co-occurring disorders. The Quest House provided services for 159 individuals during the 2015-16 Fiscal Year. The Quest House admitted 132 new residents and 143 residents were discharged during the year. Of the 143 departures, 78 were successful program completions, 62 were incomplete, and 3 were transferred to other programs. However, 29 of the 143 departures walked away within their first week, which indicates a 68% successful completion rate for those who stayed past the first week. The 159 residents that received services accumulated 7,574 bed days. The Quest House averaged 22.40 residents per day throughout the year. The majority of our residents utilize counseling and aftercare services from First Street Center upon departure from the Quest House. Many of them accept referrals to the Sober Living, and most residents have stable housing upon departure. No Quest House resident is discharged homeless unless they choose to do so themselves.

The Quest House teaches positive living skills in a Social Model, Therapeutic, and Family Structured Home. Our Curriculum consists of Substance Abuse and Addiction Education, Cognitive Behavioral Intervention and Therapy, Living in Balance, Parenting Skills, Thinking for Change and Breaking Barriers to help change criminal and institutional thinking. We also have Family Groups, Process Groups, Twelve-Step Book Studies and Meetings, Individual Counseling, Gardening and Dog Fostering Therapy, as well as many recreational activities. The Quest House provides this curriculum at an average rate of 35-40 hours per week per resident. The Quest House objective is to help our residents understand the dysfunction and harm their addictions and lifestyles have caused themselves, their loved ones and society as a whole. We show them that they do not have to live that way if they don't choose to; that there is a better life for them if they want to change. We try to give them the hope and tools to make it happen, in a safe and positive environment.

The Quest House provided over 22,700 complete meals and over 15,000 snacks to the residents during the 2015-16 Fiscal Year. All of the Quest House Counseling and Supervising Staff are Certified Addiction Specialists.

The Kennemer Center: In the 2015-2016 fiscal year, exhibited remarkable growth and economic stability. With five individual community corrections contracts running simultaneously, the Kennemer Center is a hub for residential treatment, out-patient services, and re-entry facilitation. The Kennemer Center's one-stop shop approach supports both clinical and psycho-educational resources for our clientele. With a variety of community programs, each participant has the access and ability to navigate through an individualized treatment program, tailored to produce evidence-based results. All programs at the Kennemer Center are designed to affect each participant individually and dynamically. The Male Community Re-Entry Program has been a tremendous success in its first year of service. The MCRP Program maintained a 96% success rate, graduating 84 of 88 individuals back into society. A remarkable 29% (25 clients) of this in-custody population found and maintained employment during their residency. 100% of the MCRP residents were awarded medical benefits through the ACA. The MCRP is designed to help participants successfully reenter the community from prison and reduce recidivism.

The Specialized Treatment for Optimal Programming (STOP) is an in-patient, residential drug treatment program that focuses on adhering to the individual needs of clients with moderate to severe substance abuse issues. This program is based on a phase system that addresses cognitive behavioral treatment, criminal thinking, life skills, job readiness and substance abuse treatment. In the 2015-2016 fiscal year, the STOP Program served 87 individuals in residential treatment. The Kern

Day Reporting Center (DRC) is an out-patient based program with the ability to house up to 25% of our population in sober living environment. The DRC is a wonderful resource to the community as it assists moderate to high control parolees in completing their terms and conditions of parole successfully. The DRC is an effective tool to help prepare individuals for discharge from parole and reintegrate back into the community successfully with new skills and abilities. DRC participants are taught how to navigate through community service providers successfully while developing tools derived from classroom requirements such as anger management, life skills, job readiness and vocational training, criminal thinking, substance abuse education, and family reunification. All classes are based on a cognitive behavioral approach. The DRC is an interactive program for Parole Agents as well, as they are encouraged to check on and assist with their client's progress. In the 2015-2016 fiscal year, the DRC admitted 184 individuals into this out-patient program. Approximately 40% (73 clients) of all clients served received and sustained gainful employment. Roughly 60% (108 clients) of the clients served became employable by receiving their CA. identification, social security card, and resume. One-third of the DRC population served completed all phases of the DRC and graduated with ceremonies.

The Residential Multi-Service Center component or RMSC Program, is primarily directed at ending substance abuse and long-term homelessness among the parolee population. This program also focuses on transitioning parolees into productive members of society. The program targets parolees who are homeless or living in at-risk environments. In the 2015-2016 fiscal year, the RMSC Program served 179 participants. 46% of all clients served graduated from a vocational training program. 27% of all clients served found and maintained gainful employment. 7% of the total number served enrolled into Bakersfield College for continued education.

