Cook County Resolution #21-1189: Resolution to Assess Needs and Improve the Quality and Effectiveness of Behavioral Health Care Provided by Cook County Government

Cook County Sheriff's Office Behavioral Health Services Quarterly Report

September-November 2021



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Executive Summary

This Behavioral Health Services Quarterly Report complies with the requirement put forth in Cook County Board Resolution #21-1189: Resolution to Assess Needs and Improve the Quality and Effectiveness of Behavioral Health care Provided By Cook County Government. The Cook County Sheriff's Office provides behavioral health treatment and interventions at the community level intersecting with the Sheriff's police, at the detention level within the Cook County Jail, and upon release via the Community Resource Center and for select pre-release programs that include a post-release component. The following report contains information on these programs broken down by the Cook County Department of Corrections Department of Behavioral Health, the Community Resource Center, and the Treatment Response Team. Information in this quarterly report reflects the September - November 2021 timeframe where relevant.

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle

The table below provides general information on the multiple behavioral health programs offered at the Cook County Sheriff's Office (CCSO) through the Cook County Department of Corrections (CCDOC), including population served by each program, how program participants are identified and the number of participants in each program for the last 24 months ending <u>November 30, 2021</u>. We have provided both the number of unique bookings that have participated in the program as well as the number of unique individuals¹. We have also attached zip code data on CCDOC program participants to demonstrate where our patients reside when outside of the CCDOC.

Cook Cour	Cook County Department of Corrections (CCDOC) Department of Behavioral Health				
Program	Population Served	How patients are identified	Unique bookings	Unique people	
Sheriff's Men's Addiction Recovery Treatment (SMART)	Male detainees at the Cook County Jail with substance abuse and co-occurring disorders	This is a court-ordered program	633	605	
Therapeutic Healing Recovery Initiative for Vitality and Empowerment (THRIVE)	Female detainees at the Cook County Jail who suffer from addiction.	This is a court-ordered program	281	255	
Mental Health Transition Center (MHTC)	Male detainees at the Cook County Jail in need of mental health and substance use treatment, criminal risk reduction and intervention, vocational skills training, and education services.	MHTC is a voluntary program. Individuals may request to be in the program or CCSO data team identify candidates based on assessment at intake.	593	588	
Sheriff's Opioid Addiction Recovery Program (SOAR)	Cook County Jail detainees who are recovering from opioid addiction.	SOAR participants are either court-ordered to the program or volunteer to participate.	251	250	
The Sheriffs' Anti- Violence Effort (SAVE)	Male detainees at the Cook County Jail or those who have recently been at the jail and now receive services in the community. Participants are between the ages of 18 and 25 who are likely to be victims of violence or to perpetuate violence.	Participants volunteer for the program.	490	476	

¹ A unique booking references a specific instance of an individual being booked at the Cook County Jail. An individual can have more than one booking so we are reporting both unique bookings and persons who have participated in CCDOC programs.

(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served

	Cook County Department of Corrections (CCDOC) Department of Behavioral Health			
Program	Description & Goals			
SMART	The Sheriff's Men's Addiction Recovery Treatment (SMART) program is a modified therapeutic community treatment program for substance abuse and co-occurring disorders. It is dedicated to helping detainees learn pro-social behaviors designed to reduce substance use and criminal activity. The program seeks to target those struggling with such issues and equip them with the support and tools they need to be successful in the community.			
THRIVE	The Therapeutic Healing Recovery Initiative for Vitality and Empowerment program (T.H.R.I.V.E.) was created to support women who suffer from addiction while they are in CCDOC custody. Participation in the program consists of a 90-day curriculum designed to address the biopsychosocial factors related to addiction and incarceration. THRIVE is a court-ordered program but judges have the discretion to give sentences that are longer or shorter than the recommended 90 days. Programming is aimed towards detainees with non-violent drug-related charges who have a history of substance abuse, trauma and/or mental illness. THRIVE programming uses evidence-based treatment aimed at establishing thought patterns and habits that prevent future substance use.			
МНТС	The Mental Health Transition Center (MHTC) opened in 2014 and offers a holistic array of services including substance abuse and mental health treatment, vocational skills training, educational services, fine arts programming, and comprehensive discharge planning. The goal of the program is to empower justice-involved individuals diagnosed with a substance abuse and/or clinical mental health disorder with the development of a support system to ease their transition back into the community and aid their long-term recovery.			
SOAR	The Sheriff's Opioid Addiction Recovery (S.O.A.R.) Program was created to address the particularly high opioid overdose death rate for people recently released from incarceration. SOAR participants have recently transitioned from the Cook County Jail to the electronic monitoring program. The SOAR program is dedicated to helping detainees recover from opioid addiction and transition into the community with supportive wraparound services. SOAR is a step-down program available to individuals who have completed a 90 day in-custody drug treatment program, either SMART or THRIVE. Participants are linked to community resources through an individualized case management re-entry plan. The case manager assists participants with addressing their needs and achieving identified goals. Services can include but are not limited to educational services, vocational training, employment, religious services, medical services, substance abuse services and mental health services. In the summer of 2020, SOAR merged with the SMART and THRIVE programs, so SOAR eligibility is now determined by SMART and THRIVE program staff. Participants either voluntarily participate in the program or are court ordered to participate in SOAR.			
SAVE	The Sheriff's Anti-Violence Effort (SAVE) is a voluntary program that targets 18 to 25-year-old males who are likely to be victims of violence or to perpetuate violence. The cohort-based programming is grounded in an effective form of psychotherapy known as cognitive behavioral therapy, widely recognized as an evidence-based component to effective rehabilitation. SAVE is designed to install positive social norms and values in participants. Motivated participants are provided with the tools and support they need to reintegrate into some of the Chicago communities most impacted by violence.			
	The SAVE program consists of two components. During the first component SAVE participants are housed together on a single tier. While in custody, participants are provided with daily individual therapy and programming based on and related to cognitive behavior therapy, anger management, and life skills. Upon discharge, participants are linked to intensive case management services and partner agencies in			

the community. Both SAVE staff and community partners offer support to participants as they transition
to the community.

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

The Department of Behavioral Health is comprised of various mental health and substance abuse programs including SMART, THRIVE, MHTC, SAVE, and SOAR. Each of these programs is staffed with mental health professionals with clinical training. In total, we have 14 licensed clinical mental health professionals within the Department including Licensed Clinical Psychologists, Licensed Social Workers (LSW), Licensed Clinical Social Workers (LCSW), Licensed Professional Counselors (LPC), and Licensed Clinical Professional Counselors (LCPC). Additionally, we have 5 individuals who are Certified Alcohol Drug Counselors (CADC). The Department of Behavioral health staff work with clients from a variety of backgrounds and have experience working with the most vulnerable populations and providing a variety of services such as specialized mental health and substance abuse treatment, trauma informed cared, anti-violence, case management, and re-entry care coordination.

With the exception of two SMART staff whose positions are funded by a grant from the Illinois Criminal Justice Information Authority (ICJIA), all CCDOC Department of Behavioral Health staff are funded through the general CCSO operating budget. There is no overlap in funding for CCDOC Department of Behavioral Health staff.

In the last three months, the CCDOC Department of Behavioral Health has brought on five new clinical interns who are unpaid. CCDOC works with local graduate schools to provide clinical training to students earning their Masters or Doctoral degrees. Students are on site between 16 and 20 hours per week and are with us between 9 and 12 months.

(4) Key Performance Indicators

Key performance indicators measuring the results of the program

Computerized Adaptive Testing for Mental Health (CAT-MH)

The CCDOC has recently implemented the Computerized Adaptive Testing for Mental Health (CAT-MH) across four CCDOC programs – SMART, THRIVE, SAVE and MHTC. This will serve as another key performance indicator for the CCDOC behavioral health programs and information on the number of assessments conducted will be submitted in future quarterly reports.

