

# California Juvenile Justice Toolkit

## Methods for Development

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## About This Project Report

### *Social and Economic Well-Being Division*

RAND Social and Economic Well-Being is a division of the RAND Corporation that seeks to actively improve the health and social and economic well-being of populations and communities throughout the world. This research was conducted in the Justice Policy Program within RAND Social and Economic Well-Being. The program focuses on such topics as access to justice, policing, corrections, drug policy, and court system reform, as well as other policy concerns pertaining to public safety and criminal and civil justice. For more information, email [justicepolicy@rand.org](mailto:justicepolicy@rand.org).

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## Contents

About This Project Report.....	iii
Contents.....	iii
Background.....	1
Stakeholder Input.....	2
Literature Search Methods.....	5
Implementation Toolkit Methods .....	7
Toolkit Funding Sources Table Methods .....	11
Conclusion.....	13

## Background

California Senate Bill (SB) 823 aims to reduce youth incarceration by transitioning the jurisdiction of youth who would have previously been sent to the California Department of Corrections and Rehabilitation (CDCR), Division of Juvenile Justice, to county level probation departments. Closure began with ceasing new intakes on July 1, 2021. The bill offers a critical opportunity to increase use of evidence-based and emerging practices and programs (EEPPs) in local communities for youth up to the age of 25 (this includes transition-age adults) who have engaged in illegal behaviors. The transition also has implications for the continuum of prevention and intervention services provided locally, not just for services offered to youth who were remanded to DJJ at the time. In light of SB 823, the Council on Criminal Justice and Behavioral Health (CCJBH) commissioned the development of a toolkit to assist counties in identifying and implementing the necessary services to justice involved youth. Major efforts are currently underway to identify EEPPs that high-quality research has shown can improve youth outcomes while reducing recidivism and detention. Yet identification of EEPPs does not guarantee their successful implementation, so a more tailored approach is needed for SB 823 to achieve its potential impact in all 58 counties of California. The selection of EEPPs well-suited to the settings and populations of interest is a necessary precondition for successful implementation. RAND created the CA Juvenile Justice Toolkit to support the objectives of SB 823.

The CA Juvenile Justice Toolkit is a collection of the research evidence available for juvenile justice practices and programs. Literature search plans were created allowing for comprehensive coverage of EEPPs to help counties cover all levels of care (e.g., school-based, clinic-based, home/community-based, residential, inpatient) and all youth needs. For each EEPP identified, additional searches were conducted to gather information useful for EEPP implementation, such as training requirements, available implementation support resources, and cost and funding information. All information is provided in a searchable, web-based toolkit created using Tableau software, which will be made available to the public through state agency websites upon completion. The additional details provided in this report will be most useful to those interested in detailed discussion of the relevant research methods, especially when those details can inform understanding of the toolkit's strengths and limitations.

This brief report describes the methods used to create the toolkit. This is not a user manual for the toolkit; user instructions are provided within the toolkit itself.

## Stakeholder Input

Stakeholder input was included as foundational for the project and was incorporated for all deliverables. Specifically, we conducted 10 expert interviews at the beginning of the project, and formed two Community Advisory Boards (CAB)s that provided input throughout the contract period. All activities were approved by RAND's Human Subjects Protection Committee. Expert interview and CAB activities are described below.

### *Expert Interviews*

We identified key EEPP implementation and sustainment issues from the outset of the project by conducting a series of interviews with experts in EEPPs for youth involved in the juvenile system or at risk of involvement. We prioritized interviews with experts who had expertise in the California juvenile justice system specifically. Interviewees were identified from our networks and the recommendations of our state partners, authors of relevant reports and research publications, and the suggestions of initial interviewees. In total, the first author completed ten 30-minute interviews with experts in intervention development and testing, EEPP training and implementation, the juvenile legal system, and policy/system reform. Interview notes were synthesized by the first author using rapid content analysis, identifying the following key themes.

#### Need for Services

- Justice-involved youth are entitled to services that address their needs comprehensively: poverty, mental health and trauma, substance use, trafficking, education, medical, legal, etc.
- Responses to youth who break the law must be developmentally appropriate (“treat kids as kids”), least restrictive option, and focus on family reunification.
- The state needs an evidence-based system of care across the lifespan, and protocols to assign youth to the right level of care.
- The state Division of Juvenile Justice incarceration system was perceived to be harmful and should not be replicated at the county level post-SB 823 by expanding congregate care (e.g., juvenile halls).
- Any contact with the justice system can harm youth, so emphasize deflection or diversion to community-based, family-engaged services that youth and families trust.

#### Considerations for Implementation

- There is considerable variation between state counties in terms of resources, systems, culture, etc. – and certain high-resource counties are over-represented in discussions.
- Implementation science is useful; talk about phases and determinants of implementation without being too jargony.