In total, the Kennemer Center served 724 participants throughout the 2015-2016 fiscal year. It is with great honor, the Kennemer staff moves forward to improve the quality of services. As one individual stated from the MCRP Program, "I'm grateful to have this opportunity to come here and be out of prison. I know this is a step in the right direction for my family and me. I'm going to take full advantage of every opportunity here, so I don't ever have to go back."

Program Objectives	Kennemer Residential	Quest House	Total
Clients Served	724	159	883
Number of Bed Days	19,444	7,574	27,018
Percentage Obtaining Employment	67%	N/A	67%
Percentage Completing the Program	96%	68%	82%

HOUSING PROGRAMS

The Stasis Center Permanent Supportive Housing Program is funded by the US Dept. of Housing and Urban Development and the County of Fresno. The apartments provide housing for homeless individuals that are persistently and seriously mentally ill (SMI). The program has 24-hour staffing with 16 units, 14 of which are used for the residents of the program. The staff assists residents in crisis management, daily living skills, med monitoring, and socialization skills. In conjunction with their assigned case manager and the staff appointment reminders, symptom managing (coping skills) are taught to the resident. The Stasis Program strives to help each client maintain a safe and stable, independent living environment with the supports needed to progress to self-sufficiency, stability, and resilience.

On October 1, 2015, we took over two Kings County projects for Permanent Supportive Housing Program; the Anchors 2 and the Anchors 4. We accepted the two placements that had been with the projects. The project is a scattered site offering the services of case management, referrals to outside resources, and the building of independent living skills. The population served is families and individuals that are chronically homeless and have a disability as defined by HUD guidelines. The program has been slow getting started. The referral process has been improved, and we are now housing six clients, three families and two individuals.

The Turning Point **Bridge Point** Program in Fresno opened on February 15, 2015, in the former Transitional Living Center house. Bridge Point is funded by Fresno City and County Emergency Solutions Grants. Bridge Point is designed to assist the chronically homeless in Fresno County, many of whom suffer from chronic mental and emotional disorders. Bridge Point residents must be chronically homeless, complete the Vi-SPDAT, be currently working with a Navigator and be document-ready for housing. Bridge Point is a dormitory style home that provides a clean, safe structured environment that allows residents to utilize the resources available to them to achieve permanent housing. The main goal of the program is to assist the resident's transition from homelessness to a stable home environment by addressing barriers that hinder self-sufficiency for those that exhibit the most urgent need in Tulare County.

Casa de Robles (CDR) Permanent Supportive Housing serves individuals, many with co-occurring disorders, who have persistent mental health symptoms and chronic homelessness impairing their community functioning as well as other disabilities. The goal for our residents is to assist them in living as independently as possible, to live to the best of their abilities and to maintain stabilization and resiliency regarding disorders or disabilities. To qualify for CDR, consumers must be homeless per HUD's definition and guidelines.

SERVICES AVAILABLE

The program partners with community-based organizations, public agencies, and learning institutions to develop the following Specialty Services in the targeted areas: (a) Life skills, (b) Education, (c) Crisis intervention, (d) Socialization, (e) Supportive group rehab, (f) Case Management Services, (g) Referring residents to wrap around services.

PROGRAM PHILOSOPHY

The emphasis will be on personal and community wellness, which includes the concepts of recovery and resiliency. Services will foster positive experiences that enhance good problem-solving skills, optimism, and hope. Further attention will be given to developing independence and a level of self-sufficiency in the individual to maintain stable housing and personal contentment with their quality of life.

The Family Villa Program is a Permanent Supportive Housing program which houses 26 families. The program is funded by the U.S. Department of Housing and Urban Development and the County of Fresno. The program is designed to permanently house homeless families with at least one applicant experiencing a disability and homelessness (per HUD's definition of disability and homelessness). Family Villa has served a total of 31 families (44 adults and 80 children) from 5/1/15 to 4/30/16. The goal of the program is to provide a safe and stable home environment, provide life skills classes (Parenting, Budgeting, Money Management and Case Management) and other supportive services that are designed to help foster stability, independence and to keep families from returning to homelessness.