Despite the extremely high rates of depression, anxiety, and other psychiatric symptoms in incarcerated individuals, mental health conditions often go undiagnosed and undertreated in this population. An oftencited reason for this disparity is that correctional institutions often lack the resources to conduct widespread mental health screening of detainees in their care. Technology-enabled mental health services have shown great promise in helping to bridge this gap by creating reliable, cost-efficient, and adaptable means of psychiatric assessment. The CAT-MH is one such technology, which uses principles of computer adaptive testing to efficiently and accurately measure symptoms across major diagnostic categories. The CAT-MH implementation at CCDOC started in June 2021 and is designed to last 12 months with the goal of validating the CAT-MH tool in a sample of individuals detained at the Cook County Jail. Administering the CAT-MH to detainees will allow us to examine the associations between symptom severity and relevant post-incarceration outcomes.

CAT MH Participant numbers (September – November 2021)

- MHTC: 605 interviews (73 participants), 42 people have refused since enrollment (152 individual interview refusals)
- SMART: 1063 interviews (79 participants), 17 people have refused since enrollment (53 individual interview refusals)
- SAVE: 542 interviews (26 participants); 0 refusals
- THRIVE: 571 interviews (25 participants), 7 people have refused since enrollment (49 individual interview refusals)

Other Key Performance Indicators (Tracked Annually)

The CCDOC tracks performance indicators on a schedule that best reflects the population served which are detainees at the Cook County Jail. Thus, as detainees enter and leave the jail on a regular basis, the CCSO looks at a variety of metrics and characteristics of the targeted population and tracks those indicators over time. Below is a table that describes the key performance indicators measured for each program and the most recent outcomes within the specified timeframe. This information is tracked on an annual basis which is the schedule that best reflects the population served.

Program	Key Performance Indicators	Timeframe	Outcomes
SMART	Re-Booking Rates Active Participants	1/1/17-12/31/20	The recidivism rate was lower in treatment group at 30, 60 and 180 days from discharge (p < 0.05)
THRIVE	Re-Booking Rates	4/1/17-12/31/20	THRIVE participants had lower recidivism rates at 30, 60 and 90 day mark. (p < 0.05)
	DASS 42 Pre/Post Assessment		Those who scored <i>Extremely Severe</i> for depression at intake (pre) decreased significantly at Discharge (post). The differences from pre to post were statistically significant in the categories of depression, anxiety and stress.
МНТС	Re-Booking Rates	4/1/17-12/31/20	MHTC participants had lower recidivism rates 30, 60,90, 120, 150 and 180 day mark. (p< 0.05) Participants who had at least 90 days of programming were less likely to be rebooked.
SOAR	Links to Community Treatment (Court Ordered Participants)	6/1/2018 - 1/22/21	40 of 56 court ordered participants have been linked to community agencies.
	Services Received (Volunteer Participants)	6/1/2018 – 2/1/21	62 of the 259 volunteer participants were provided with 339 services. (Services are provided based on need, so not everyone is provided each service)

SAVE	Re-Booking Rates	5/13/16 – 12/31/20	SAVE participants return to CCSO custody at a lower rate than the comparison group at 60, 150, and 180 days
	Standing in Community		Of the 1,214 participants ever enrolled in the program, 663 were active in the community 68% of participants who have remained active SAVE participants post release in the community have not been re-booked on a violent offense.

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where Applicable

The CCDOC behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and providing continuity of care once a detainee is released. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the CCDOC programs are currently working under.

MOUs	MOU Expectations
Roseland	Collaboration between CCSO and Roseland to provide reentry planning services for detainees scheduled to be released
Heartland Alliance/READI	Collaboration between CCDOC and Heartland Alliance to identify CCSO detainees who would benefit from READI Chicago services (Rapid Employment and Development Initiative).
Illinois Department of Employment Services (IDES), Chicago Cook Workforce Partnership, and Central States SER Jobs for Progress.	This MOU between IDES, the Partnership, SER and the CCSO SAVE program is a collaboration between stakeholders to provide post-release Workforce Innovation and Opportunity employment services to SAVE participants.
Westside Health Authority	Collaboration between the CCSO SAVE program and the Westside Health Authority to provide comprehensive post-release supportive services to SAVE participants.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

For each of the programs within the Department of Behavioral Health (SAVE, SMART, THRIVE, SOAR, and MHTC) each client is assessed on an individual basis by a clinician. Based on that clinical assessment or intake a treatment plan is developed to assist the client with working toward their treatment goals. Additionally, our case managers and re-entry care coordinators work to develop a client centered re-entry plan to assist the individual with successful reintegration into the community. The re-entry plan addresses

the individuals clinical, medical, educational, employment/vocational, individual, community, and familial needs.

Our SMART and THIRVE programs typically rely on support from the judiciary and community, including local community organizations, and treatment facilities such as recovery homes for our participants once they are discharged from our custody. These entities provide community re-entry services and wrap around services which are essential to the recovery of our clients. Community support is encouraged to maintain ongoing recovery.

One of the biggest components of our SOAR and SAVE program is the community component. We identify appropriate community partners for individuals in these programs to work with upon discharge. We rely on community partners to work hand in hand with CCODC staff to provide treatment, wrap around services, and resources. Additionally, family and community support are encouraged to promote ongoing improvement and recovery.

In our SAVE program, we specifically match individuals in custody to community providers from the communities that they will reside in post release. We connect the providers with the men in custody through programming at CCDOC to foster relationships between the provider and the patient while in custody.

With all programs we try to keep community in mind when making recommendations so that individuals are paired with the most appropriate services geographically and culturally.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

The Department of Behavioral Health is comprised of various mental health and substance abuse programs including SMART, THRIVE, MHTC, SAVE, and SOAR. Each of these programs addresses the continuum of care by assessing client individual needs and wants and creating re-entry plans to assist the individual with successful transition to the community. Additionally, we make referrals to a variety of community agencies for community reentry services including, housing, substance abuse treatment, mental health, medical, educational, employment/vocational services, etc. Furthermore, all programs offer intensive case management and re-entry care coordination which allows individuals to meet with case managers either in person or via phone to provide as much support as possible. Moreover, we facilitate alumni groups for each behavioral health program, where individuals who are alumni of our programs are invited to remain connected to our clinical staff and treatment team. Finally, we also utilize "in reaching" programming where we engage community agencies to come to the jail to begin providing their services to individuals while still incarcerated. This allows rapport to be built between the community provider and the program participants which will increases the likelihood of continued engagement in their program post release.

(8) Best Practices

Information on the best practices in this type of programming

The Department of Behavioral Health is comprised of various mental health and substance abuse programs including SMART, THRIVE, MHTC, SAVE, and SOAR. Each of these programs is based on best

clinical practices. We use the latest research, trauma informed care and practices, and are informed on appropriate jail-based standards. Examples of evidenced based programming include the Thinking For Change curriculum (used for MHTC) and Stephanie Covington's Addiction Recovery Materials for justice involved women (used for THRIVE). In addition, many of our programs use a cognitive behavioral therapy approach to reframe faulty cognitions as a way to improve behavior. We comply with ethical standards such as utilizing informed consent and appropriate disclosures of information. Clinical staff are provided with daily clinical supervision, attend trainings, and seek peer consultation as needed.

An additional best practice that the CCDOC employs is naloxone distribution to those at risk of an opioid overdose. Naloxone training alerts are added by our partners at Cermak Health Services for patients who they have identified and agreed to be trained while in custody. This typically occurs when patients are admitted into the detox unit or speak with a provider about their addiction. Patients receive education from the provider and then issued an alert in CCOMs. At discharge, CCSO staff see the alert and distribute a kit with information and naloxone to the patient.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable

The CCDOC has multiple partner agencies in the community that contribute to the success of individuals leaving our custody. We continue to work very closely with the City of Chicago, Circuit Court of Cook County, Cook County Public Defenders, Cook County State's Attorneys, and Cook County Health and Hospital System. The CCDOC also continues to work with many community stakeholders who assist us with wrap around services, continuum of care services and supervision and monitoring of our participants.

