

Preview of Page 1 – Introduction

Preview of Draft CFCI 2021 Concept Recommendation Survey

THIS SURVEY IS CURRENTLY ONLY IN DRAFT FORM AND IS NOT ACCEPTING ANY SUBMISSIONS AT THIS TIME.

The Los Angeles County Care First and Community Investment (CFCI) initiative invests County funds in innovative projects that serve chronically under-resourced communities to address negative outcomes caused by racially driven criminal justice inequities and long term community economic disinvestment. These projects include direct community investments and alternatives to incarceration and are informed by the framework of the sequential intercept model.

In 2022, the CFCI Advisory Committee is charged with providing recommendations to the Los Angeles County Chief Executive Office (CEO) about how to allocate \$100,000,000 for Year 2 of CFCI. The final CFCI Year 2 Spending Plan will be presented by the CEO to the Board of Supervisors who will make the ultimate decision about how funding is allocated. Thereafter, specific grant or contract solicitation opportunities will be administered by the selected grant administrator.

This survey is designed to collect detailed concept recommendation for consideration by the CFCI Advisory Committee to be considered for the CFCI Year 2 Spending Plan. The Committee will review complete concept recommendations and prioritize them in accordance with the following criteria: _____.

Because the Committee's recommendations will focus on funding levels by priority area, this is not a request for specific proposals. Submission of this concept recommendation does not guarantee that your concept will be included in the spending plan.

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Page 2 – Contact Information

1. Concept Recommendation Title: _____
2. First and Last Name: _____
3. Agency / Affiliation: _____
4. Email Address: _____
5. Phone Number: _____

Page 3 – Background Information

6. Which of the following Alternatives to Incarceration Intercept Points apply to the project you are recommending? For more information about the Intercept Model, see: _____.
Please select all that apply.
- Intercept 00 – Healthy Community Supports & Infrastructure (Prevention)
 - Intercept 0 – Community Response & Intervention (Crisis Response)
 - Intercept 1 – Law Enforcement Contact Up to Arrest (Pre- or Post-Arrest Diversion)
 - Intercept 2 – Initial Detention & Filing Decision (Pre-Filing Diversion)
 - Intercept 3 – Jail Custody & Court Processes (Alternative Sentencing)
 - Intercept 4 – Reentry Planning & Release
 - Intercept 5 – Supervision in the Community
7. Which of the following CFCI Focus Areas applies to the project you are recommending?
Please select all that apply.
- Restorative Justice
 - Non-Carceral Pretrial Services
 - Community-Based Health Services
 - Non-Carceral Diversion and Reentry
 - Youth Development
 - Job Training and Employment
 - Access to Capital for Small, Minority-Owned Businesses
 - Rental Assistance, Housing Vouchers, and Supportive Housing Services
 - Capital Funding for Housing and Restorative Care Villages
8. *If Restorative Justice is selected:* Please indicate which of the following sub-categories applies to your recommended project:
- General restorative practices and conflict resolution
 - Restorative Justice processes focused on repairing specific harm
 - Transformative Justice processes focused on repairing social or structural harm
 - Other: _____
9. *If Non-Carceral Pretrial Services is selected:* Please indicate which of the following sub-categories applies to your recommended project:
- Alternatives to pretrial law enforcement supervision
 - Alternatives to electronic monitoring and e-incarceration
 - Alternatives to pretrial detention and incarceration
 - Other: _____
10. *If Community-Based Health Services is selected:* Please indicate which of the following sub-categories applies to your recommended project:
- Physical health services
 - Mental health services
 - Substance use disorder services
 - Other: _____

11. If Non-Carceral Diversion and Reentry is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Pre- or post-arrest diversion
 - Pre-filing diversion
 - Alternative sentencing
 - Reentry services
 - Other: _____
12. If Youth Development is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Physical youth centers or resource hubs for youth
 - Leadership development or civic engagement
 - Mentoring or peer support
 - Education or employment support
 - Support for social and emotional skills
 - Support for health and wellbeing
 - Support for environmental or cultural competence
 - Support for creative expression
 - Other: _____
13. If Job Training and Employment is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Job training
 - Job placement
 - Career planning or training
 - Ongoing professional development
 - Other: _____
14. If Access to Capital for Small, Minority-Owned Businesses is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Micro-grants
 - Subsidies
 - Support to meet grant requirements
 - Support with infrastructure needs
 - Other: _____
15. If Rental Assistance, Housing Vouchers, and Supportive Housing is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Rental assistance
 - Housing vouchers
 - Connection to short-term supportive housing
 - Connection to permanent supportive housing
 - Other: _____
16. If Capital Funding for Housing and Restorative Care Villages is selected: Please indicate which of the following sub-categories applies to your recommended project:
- Capital for housing

- Capital for restorative care villages
- Other: _____

Page 3 – Geography and Impact

17. Which of the following Los Angeles County Supervisorial Districts would the recommended project serve? Please select all that apply. For more information or for help identifying which Supervisorial Districts to select, please visit: <https://lacounty.gov/government/geography-statistics/zip-codes/>

- Supervisorial District 1
- Supervisorial District 2
- Supervisorial District 3
- Supervisorial District 4
- Supervisorial District 5

18. Which of the following Service Planning Areas (SPAs) would the recommended project serve? Please select all that apply. For more information or for help identifying which SPAs to select, please visit: <http://publichealth.lacounty.gov/chs/SPAMain/ServicePlanningAreas.htm>

- SPA 1
- SPA 2
- SPA 3
- SPA 4
- SPA 5
- SPA 6
- SPA 7
- SPA 8

19. Please share any specific communities your recommended project would serve within the Supervisorial Districts and SPAs selected above. Please indicate specific communities by name or zip code: _____

20. Please indicate whether the recommended project will serve one of the highest need zip codes identified by the Justice Equity Needs Index. Please find the list of highest need zip codes identified by the Justice Equity Needs Index (JENI) here:

- <https://www.advancementprojectca.org/tools-we-use/maps-and-data/justice-equity-need-index>
- Yes
 - No

21. *If yes:* Please list the specific zip code(s) served by your recommended project that are included in the JENI highest needs list and one or two sentences describing how the project would include these zip codes: _____

22. Equity and Impact Statement: Please describe in one or two sentences how the project will increase equity and improve the lives of residents of Los Angeles County. Include steps the project will take to incorporate the Justice Equity Needs Index (JENI), Justice Equity Services Index (JESI), and other equity and engagement tools to guide project design and implementation: _____

Page 4 – Detailed Description of Concept Recommendation

23. Please describe the need(s) that this recommendation addresses:

24. Please describe the recommended project in detail, including key activities and elements, how the recommendation would address the specific need described above, and considerations that should guide how it is implemented:

31. If yes: Please describe the culture-centered practices in your recommended project:

32. If no: Please describe how your recommended project would address the need to be culturally competent or culturally relevant to the populations it serves:

Page 5 – Recommended Budget

33. Please provide an annual cost for the project: _____

34. Please provide an overall cost for the project: _____

35. Please provide a high-level breakdown of costs, including the amount of one-time startup costs, ongoing personnel costs, and ongoing service delivery costs to community or other:

36. Please upload a simple recommended budget using the provided CFCI Concept Recommendation Budget Template. **[insert file upload]**

37. Please share the entity that you recommend administer the grant:

- Third Party Administrator
- County Department: _____

Thank you!

As a reminder, this is not a request for specific proposals. Submission of this concept recommendation does not guarantee that your concept will be included in the spending plan.