The Court Street Transitional Center (CSTC) is a six-bed transitional housing and sober living program, serving males as they transition to independence since October 2011. This fiscal year CSTC served HUD-eligible homeless men, Tulare County probationers, and self-referrals. Upon intake and assessment, residents meet with the caseworker assigned to the facility to prepare an individualized case plan to include: (a) in-house financial management, (b) job search and retention skills, (c) cognitive skills, (d) use of community resources, and (e) substance abuse counseling if applicable. Residents are required to participate in meaningful activities that facilitate reentry into the community and recovery, such as work, vocational training, adult school, higher education, volunteer work, and self-help meetings. CSTC's primary goal is for residents to live alcohol and drug-free and transition to permanent housing and self-sufficiency. In Fiscal Year 2015-16, CSTC provided 1,693 man days of transitional and sober living services to 11 clients, 3 of whom left with permanent housing.

The AB 109 Housing Incentive Program provides housing and case management services to AB109 Post Release Community Supervision, Mandatory Supervision, and High-Risk Probationers. The key to the success of this program is the effective coordination of services with Monterey County Probation, Behavioral Health, and the Department of Social Services. In May of 2012, the County of Monterey Probation Department contracted with Turning Point to design and implement a new housing program for AB 109 probationers. The program was developed to offer a menu of housing and ancillary services to meet the individual needs and challenges of this new growing population. Case Management is an integral element of this program, which is primarily for probationers with serious mental health issues where increased community advocacy is necessary for stability. The Housing Program has been operating for over three years and has received over 380 referrals from the Monterey County Probation Department for Region V.

The Belgravia Center Is located at 2904 E. Belgravia in Fresno, Ca. 93721. Belgravia Center is a residential program that serves the adult/homeless probation population most of whom suffer from a mental illness. Referrals are submitted to Belgravia Center from all Fresno County Probation units as well as First Street Center OP. Residents can be housed at Belgravia Center for a maximum of 120 days. Currently, we house up to 30 males and 4 females. Our staff consists of 6 security monitors, 2 caseworkers, and program director. Services that are offered to residents are case management, job developing, employment skills, job readiness training, money management, computer lab, laundry services as well as an onsite cafeteria for meals.

Residents who are employed participate in our trust account which assists residents in saving 75% of their earned income, for them to have savings when they exit the program. Residents who are AB-109 and linked with FSC-OP obtain services such as therapy, case management, and counseling. Belgravia Center is geared for residents to become aware of their responsibilities to society as well as to assist them in preparing for life skills to enhance their success within the community

The Serenity Village Is a permanent supportive housing program in Madera County for homeless individuals, sponsored by the U.S. Department of Housing and Urban Development. Seven apartment units in Oakhurst, California are utilized to house single chronically homeless adults that participate in services that foster success and eventual transition to unsubsidized housing. The following services are available at Serenity Village: sponsored rent, transportation assistance, case management, life skills workshops, independent housing and linkages to other services.

Falcon Court provides Permanent Supportive Housing to 34 disabled chronically homeless individuals, and six chronically homeless families in Fresno. Falcon Court offers Case Management, life skills training, education and employment assistance, linkages to community resources, and financial counseling. Applicants referred to the program will receive an assessment to determine eligibility for the program, specifically verification of chronic homelessness under the Federal HEARTH Act, and a needs assessment will be conducted. Residents will be provided with a furnished unit, and upon entry into the program, will meet with a Case Manager to determine what needs must be most immediately addressed and to set goals to help residents accomplish meeting and overcoming daily obstacles. The goal of Falcon Court is to assist the residents in becoming self-sufficient and maintaining residential stability.

Program Objectives	STASIS	CSTC	Bridge Point	Family Villa	Serenity Village	Belgravia	Total
Nights of Shelter	11,417	1,693	6,967	N/A	1,684	365	22,126
Clients Served	35	11	137	124	8	400	715
Number Placed in Permanent Housing	N/A	N/A	106	N/A	N/A	100	206
Percentage Successfully Overcoming Barriers to Improve or Obtain Employment	N/A	N/A	N/A	80%	N/A	25%	52%

The AB 109 Probation Transitional Housing Program is a 12-bed facility starting in September of 2014 and located in downtown Salinas at 111 and 115 E. San Luis Street. The program is centrally located providing clients easy access to public transportation, employment opportunities, adult education, vocational training sites, substance abuse/mental health clinics, medical and dental offices and the Probation Department. The program is designed to serve and manage the needs of the AB109 clients of Monterey County, who are in a current homeless and indigent living situation. The program assists clients with family reunification, support system development, education, vocational training, employment, recovery, financial and legal matters, health issues and long-term housing. Program outcomes include not reoffending, the potential for family reunification, increased employment and educational opportunities, abstinence from substance abuse, and housing at the time of exit. Probation Transitional Housing serves to improve community safety by providing a layer of supervision that would not otherwise exist.