Partner meetings (September – November 2021):

Bail Project Meeting: With the implementation of the Pretrial Fairness Act in Illinois, more individuals will remain in their jobs and with their families while awaiting court dates. Although most will return to court without any additional support or services, others benefit greatly from staying in touch with a service provider who can assist them throughout the court process. The Bail Project's vision of a world without cash bail is one of "Community Release with Support" (CRwS), a needs-based model that ensures people going through the pretrial process return to court by providing them with the services they need and removing barriers to appearance in our current legal system. CRwS is based on an individualized assessment of strengths and needs, acutely focused on the legal questions of willful flight and potential for harm to a person in the community. Pilot The Bail Project (TBP) is spending \$2.9 million to partner with Lawndale Christian Legal Center (LCLC) to develop and launch the CRwS model. This two-year pilot aims to initiate contact with 6,000 people and serve 3,000 individuals who voluntarily opt into our no-cost services starting in April 2022. Pilot staff will be based out of bond court (pre-bond area in CCJ) where clients will be introduced to CRwS services and intake will be completed. Upon release, clients will be enrolled in TBP's court reminder service, transported home, and provided with warm handoffs to providers of social services identified as client needs during intake. Holistic defense services and case management will be available for our highest need clients. Staff will ensure service referrals are

successfully completed and court appearance reminders are provided in a timely manner. If successful, this model could be expanded statewide to support those awaiting court dates.

Community Non-Violence Meeting: CCDOC met with the Cook County State's Attorney office and several community partners such as Kolbe House Jail Ministry, CRED, Metropolitan Family Services and Heartland Alliance to discuss ways we can interrupt violence in the community by targeting those who are currently in our custody. The goal is to provide support and resources to individuals in custody in hopes of assisting them with successfully transitioning back to the community. Our community partners would like the services to include education, cognitive behavioral therapy, housing, job training, and employment.

Judge Burn's Drug Court graduation: Collaboration between many community stakeholders including CCSO, Chief Judges Office, Probation and Chicago Housing Authority etc.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

The CCDOC behavioral health programs are unique in that they are directed toward CCDOC jail detainees and individuals on electronic monitoring. Although there are other behavioral health services available to individuals in the community, CCDOC is the only agency uniquely positioned to offer behavioral health services directly to those who are detained in the jail or on electronic monitoring. As indicated in our answer to Question #4, various items are evaluated as performance indicators for each CCDOC program. Participants in all CCDOC programs trend toward outperforming a comparison group (if available) made up of individuals with similar characteristics. Individuals who are detained by the CCDOC either within the jail or on electronic monitoring are already classified as a vulnerable population. Additionally, the population served with CCDOC is overwhelming persons of color who experience behavior health disparities. The CCDOC Department of Behavioral Health aims to work with these individuals to help address health needs related to behavioral/mental health and substance use disorder and ultimately assist individuals find the care they needed for rehabilitation.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The major costs associated with the CCDOC Department of Behavioral Health programs are primarily staff time. The table below represents staff salaries and benefits for September - November 2021. Most CCDOC Department of Behavioral Health staff salaries are covered under the CCSO general operating budget, however currently there are 2 SMART staff whose salaries and benefits are covered by the ICJIA Residential Substance Abuse Treatment Act (RSAT) grant. No new costs have incurred since the last quarterly report submission.

CCDOC Program	# of FT Staff	Funding Source: CCSO Operating Budget	Funding Source: Other specified	Total Funds for Staff salaries + benefits (9/1/21- 11/30/21)
SMART	11	\$157,248.32	ICJIA RSAT grant: \$35,889.84	\$193,138.16
THRIVE	11	\$215,971.88	NA	\$215,971.88
MHTC	8	\$184,278.78	NA	\$184,278.78
SOAR	We no longer have staff that exclusive work with SOAR. In the summer of 2020, SOAR merged with the SMART and THRIVE programs The SOAR staff work within either the THRIVE or SMART program.			
SAVE	10	\$184,413.60	NA	\$184,413.60

(12) Additional Information to Facilitate Committee's Understanding

Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity.

The CCDOC recently established a new women's program tier. This tier is for women who are interested in participating in positive activities and programs while at CCDOC. Programming on the new tier cover topics such as substance abuse issues, mental health awareness, health education, domestic violence, self-esteem, relationship dynamics, anger management, and conflict resolution. Some of the programs offered may include correspondence courses, peace circles, character strengths, meditation and peer led groups.

In addition, the CCDOC recently relaunched their Rehabilitation Unit (RU) programing. The CCDOC provides services to individuals housed at the RU. Group topics include anger management, life skills, health relationships, mental health, antiviolence, etc.

(13) Opportunities for Growth & Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity's behavioral health care programs.

The CCDOC Department of Behavioral Health provides mental and behavioral health programing to detainees in coordination with Cermak Health Center of Cook County. Having this programming at the CCDOC is a practical and effective way to reach detainees of the Cook County Jail, as no other entity has such a direct connection to CCDOC-involved individuals. The CCDOC mental and behavioral health programs are rooted in evidence-based practice. Our clinicians are regularly assessing the department's program methods and outcomes and are kept apprised of the latest research regarding justice-involved individuals, so that they may adjust or change their approach in order to provide the best care to all CCDOC program participants.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

Detainees of the Cook County Jail receive medical services from Cermak Health Services of Cook County. Further, individuals who are taking medications while detained at the Cook County Jail are able to receive a prescription for a refill at Stroger or select Cook County Health clinics post-release.

Community Resource Center (CRC)

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle

The Community Resource Center (CRC) most often serves individuals with some connection to the Cook County Sheriff's Office (CCSO); however, all members of the public may reach out to the CRC, regardless of their involvement in the criminal justice system. Participants are typically referred from electronic monitoring, the Cook County Department of Corrections, the CCSO evictions social service team, Sheriff's police or identified through outreach calls made to returning citizens. Since the CRC opened on September 20, 2020, CRC staff have assisted 7,923 individuals with services. Zip code data on where CRC clients reside is attached.

(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served.

The Community Resource Center (CRC) is a virtual supportive services initiative created and launched in 2020 by Sheriff Tom Dart, in direct response to the increase in critical situations caused by the COVID-19 pandemic, to connect individuals to resources in their communities. The CRC aims to leverage new and existing community partnerships to provide linkages to members of the community to address an individual's unique mental health, substance abuse, housing, mortgage/rental assistance, trauma, domestic violence, and/or employment and financial needs, regardless of his/her/their involvement in the justice system. What makes the CRC unique is how the Center functions as a hub for anyone who is in need of assistance, no matter what assistance is needed. Together, the CRC staff have experience in many areas including case management, evictions, domestic violence/survivor support, counseling, substance use, and advocacy. The Center is only operating virtually at this time but plans to operate from a physical space in the near future.

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

The CRC executive director has a Master of Arts (MA) and is a Licensed Clinical Professional Counselor (LCPC). The Assistant Executive Director has a Doctorate in Psychology, substance abuse counseling certification, and co-occurring disorder counseling certification. The Clinical Program Manager started in

October of 2021 and possesses a Master of Science in administration and is a Licensed Clinical Professional Counselor. The direct services staff include 2 Master of Social Work (MSW), 1 Master of Science in Criminal Justice, 2 MAs, 1 MA in Clinical Mental Health Counseling, 1 MS in Mental Health Counseling, 2 MA in Forensic Psychology. All clinical staff have some level of certification or licensure which include a Certified Alcohol Drug Counselor (CADC), LCPC, Licensed Social Worker (LSW), and Licensed Professional Counselor (LPC). All positions are funded by the general CCSO budget or grant funded. There is no overlap in funding for CRC positions with other programs at the CCSO.

