

**Monterey County Board of Supervisors
Referral Submittal Form**

Referral No. 2024.18
Assignment Date: 12/3/24
(Completed by CAO's Office)

SUBMITTAL - Completed by referring Board office and returned to CAO no later than noon on Thursday prior to Board meeting:

Date: 11/15/2024	Submitted By: Supervisor Luis Alejo	District #: 1
Referral Title: Identification of Funding/Timeline for Juvenile Hall Build Out; Update on Juvenile Facilities Service Provision		
Referral Purpose: To seek targeted grant funding and identify a timeline for the build out of the remaining space at the Juvenile Hall facility including vocational services, laundry, kitchen/dining, treatment, and related equipment space. Thereafter, review feasibility of Youth Center facility repurposing, as appropriate.		
Brief Referral Description (attach additional sheet as required): The County of Monterey invested in a new, modern Juvenile Hall facility at 1420 Natividad Road in Salinas. The County also operates the Youth Center facility located at 970 Circle Drive in Salinas.		
<p>While the Juvenile Hall was being built, the planned 30 bed high security housing unit and classrooms, laundry, kitchen, and dining facilities were de-scoped due to lack of funding. With the closure of the Division of Juvenile Justice (DJJ), effective July 1, 2021, a California Department of Corrections and Rehabilitation (CDCR) division, that previously provided treatment, education, and training for juvenile offenders, youth were rerouted to their county of origin. As a result, the County's Probation Department was tasked with coordination to ensure continuity of care was available at the Juvenile Hall and Youth Center, while addressing the safety needs of the minors.</p> <p>This referral aims to have staff actively seek and identify grant funding options to support the simultaneous build out of facilities to support housing, vocational, laundry, kitchen, dining, treatment, and related equipment for juveniles located at the Juvenile Hall and Youth Center facilities.</p> <p>In addition, this referral requests an evaluation of the possible relationship with Rancho Cielo and/or the Monterey County Office of Education to provide vocational training programs for incarcerated juveniles.</p> <p>Finally, as a long range proposal, this referral requests a review of options for Youth Center repurposing at a future date.</p>		
Classification - Implication		Mode of Response
<input type="checkbox"/> Ministerial / Minor <input type="checkbox"/> Land Use Policy <input checked="" type="checkbox"/> Social Policy <input checked="" type="checkbox"/> Budget Policy <input type="checkbox"/> Other: _____	<input type="checkbox"/> Memo <input checked="" type="checkbox"/> Board Report <input type="checkbox"/> Presentation	
	Requested Response Timeline	
	<input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input checked="" type="checkbox"/> Status reports until completed <input type="checkbox"/> Other: _____ <input type="checkbox"/> Specific Date: _____	

ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:

Department(s): Probation/PWFP	Referral Lead: Jose Ramirez/Randy Ishii	Board Date: 12/3/24
----------------------------------	--	------------------------

REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:

Department(s):	Referral Lead:	Date:
----------------	----------------	-------

ANALYSIS - Completed by Department and copied to Board Offices and CAO:

Department analysis of resources required/impact on existing department priorities to complete referral:

Analysis Completed By: _____ Date: _____	Department's Recommended Response Timeline
	<input type="checkbox"/> By requested date <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> Other/Specific Date: _____

REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:

Referral Response Date:	Board Item No.:	Referrals List Deletion:
-------------------------	-----------------	--------------------------

Note: Please cc Claudia Escalante and Karina Bokanovich on all CAO correspondence relating to referrals.

DRAFT