The AB109 Housing Incentive Program in Monterey provides housing and case management services to AB109 Post Release Community Supervision, Mandatory Supervision, and High-Risk Probationers. The key to the success of this program is the effective coordination of services with Monterey County Probation, Behavioral Health, and the Department of Social Services. In May of 2012, the County of Monterey Probation Department contracted with Turning Point to design and implement a new housing program for AB 109 probationers. The program was developed to offer a menu of housing and ancillary services to meet the individual needs and challenges of this new growing population. Case Management is an integral element of this program, which is primarily for probationers with serious mental health issues where increased community advocacy is necessary for stability. The Housing Program has been operating for over three years now and has received over 380 referrals from the Monterey County Probation Department for Region V.

Program Objectives	Probation Transitional Housing	AB109 Housing Incentive Program
Nights in Shelter	4,274	1,629
Clients Served	108	173
Number of Clients placed in Emergency/ Interim Housing	N/A	61
Number of Clients in Transitional Housing	58	37
Number of Clients Assisted with Permanent Housing	30	24
Percentage Successfully Overcoming Barriers to Improve or Obtain Employment	51%	N/A

ANCILLARY SERVICES

Some services have developed as adjuncts to outstanding programs to assist in the overall purpose and vision. One such service is the Payee Program, which provides money management services for mentally challenged individuals who need this type of assistance. Other ancillary services include (a) jail visitation programs, (b) electronic monitoring, (c) drug use detection, (d) self-help meetings, (e) public education, (f) community youth prevention activities, (g) peer support activities, (h) speaker's bureaus and (i) tenant council development.

Turning Point **Payee Services Programs** serve individuals in Fresno County who are unable to administer their own Social Security, veterans benefit or private funds. The majority of our clients have a serious mental health diagnosis and have difficulty managing their money efficiently. This past year we administered over \$4,504,595.73 in various types of benefits, servicing 455 clients. This program serves a population that, without our help, could very easily become homeless and destitute.

Program Objectives	Fresno Payee Services
Annual Deposits	\$4,504,595.73
Clients Served	455
Average Deposit	\$9,900.21



FUTURE GROWTH

We continue efforts to expand services to meet growing needs in the communities we serve. New programs for the intellectually disabled, offenders, homeless, and mentally ill are in the process of implementation for the coming year.

SUCCESS STORIES (pseudonyms are used in place of actual names)

Probation Transitional Housing- Gus (false name) came to Probation Transitional Housing after releasing from a long-term prison sentence. He was initially very apprehensive about the expectations of becoming part of a new community. As soon as he arrived staff assisted him in securing his CA ID, Social Security Card, and Medi-Cal Insurance. He then went on to complete life skills education at Transitions for Recovery and First Offender DUI classes. Gus secured his CA Driver's License, and with the assistance of the TP Employment Program, he secured employment where he advanced quickly to a supervisory position. Gus provided financial support to his family regularly and still saved \$5,000.00 for his family reunification plan. He is now reunited with his family and is a productive member of our community. Gus is truly a Turning Point success story.

The Belgravia Center had a resident who completed Belgravia Center back in January and became a truck driver. During his stay at BC, he was going to truck driving school as well as maintaining a part time job. He was compliant with probation as well as BC. He completed his 120 days here at BC and was offered employment at a truck driving facility his last month here.

Casa de Robles 2- Larry (false name) was homeless for 14 years. He'd been attacked and victimized in various ways on the streets during that time. Turning Point was contacted when another agency was unable to house him. He met with a Case Manager and the Deputy Regional Director for the Housing Programs on a park bench. He was housed at Casa de Robles 2 within two hours and has remained in housing since March 2016, which is a tribute to his current Case Manager, as many chronically homeless individuals struggle with maintaining their first housing placement.

Visalia Reentry Center (VRC)- Rod (false name) had spent the last 26 and a half years of his life in prison. The day that he was released, he did not know what to expect out in society. Through the help of Turning Point, he has learned to adjust to being free. Through the groups of substance abuse, anger and stress, family, relationships and Cognitive Behavioral Therapy (CBT), it has opened his eyes, mind, and spirit to thinking before acting out. Knowing that there is a positive way of thinking and that alcohol and drugs are not the answer, but rather the answer Rod states "It is my higher power. For me it is Jesus Christ, who has shown me that it is like a cluster of grapes; you don't try to eat them all at once, you eat them one at a time. So, now I tackle one problem at a time and practice the things I have learned from my higher powers, Jesus and Turning Point. This gives me a positive way of thinking and living."



2015-2016 Turning Point Clients Served