(4) Key Performance Indicators

Key performance indicators measuring the results of the program

The CRC was launched recently in September of 2020 and is already tracking many variables each week on number of individuals called, those accepting services, and types of calls made. Listed below are the current key performance indicators that the CRC has been tracking and data collected during the specified timeframe.

Key Performance Indicators	Timeframe	Outcomes
Total Outreach Calls	9/1/21-11/30/21	5,421
New Individuals called weekly	9/1/21-11/30/21	3,741
# of individuals who accept services	9/1/21-11/30/21	705
# of referrals made	9/1/21-11/30/21	2,521

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where applicable.

The CCSO behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and providing continuity of care once a detainee is released. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the CRC has with community partners.

MOUs	MOU Expectations
MADO Health	MADO Health will work with CCSO to help provide residential mental health and substance abuse treatment services to individuals referred by the CRC.
Treatment Alternatives for Safe Communities (TASC)	TASC will work with the CCSO to provide specialized case management services to individuals referred by the CRC. This could include screening, clinical assessments, referrals, placement into community-based services, and client advocacy.
Illinois Health Practice Alliance (IHPA)	Data sharing between CCSO and IHPA for the purpose of identifying individuals with mental health and substance use disorder treatment needs and providing linkages to services for such individuals.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

As an agency that provides services to individuals who have had contact with the CCSO, the CRC is often the only social service provider perfectly placed within the CCSO to assist an individual who may be in a vulnerable state. For example, our clinical staff are uniquely positioned to assist electronic monitoring (EM) participants when a person is in urgent need of support, but movement approval is pending. In such a situation, the CRC can reach out to CCSO colleagues that manage the EM program to help come up with resolution. The collaboration between our CRC clinicians and CCSO sworn partners is an ideal model to assist CCSO-involved individuals including those impacted by evictions, domestic violence survivors and other victims of violence and crime. Having the CRC embedded in the CCSO has helped address the needs of survivors of violence and other crimes much sooner than an outside agency, allowing for support and healing to begin as soon as possible. Once the CRC began developing the capacity to address the wide range of needs of individuals who come into contact with the CCSO, it made sense to ensure that all Cook County residents could benefit from these services, and the program is now promoted widely to anyone who needs it.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

As an agency that provides care coordination and linkage services for individuals in need of a multitude of services related to housing insecurity and contact with the justice system, the CRC explicitly initiates the continuum of care chain for those we serve.

(8) Best Practices

Information on the best practices in this type of programming

CRC staff take a trauma-informed, strength-based approach to service delivery, working in collaboration with participants to identify risk and needs based on his/her desired outcome. The Risk-Needs-Responsivity framework is used to assess risk level, need, and target interventions/guide case management. This evidence-based approach aligns well with the CRC's mission to change the conversation related to justice involvement, victimization, and eviction from one of deficiencies and failures to one of empowerment, strength and solution focused.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities

on this program, where applicable

The CRC has regular partner meetings with state, city and county government partners in addition to community partners. Listed below are the partners the CRC has met with during the time period from September-November 2021.

- Weekly meetings with Office of the Chief Judge and Safer Foundation to discuss service delivery and linkage for the Frequently Impacted (FI) population identified as part of the Safety and Justice Challenge (SJC) initiative.
- Monthly SJC FI work group meetings.
- Weekly meetings with Chestnut Institute to address Justice Community Opioid Innovations Network (JCOIN) Study pilot operations and logistics.
- Meetings with Smart Policy Works, IHPA, and Heartland Alliance Health (HAH) collectively or separately to discuss partnership and rapid cycle testing of partnership and data sharing.
- Outside agency meetings to build partnerships with provides, includes Kolbe House Ministries, Inner Voice, Catholic Charities, Chicago Prison Outreach, Pacific Garden Mission, Connections for the Homeless, MADO Health, Cook County Health's Center for Health Equity and Innovation, CPD CIT team, City of Chicago – Mayor's Office of Violence Reduction, and A Little Bit of Heaven.
- Meetings related to evictions: Cook County Legal Aid for Housing & Debt, Chicago Mayor's Office and Department of Housing, Housing Action Illinois, Neighborhood Building Owners Association, Housing Forward
- Participation in Chicago Homelessness & Health Response Group for Equity (CHHRGE) All Stakeholder meetings
- 9/14/21 meeting with University of Chicago Urban Labs on the addition of their imbedded analyst that works with the CRC 2 days/week
- 10/21/21 meeting with University of Chicago Booth School on a study around eviction process, and placing participants at the Hotel Essex as part of the ICJIA grant
- 11/5/21 meeting with Bail Project on their PreBond assessment initiative
- 11/9/21 meeting with Health and Hospital and Family Guidance to assist individuals released from custody to obtain MOUD treatment on 11/9/21.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

The CRC is uniquely positioned to assist vulnerable populations who are facing struggles of any kind. Launched during the global COVID-19 pandemic, the CRC hit the ground running working with vulnerable individuals to address concerns relating to housing, employment, healthcare and much more. The CRC

also works with victims of crime and domestic violence as well as recently released jail detainees and those individuals on CCDOC electronic monitoring. To our knowledge, there is no other entity in Cook County that is set up to be a comprehensive information hub to link vulnerable individuals in need to the correct services available. Regarding impact, the CRC started in September of 2020 and although it is still early to be assessing program outcomes, weekly call reports produced by the CRC reflect that hundreds of outreach calls are made each week to individuals, many of which are linked to services. In time, as the CRC grows, we hope to provide more compelling evidence of the need and effectiveness of the CRC when it comes to connecting vulnerable populations of Cook County to available services in their community.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The costs associated with the CRC are primarily related to staff time. There are 18 full-time CRC staff. The table below represents staff salaries and benefits for September – November 2021. Most CRC staff salaries are covered under the CCSO general budget, however currently there are 4 staff whose salaries and benefits are covered by the Coronavirus Supplemental grant.

Funding	# of CRC Staff	Salary + Benefits (9/1/21-11/30/21)
CCSO general operating budget	14	\$306,801
ICJIA Coronavirus Supplemental Grant	4	\$59,356
TOTAL	19	\$366,157

(12) Additional Information to Facilitate Committee's Understanding

Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity.

We have no additional information to add at this time.

(13) Opportunities for Growth & Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity's behavioral health care programs.

Setting aside calls to the CRC from the general public, all of the linkages and referrals the CRC passes on are to individuals who have involvement with the Cook County Sheriff's Office. The CRC, as an entity of the CCSO, is the logical party to provide these links to community organizations and has a responsibility to those involved with CCSO to guide them to the service/assistance they need. The CRC should be the natural first stop for information for the CCSO-involved population. No other organization can fulfil this role as efficiently and effectively. As the CRC becomes more established and builds more relationships with community partners, we hope to be able to support stronger, healthier communities throughout Cook County.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

The CRC does refer individuals to the Cook County Health and Hospital System (CCHHS), however there is no guarantee that they will seek services there. Further, individuals who are taking medications while detained at the Cook County Jail are able to receive a prescription for a refill at Stroger or select Cook County Health clinics post-release.

Treatment Response Team (TRT)

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle.

Participants who are served by the Cook County Sheriff's Treatment Response Team (TRT) are typically identified by a Cook County Sheriff's police officer as an individual in need of mental health services or via citizen calls to the 911 call center. In the past 24 months ending <u>November 30, 2021</u>, TRT has referred a total of 488 clients.

See below for a breakdown of where TRT clients reside.

# of TRT Participants	Area of Residence
340	Unincorporated Cook County
4	15 th District
42	Other, Chicago
56	Other, Suburban Cook
40	Ford Heights
6	Other

(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served

The Cook County Sheriff's Office Treatment Response Team or TRT is a Co-Responder Virtual Assistance Program consisting of licensed social workers and clinicians who are developing innovative ways to deal with the underlying mental health issues that affect our citizens. The program offers our Sheriff's Police, and our county, with 24/7 access to on-staff, licensed social workers and clinicians to assist when mental-health related calls are made by citizens. This team is available via phone and tablet interaction, day or night, to assist the individual in need directly while also providing follow-up support when necessary. By utilizing a mental health clinician via tablet or phone, our Sheriff's Police are able to ease tensions on the scene and offer help, when needed. This immediate connection from the social worker deescalates the situation, gives the police on scene the necessary time to better understand the issue, and allows for the police to decide on the best course of action.

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

TRT is comprised of master level social workers and mental health professionals who are available 24 hours per day, 7 days per week. All TRT staff hold credentials as either a Licensed Social Worker (LSW), Licensed Professional Counselor (LPC), Certified Alcohol Drug Counselor (CADC), Licensed Clinical Social Worker (LCSW) or Licensed Clinical Professional Counselor (LCPC). TRT staff have over 50 years of combined experience serving vulnerable populations in Cook County. TRT staff positions are covered by the CCSO general operating budget. There is no overlap in funding.

(4) Key Performance Indicators

Key Performance Indicators	Timeframe	Outcomes
# of Referrals	9/1/2021-11/30/21	146
# of Referrals Engaged in Services	9/1/2021-11/30/21	146
# of Current Active Cases	9/1/2021-11/30/21	92

Key performance indicators measuring the results of the program

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where applicable.

The CCSO behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and continuity of care. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the TRT program has with community partners.

MOUs	MOU Expectations
Above and Beyond	CCSO and Above and Beyond to collaborate in order to provide
	substance abuse treatment service to TRT program participants.
Haymarket	CCSO and Haymarket to collaborate in order to provide substance
	abuse treatment service to TRT program participants.
Miles Square Health (U of I Health)	CCSO and Miles Square to collaborate in order to provide substance
	abuse treatment service to TRT program participants.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

TRT clients work with TRT clinicians in creating, implementing and completing treatment goals. Clients and their loved ones are included in the recovery process. Clients are provided with other tools and resources to avoid experiencing another crisis which might involve law enforcement. Clients are matched with community partners that provide the services identified between the client, TRT and existing medical

providers. TRT provides community outreach to known overdose "Hot Spots". Education includes Narcan/Naloxone training and harm reduction principles.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

TRT addresses the continuum of care by assessing with the client what service they are interested in receiving and what is the least restrictive level of care to achieve their treatment goals. Clients moved through different levels of care to address the different stages of recovery they are in. The TRT utilizes a bio-psycho-social model of intervention to provide the client with the most support possible.

(8) Best Practices

Information on the best practices in this type of programming

TRT follows the best practices and research from both the field of social work and law enforcement. The TRT is rooted in policy and procedure with diligent oversight and on-going training. The TRT is offered as a voluntary program for individuals and their loved ones who are experiencing mental duress, mental illness and/or substance abuse disorders. Clients sign a release of information and a consent to work with the TRT. The release and consent can be revoked at any time. TRT staff are provided with LCSW clinical supervision daily and monthly training on best practices.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable

In the last quarter (9/1/2021-11/30/2021), TRT met with the following partners to address the overdose epidemic and ongoing mental health crisis in Cook County:

- Haymarket Center
- Alexian Brothers
- Grand Prairie Services
- Lutheran Social Services of Illinois
- The Westside Opiate Task Force
- University of Illinois Health at Miles Square
- Cook County Health and Hospital System (CCHHS)
- Oaklawn Police Department

TRT also met with Chicago High Intensity Drug Trafficking Area (HIDTA) to review updates and possible grant opportunities.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as

it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

Although there are many social service agencies throughout Cook County who aim to address mental/behavioral health and substance use disorder, TRT is unique as it offers the Sheriff's police a direct internal resource to go to when they encounter individuals who may be of need of mental/behavioral health resources. This co-responder model has been successful at deescalating behavioral health related calls to police, providing support to individuals with mental/behavioral health needs, and referring individuals to appropriate community services when needed. TRT has even tracked that a large majority of their clients engage in services after referrals are given to them, which demonstrates that the follow up services that TRT is providing is linking individuals to the care that they need.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The major costs associated with TRT consist primarily of staff salaries. There are 10 full-time TRT staff. The table below represents staff salaries and benefits for September – November 2021. All TRT staff salaries are covered under the CCSO general operating budget. No new costs have incurred since the last quarterly report submission.

# of TRT Staff	Salary + Benefits (9/1/21-11/30/21)
10	\$224,041.55

(12) Additional Information to Facilitate Committee's Understanding

Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity.

As of January 2021, the TRT has expanded scope to include assisting Sheriff's Police Officers responding to both mental health and substance abuse calls. Starting June 2021, TRT began a partnership with Oaklawn Police Department to implement the tablet model and assist citizens in access to resources.

In November of 2021, TRT expanded their tablet program by partnering with the Blue Island Police Department to provide virtual assistance.

The work of the TRT has been highlighted in several media publications over the last quarter. See below for links to media hits.

- Fox 32 Chicago Suburban Chicago police departments now equipped with therapists when responding to calls <u>https://www.fox32chicago.com/news/suburban-chicago-police-departments-now-equipped-with-therapists-when-responding-to-calls</u>
- Chicago Tribune Barry White, the Chicken Lady and the long road home: How a Cook County sheriff's initiative reunited a missing man with his family

http://www.chicagotribune.com/news/ct-cook-county-sheriff-family-reunion-mental-health-20211201-adkitipkonhudftfn6b3lv3gca-story.html

(13) Opportunities for Growth and Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity's behavioral health care programs.

As our entire state moves to a more equitable approach to addressing mental and behavioral health emergencies, TRT is exploring ways to expand and grow their services. With the implementation of both the new national 9-8-8 suicide prevention and mental health crisis lifeline along with the passage of Community Engagement and Supportive Services Act (CESSA) in the state of Illinois, the CCSO and the TRT hopes to be at the forefront of guiding the state's response to mental health emergencies in Cook County. We envision that with both 9-8-8 and CESSA, opportunities will grow for mobile mental health crisis units and co-responder models like TRT as Illinois grows its capacity and expertise to respond to mental health emergencies. TRT hopes to not only expand their co-responder model but collaborate with other partners in the state on the 9-8-8 and CESSA implementation so that those in mental health crisis receive the appropriate care in the most efficient manner.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

TRT clients are given transportation benefits via UBER health transportation/travel vouchers for all treatment related appointments and referred to relevant providers which includes providers at the Cook County Health and Hospital System (CCHHS). These individuals are not engaged at the jail level, but rather in the community, thus they may not have received care from Cermak/Cook County Health as is more so the case with individuals detained.

Program	Unique Bookings	Unique Detainees
MHTC	593	588
Westcare/SMART	633	605
THRIVE	281	255
SOAR	251	250
SAVE - Jail Only	335	327
SAVE - Jail and Community	490	476

Zip	N	Percent
60623	21	6.42%
60628	19	5.81%
60624	19	5.81%
60621	18	5.50%
60629	17	5.20%
60620	16	4.89%
60617	10	4.59%
60644	15	4.59%
60636	13	4.28%
60651	14	4.28%
60619	12	3.36%
60637	10	3.06%
60639	9 7	2.75%
60643		2.14%
60625	6	1.83%
60649	6	1.83%
60632	5	1.53%
60612	5	1.53%
60608	5	1.53%
60638	4	1.22%
60653	4	1.22%
60618	4	1.22%
60652	3	0.92%
60640	3	0.92%
60645	3	0.92%
60615	3	0.92%
60804	3	0.92%
60647	3	0.92%
60426	3	0.92%
60627	3	0.92%
60626	3	0.92%
60609	3	0.92%
60634	3	0.92%
60616	3	0.92%
60473	2	0.61%
60466	2	0.61%
60409	2	0.61%
60642	2	0.61%
60438	1	0.31%
60064	1	0.31%
60120	1	0.31%
61107	1	0.31%
60803	1	0.31%
61920	1	0.31%
60429	1	0.31%
60068	1	0.31%

60607	1	0.31%
60446	1	0.31%
60103	1	0.31%
60648	1	0.31%
60659	1	0.31%
60641	1	0.31%
60655	1	0.31%
46407	1	0.31%
49841	1	0.31%
60527	1	0.31%
60085	1	0.31%
60000	1	0.31%
60660	1	0.31%
89081	1	0.31%
60406	1	0.31%
60458	1	0.31%
10456	1	0.31%
61109	1	0.31%
60605	1	0.31%
60514	1	0.31%
60402	1	0.31%
60202	1	0.31%
60501	1	0.31%
46526	1	0.31%
60610	1	0.31%
Unknown	8	2.45%
Total	327	100.00%

Zip	N	Percent
60623	3 31	6.51%
60624		
60628		
60651		
60620		
60629	23	4.83%
60621	L 23	4.83%
60644	1 21	4.41%
60619) 20	4.20%
60636	5 19	3.99%
60617	7 18	3.78%
60637	7 16	3.36%
60612	2 13	2.73%
60639) 11	2.31%
60632	2 10	2.10%
60649) 10	2.10%
60608	3 9	1.89%
60643	8 8	1.68%
60638	3 6	1.26%
60625	5 6	1.26%
60652	2 5	1.05%
60609) 5	1.05%
60618	3 5	1.05%
60616	5 4	0.84%
60653	3 4	0.84%
60634	4 4	0.84%
60615	5 4	0.84%
60645	5 3	0.63%
60640) 3	0.63%
60627	7 3	0.63%
60473	3 3	0.63%
60647	7 3	0.63%
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60804	1 3	0.63%
60626		
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60803		
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60409		
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60659		
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60458		
10456		
60025	5 1	0.21%

60514	1	0.21%
60402	1	0.21%
60085	-	0.21%
61109	-	0.21%
46526	-	0.21%
60415	1	0.21%
46407	1	0.21%
60527	1	0.21%
60077	1	0.21%
60607	1	0.21%
60064	1	0.21%
61107	1	0.21%
60827	1	0.21%
60438	1	0.21%
60254	1	0.21%
61920	1	0.21%
60446	1	0.21%
60430	1	0.21%
89081	1	0.21%
60000	1	0.21%
49841	1	0.21%
60648	1	0.21%
60622	1	0.21%
60103	1	0.21%
60068	1	0.21%
60613	1	0.21%
60202	1	0.21%
60610	1	0.21%
60120	1	0.21%
60406	1	0.21%
60606	1	0.21%
60605	1	0.21%
60655	1	0.21%
60429	1	0.21%
Unknown	18	3.78%
Total	476	100.00%

Zip	N	Percent
. 60624	4 33	5.61%
60651		
60644	21	3.57%
60623		
60621	19	3.23%
60637	/ 18	3.06%
60628	3 18	3.06%
60620) 17	2.89%
60649) 16	2.72%
60629) 15	2.55%
60619) 14	2.38%
60617	/ 12	2.04%
60411	10	1.70%
60653	3 9	1.53%
60636	5 9	1.53%
60639	9 9	1.53%
60609) 8	1.36%
60647	и 7	1.19%
60426	5 7	1.19%
60804	↓ 7	1.19%
60622	2 7	1.19%
60153	3 7	1.19%
60466	6 6	1.02%
60612	2 6	1.02%
60641	6	1.02%
60409	96	1.02%
60608	6 6	1.02%
60643	6 6	1.02%
60652	2 6	1.02%
60640) 6	1.02%
60419) 5	0.85%
60827	' 5	0.85%
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60634	l 5	0.85%
60625	5 4	0.68%
60443	8 4	0.68%
60155	5 4	0.68%
60627	7 4	0.68%
60803	3 4	0.68%
60473		
60462		
60613		
60600		
60402		
60104		
60610) 3	0.51%

60618	3	0.51%
60606	3	0.51%
60477	3	0.51%
60428	3	0.51%
60645	2	0.34%
60120	2	0.34%
60632	2	0.34%
60457	2	0.34%
60085	2	0.34%
60201	2	0.34%
60123	2	0.34%
60102	2	0.34%
60453	2	0.34%
60459	2	0.34%
60164	2	0.34%
60615	2	0.34%
60458	2	0.34%
60605	2	0.34%
60630	2	0.34%
60472	2	0.34%
60076	2	0.34%
46311	2	0.34%
60000	2	0.34%
85705	2	0.34%
60482	2	0.34%
60607	2	0.34%
60016	2	0.34%
60513	2	0.34%
60638	2	0.34%
38672	1	0.17%
60373	1	0.17%
46405	1	0.17%
60301	1	0.17%
46323	1	0.17%
60304	1	0.17%
60087	1	0.17%
60455	1	0.17%
60559	1	0.17%
60817	1	0.17%
60642	1	0.17%
62704	1	0.17%
53111	1	0.17%
60614	1	0.17%
60118	1	0.17%
60173	1	0.17%
60921	1	0.17%
60220	1	0.17%

60532	1	0.17%
60051	1	0.17%
61104	1	0.17%
60427	1	0.17%
60090	1	0.17%
60633	1	0.17%
61103	1	0.17%
72461	1	0.17%
60176	1	0.17%
85020	1	0.17%
60415	1	0.17%
52206	1	0.17%
60423	1	0.17%
60521	1	0.17%
61342	1	0.17%
60604	1	0.17%
60302	1	0.17%
60626	1	0.17%
60515	1	0.17%
60659	1	0.17%
60004	1	0.17%
46406	1	0.17%
60602	1	0.17%
60047	1	0.17%
60469	1	0.17%
60099	1	0.17%
46327	1	0.17%
60193	1	0.17%
60429	1	0.17%
60563	1	0.17%
60648	1	0.17%
60717	1	0.17%
46312	1	0.17%
60487	1	0.17%
60107	1	0.17%
60131	1	0.17%
60185	1	0.17%
60655	1	0.17%
60089	1	0.17%
60656	1	0.17%
60400	1	0.17%
30214	1	0.17%
60160	1	0.17%
60265	1	0.17%
60418	1	0.17%
60008	1	0.17%
60665	1	0.17%

46534	1	0.17%
60139	1	0.17%
60406	1	0.17%
60093	1	0.17%
60130	1	0.17%
60478	1	0.17%
60914	1	0.17%
60654	1	0.17%
77090	1	0.17%
60474	1	0.17%
60430	1	0.17%
60022	1	0.17%
80214	1	0.17%
60172	1	0.17%
60401	1	0.17%
49022	1	0.17%
Unknown	29	4.93%
Total	588	100.00%

Zip	N	Percent
. 60651	. 15	6.00%
60624		5.20%
60644		4.40%
60620		3.60%
60628		3.60%
60619		3.60%
60636		2.80%
60623		2.80%
60649		2.00%
60609		2.00%
60653		2.00%
60626		1.60%
60629		1.60%
60804		1.60%
60612		1.60%
60607		1.60%
60000		1.60%
60608		1.60%
60618		1.20%
60153		1.20%
60647		1.20%
60411		1.20%
60621		1.20%
60639		0.80%
60160		0.80%
60164		0.80%
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60176	2	0.80%
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60803	1	0.40%
60016	1	0.40%
60141	1	0.40%
60657	1	0.40%
60120	1	0.40%
60169	1	0.40%
60712	1	0.40%
60964	1	0.40%
60611	1	0.40%
60074	1	0.40%
60523	1	0.40%
60018	1	0.40%
60462	1	0.40%
60426	1	0.40%
60473	1	0.40%
60501	1	0.40%
60637	1	0.40%
60478	1	0.40%
60008	1	0.40%
60007	1	0.40%
60438	1	0.40%
60655	1	0.40%
60706	1	0.40%
60604	1	0.40%
60634	1	0.40%
60056	1	0.40%
60605	1	0.40%
60638	1	0.40%
60465	1	0.40%
60463	1	0.40%
60472	1	0.40%
60622	1	0.40%
60090	1	0.40%
60630	1	0.40%
60102	1	0.40%
60154	1	0.40%
60477	1	0.40%
60600	1	0.40%
Unknown	24	9.60%
Total	250	100.00%

Zip	N	Percent
60623	3 27	
60644	1 26	
60624	1 25	4.13%
60651		
60612		
60639) 15	2.48%
60628		2.48%
60619) 15	2.48%
60620) 12	1.98%
60621	L 11	1.82%
60636	5 11	1.82%
60653	3 9	1.49%
60608	3 9	1.49%
60607	7 8	1.32%
60629	8	1.32%
60626	5 8	1.32%
60641	L 7	1.16%
60625	5 7	1.16%
60640) 7	1.16%
60618	3 6	0.99%
60647	7 6	0.99%
60637	7 6	0.99%
60453	3 5	0.83%
60016	5 5	0.83%
60007	7 5	0.83%
60201	L 5	0.83%
60659) 5	0.83%
60455	5 5	0.83%
60638	3 5	0.83%
60609	9 5	0.83%
60600) 5	0.83%
60164	1 5	0.83%
60617		
60428	3 4	0.66%
60622		
60153	3 4	0.66%
60634		
60649		
60630		
60714		
60614		
60643		
60411		
60655		
60827		
60120) 3	0.50%

60459	3	0.50%
60053	3	0.50%
60160	3	0.50%
60202	3	0.50%
60632	3	0.50%
60534	3	0.50%
60657	3	0.50%
60074	3	0.50%
60615	3	0.50%
60004	3	0.50%
60077	3	0.50%
60462	3	0.50%
60056	3	0.50%
60000	3	0.50%
60406	3	0.50%
60169	3	0.50%
60090	3	0.50%
60652	3	0.50%
60458	2	0.33%
60446	2	0.33%
60131	2	0.33%
46311	2	0.33%
60804	2	0.33%
60443	2	0.33%
60176	2	0.33%
60415	2	0.33%
60133	2	0.33%
60656	2	0.33%
60402	2	0.33%
60473	2	0.33%
60803	2	0.33%
60076	2	0.33%
60642	2	0.33%
60162	2	0.33%
60104	2	0.33%
60660	2	0.33%
60107	2	0.33%
60068	2	0.33%
60409	2	0.33%
60805	2	0.33%
60712	2	0.33%
46323	2	0.33%
60139	1	0.17%
60664	1	0.17%
60018	1	0.17%
60067	1	0.17%
60501	1	0.17%
00001	т	U.1/70

60506	1	0.17%
60505	1	0.17%
60302	1	0.17%
60089	1	0.17%
60605	1	0.17%
60465	1	0.17%
60425	1	0.17%
60658	1	0.17%
60305	1	0.17%
60517	1	0.17%
60008	1	0.17%
53143	1	0.17%
60194	1	0.17%
60064	1	0.17%
60005	1	0.17%
60438	1	0.17%
46402	1	0.17%
60456	1	0.17%
46229	1	0.17%
60610	1	0.17%
60060	1	0.17%
60123	1	0.17%
60515	1	0.17%
60126	1	0.17%
60645	1	0.17%
60061	1	0.17%
60062	1	0.17%
60706	1	0.17%
46409	1	0.17%
60098	1	0.17%
60466	1	0.17%
60429	1	0.17%
60707	1	0.17%
60135	1	0.17%
60436	1	0.17%
60586	1	0.17%
53201	1	0.17%
61111	1	0.17%
54241	1	0.17%
60177	1	0.17%
61107	1	0.17%
60412	1	0.17%
60022	1	0.17%
62521	1	0.17%
60482	1	0.17%
60026	1	0.17%
60181	1	0.17%

62702	1	0.17%
60172	1	0.17%
60154	1	0.17%
46408	1	0.17%
60192	1	0.17%
60115	1	0.17%
60108	1	0.17%
60015	1	0.17%
60631	1	0.17%
60457	1	0.17%
Unknown	62	10.25%
Total	605	100.00%

Zip	N	Percent
60624		5.49%
60621	9	3.53%
60651	9	3.53%
60608	8	3.14%
60623	8	3.14%
60619		2.75%
60647	6	2.35%
60644		2.35%
60609	6	2.35%
60628		1.96%
60629		1.96%
60622		1.57%
60636	4	1.57%
60649		1.57%
60634		1.57%
60620		1.57%
60618		1.18%
60639		1.18%
60625	3	1.18%
60477		1.18%
60617	3	1.18%
60626		0.78%
60660	2	0.78%
60612	2	0.78%
60193		0.78%
60104		0.78%
60600		0.78%
60465	2	0.78%
60133	2	0.78%
60106	2	0.78%
60000		0.78%
60645	2	0.78%
60616	2	0.78%
60090	2	0.78%
60453	2	0.78%
60805	2	0.78%
60637	2	0.78%
60455	2	0.78%
60534	1	0.39%
60502	1	0.39%
60406	1	0.39%
62526		0.39%
53511		0.39%
54235	1	0.39%
60650	1	0.39%
77016		0.39%

60428	1	0.39%
60801	1	0.39%
60154	1	0.39%
60632	1	0.39%
60517	1	0.39%
60412	1	0.39%
60462	1	0.39%
60712	1	0.39%
60140	1	0.39%
47904	1	0.39%
60439	1	0.39%
60607	1	0.39%
60614	1	0.39%
60074	1	0.39%
60016	1	0.39%
60174	1	0.39%
60641	1	0.39%
60120	1	0.39%
60077	1	0.39%
60638	1	0.39%
60419	1	0.39%
60426	1	0.39%
85037	1	0.39%
60415	1	0.39%
60008	1	0.39%
53216	1	0.39%
60445	1	0.39%
60635	1	0.39%
60458	1	0.39%
60099	1	0.39%
60002	1	0.39%
60153	1	0.39%
60123	1	0.39%
60430	1	0.39%
60804	1	0.39%
61108	1	0.39%
60188	1	0.39%
60656	1	0.39%
60615	1	0.39%
60475	1	0.39%
60525	1	0.39%
60131	1	0.39%
60025	1	0.39%
60107	1	0.39%
60827	1	0.39%
60110	1	0.39%
60018	1	0.39%
00010	Ŧ	0.55/0

38119	1	0.39%
60164	1	0.39%
60613	1	0.39%
60069	1	0.39%
60139	1	0.39%
53210	1	0.39%
46405	1	0.39%
60630	1	0.39%
60627	1	0.39%
60432	1	0.39%
53206	1	0.39%
60605	1	0.39%
45417	1	0.39%
60448	1	0.39%
46327	1	0.39%
60659	1	0.39%
Unknown	32	12.55%
Total	255	100.00%

Last updated 12/09/2021

		In Cook County?
Zipcode	Zipcode name	(yes/no)
14094	Lockport, NY	No
20003	Washignton D.C	No
30294	Ellenwood, GA	No
30320	Atlanta, GA	No
46312	East Chicago, IN	No
46320	Hammond, IN	No
46323	Hammond, IN	No
46324	Hammond, IN	Yes
46327	Hammond, IN	No
46341	Hebron, IN	No
46342	Hobart, IN	No
46402	Gary, IN	No
46403	Portage, IN	No
46404	Gary, IN	No
46405	Lake Station, IN	No
46408	Gary, IN	No
46409	Gary, IN	No
46410	Honart, IN	No
50514	Armstrong, IA	No
53206	Milwaukee, WI	No
53214	Milwaukee, WI	No
53221	Milwaukee, WI	No
53402	Racine, WI	No
53406	Racine, WI	No
55109	St Paul, MN	No
60002	Antioch	No
60004	Arlington Heights	No
60005	Arlington Heights	Yes
60007	Elk Grove Village	Yes
60008	Rolling Meadows	Yes
60009	Elk Grove Village	Yes
60016	Des Plaines	Yes
60018	Des Plaines	Yes
60022	Glencoe	Yes
60025	Glenview	Yes
60026	Glenview	Yes
60029	Golf	Yes
60031	Gurnee	No
60043	Kenilworth	Yes
60053	Morton Grove	Yes
60056	Mount Prospect	Yes
60062	Northbrook	Yes

60064	North Chicago	No
60067	Palatine	Yes
60068	Park Ridge	Yes
	Prospect Heights	Yes
	Palatine	Yes
	Skokie	Yes
	Skokie	Yes
60083	Waukegan	No
60085	Waukegan	No
60087	Waukegan	No
60090	Wheeling	Yes
60091	Wilmette	Yes
60093	Winnetka	Yes
60096	Winthrop Harbor	No
	Addison	No
	Algonquin	No
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	Bartlett	No
	Bellwood	Yes
	Bensenville	No
60106	Bensenville	No
60115	Dekalb	No
60107	Streamwood	Yes
60116	Carol Stream	No
60120	Elgin	Yes
60123	Elgin	Yes
	Forest Park	Yes
	Franklin Park	Yes
	Hanover Park	Yes
	Glendale Heights	No
60141	-	Yes
	Lombard	No
	Maywood	Yes
60154	Westchester	Yes
60155	Broadview	Yes
60160	Melrose Park	Yes
60162	Hillside	Yes
60163	Berkeley	Yes
60164	Northlake	Yes
60165	Stone Park	Yes
60169	Hoffman Estates	Yes
	River Grove	Yes
	Roselle	No
	Schaumburg	Yes
	Schiller Park	Yes
	Villa Park	No
60188	Carol Stream	No
60192	Hoffman Estates	Yes

60193	Schaumburg	Yes
60194	Schaumburg	Yes
60195	Schaumburg	Yes
60201	Evanston	Yes
60202	Evanston	Yes
60203	Skokie	Yes
60207	Evanston	Yes
60301	Oak Park	Yes
60302	Oak Park	Yes
60304	Oak Park	Yes
60305	River Forest	Yes
60351	Carol Stream	No
60402	Berwyn	Yes
60403	Crest Hill	Yes
60405		Yes
60406	Blue Island	Yes
60408	Braidwood	No
60409	Calumet City	Yes
60411	Chicago Heights	Yes
60415	Chicago Ridge	Yes
60417	Crete	No
60419	Dolton	Yes
60422	Flossmoor	Yes
60423	Frankfort	No
60425	Glenwood	Yes
60426	Harvey	Yes
60428	Markham	Yes
60429	Hazel Crest	Yes
60430	Homewood	Yes
60432	Joliet	No
60433	Joliet	No
60435		No
60438	Lansing	Yes
60439	Lemont	Yes
60440	Bolingbrook/ Naperville	No
	Lockport	No
	Matteson	Yes
	Midlothian	Yes
60446	Romeoville	No
60449	Monee	No
	Oak Forest	Yes
	Oak Lawn	Yes
	Bridgeview	Yes
	Hometown	Yes
	Hickory Hills	Yes
60458	Justice	Yes

60459	Burbank	Yes
60461	Olympia Fields	Yes
60462	Orland Park	Yes
60463	Palos Heights	Yes
60464	Palos Park	Yes
60465	Palos Hills	Yes
60466	Park Forest	Yes
60467	Orland Park	Yes
60469	Posen	Yes
60471	Richton Park	Yes
60472	Robbins	Yes
60473	South Holland	Yes
60475	Steger	Yes
60476	Thornton	Yes
60477	Tinley Park	Yes
60478	Country Club Hills	Yes
60480	Willow Springs	Yes
60482	Worth	Yes
60484	University Park	Yes
60487	Tinley Park	Yes
60490	Bolingbrook/ Naperville	No
	Summit	Yes
	Aurora	No
	Aurora	No
60506	Aurora	No
	Brookfield	Yes
	Woodridge	No
	La Grange	Yes
60526	La Grange Park	Yes
60532		No
60534	•	No
	Romeoville	No
60545		No
	Riverside	Yes
	Western Springs	Yes
	Chicago	Yes
	Chicago	Yes
	Chicago	Yes
60604	Chicago	Yes
00004	chicago	105

60605 Chicago

60606 Chicago

60607 Chicago

60608 Chicago

60609 Chicago

60610 Chicago

60611 Chicago

Yes

Yes

Yes

Yes

Yes

Yes

Yes

60612 Chicago	Yes
60613 Chicago	Yes
60614 Chicago	Yes
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60615 Chicago	Yes
60616 Chicago	Yes
60617 Chicago	Yes
60618 Chicago	Yes
60619 Chicago	Yes
60620 Chicago	Yes
60621 Chicago	Yes
60622 Chicago	Yes
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60623 Chicago	Yes
60624 Chicago	Yes
60625 Chicago	Yes
60626 Chicago	Yes
60627 Chicago	Yes
60628 Chicago	Yes
60629 Chicago	Yes
60630 Chicago	Yes
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60631 Chicago	Yes
60632 Chicago	Yes
60633 Chicago	Yes
60634 Chicago	Yes
60635 Chicago	Yes
60636 Chicago	Yes
60637 Chicago	Yes
60638 Chicago	Yes
60639 Chicago	Yes
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60640 Chicago	
60641 Chicago	Yes
60642 Chicago	Yes
60643 Chicago	Yes
60644 Chicago	Yes
60645 Chicago	Yes
60646 Chicago	Yes
60647 Chicago	Yes
60649 Chicago	Yes
60651 Chicago	Yes
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60652 Chicago	Yes
60653 Chicago	Yes
60654 Chicago	Yes
60655 Chicago	Yes
60656 Chicago	Yes
60657 Chicago	Yes
60659 Chicago	Yes
60660 Chicago	Yes
60661 Chicago	Yes
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60678	Chicago	Yes
60685	Chicago	Yes
60705	Chicago	Yes
60706	Norridge	Yes
60707	Elmwood Park	Yes
60712	Lincolnwood	Yes
60714	Niles	Yes
60749	Chicago	Yes
60803	Alsip	Yes
60804	Cicero	Yes
60805	Evergreen Park	Yes
60807		N/A
60808		N/A
60824		N/A
60827	Riverdale	Yes
60901	Kankakee	No
61104	Rockford	No
61201	Rock Island	No
61455	Macomb	No
61704	Bloomington	No
61820	Champaign	No
61832	Danville	No
62521	Decatur	No
62701	Springfield	No
62702	Springfield	No
63136	St. Louis, MO	No
No Zip	N/A	N/A

#of Active CRC Clients (2022 Total)

Cook County district

 $\begin{array}{c} 1 \\ 0 \\ 2 \\ 0 \\ 3 \\ 1 \\ 3 \\ 0 \\ 0 \\ 1 \\ 0 \\ 0 \\ 1 \\ 1 \\ 1 \\ 8 \\ 0 \\ 0 \\ 0 \\ 0 \\ \end{array}$ 2 5 3 2 0 1 8 1 2 1 1 0

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