- Requests for counties to change their practices must be paired with both resources/support and requirements (i.e., carrots and sticks).
- Matching EEPPs to local needs and capacities, ensuring quality of delivery (training, fidelity monitoring, evaluation), funding/sustainability.
- Counties also need to consider their current local programs and associated evidence.
- Incorporate lived experience expertise at every project phase; treat youth and families as team members and pay them commensurate with their time and contributions.
- Implementation plans must address how the experiences of marginalized groups are criminalized (e.g., school-to-prison pipelines).
- Need to invest in communities and public safety alongside EEPPs (also address rampant misinformation about crime statistics).

### Next Steps for the Toolkit

- The toolkit should be linked to existing state resources to support implementation: OYCR and county committees, State Advisory Council of Juvenile Justice and Delinquency Prevention, CA State Association of Counties, Chief Probation Officers of CA, CDSS (implementing 10 EEPPs statewide for Families First Prevention Services Act), CA Institute for Behavioral Health Support.
- The toolkit should be as practical as possible; implementation of EEPPs is more challenging than identifying them, and static lists of EEPPs become obsolete.
- Have an expansive definition of evidence (research, evaluation, lived experience, etc.) to identify EEPPs that are responsive to community needs.

### Limitations of Existing Resources

- Websites such as Blueprints and Results First were recommended as potential sources of evidence; the latter summarizes a range of compendiums and was previously used by CA counties in adult probation. However, note that these websites do not do a good job of addressing cultural responsiveness or diversity; information about which EEPPs can be used with specific populations is difficult to find, and equity issues are not always prioritized by EEPP researchers.

### *Community Advisory Boards*

At the beginning of the project we formed two CABs to guide our work on three deliverables: (1) a summary of evidence for EEPPs, (2) a summary of practical information on implementation for each EEPP, and (3) a training and technical assistance plan. The first two deliverables were ultimately integrated to produce the CA Juvenile Justice Toolkit, and the third deliverable is a separate document that will be used to support a statewide toolkit roll-out.

The Lived Experience (LE) CAB consisted of eight individuals with lived experience of California's juvenile justice system. The LE CAB was recruited via an open call distributed through CCJBH's network of community engaged organizations and individuals. CAB members reflected diversity in age, race, gender, and geography, hailing from Modesto, Fresno, Salinas, Los Angeles, Humboldt, and San Diego. Many currently work with justice involved individuals. LE CAB members received a stipend of \$250 per deliverable, \$750 total.

The System Representative (SR) CAB consisted of 15 individuals reflecting systems in or interacting with the California juvenile justice system. RAND worked with CCJBH and partners to identify systems and organizations that should be included, as well as individuals from those organizations. Once identified, each CAB member was individually invited. If an invitee did not respond or declined (due to bandwidth or for any reason), we worked with CCJBH/the originally invited individual to identify another candidate. SR CAB members represented county and state departments of corrections and rehabilitation, chief probation officers, child services, superior courts, public health, behavioral health, developmental services, substance use services, health services, California tribes, and education/colleges.

Each CAB met every other month for an hour from October 2022 – February 2024 on Microsoft Teams. Meetings were facilitated by RAND staff and consisted of introductions (in the first few meetings and any meetings with a new member), a discussion of CAB values (establishing values as a group and revisiting each meeting), an update on project activities from the RAND team, and an in-depth discussion about current activities, guided by prepared questions. In months where there were no meetings, RAND staff shared deliverables or other materials with CAB members as preparation for meetings or with specific questions requested by email or phone, if CAB members preferred to call directly or set up a one-on-one meeting.

In the first few meetings, RAND asked CAB members if they would feel comfortable with having CCJBH participate in CAB meetings (with the caveat that they could say no and RAND would not divulge specific comments about this topic). SR CAB members agreed and LE CAB members agreed conditionally, expressing that it was okay so long as they had time at the end of the meeting for the CCJBH representative to leave the call, in case CAB members wanted to express anything differently. LE CAB members were actively consented about CCJBH's participation for the first few meetings, and then consented more broadly (i.e. they were okay with having CCJBH participate going forward and would let us know if they preferred they not attend at a later date.)

CAB members were also asked if they would like to have some CAB meeting together as a group. Both CABs expressed interest in this for two specific meetings: when we started the second deliverable, so all could hear and discuss the new deliverable at the same time; and at the last meeting when discussing the Training and Technical Assistance (TTA) Plan and plans for going forward.

CAB input was incorporated for every deliverable, including variables, content, language, and format of the compendium and toolkit. The TTA plan was developed using CAB member

input that was collected throughout the project period. Both CABs gave highly insightful feedback and advocated for community-based solutions and continued guidance from impacted persons. While the CABs did have unique input based on their perspectives within the system, such as the centrality of Probation's role in the implementation of the toolkit, overall the groups were well aligned. We were able to share each groups perspectives with the other and find common ground on all input.

Each of the toolkit methods described below were developed over the course of multiple CAB meetings, such that we were able to receive guidance from the CABs about development of each step, present proposed methods based on input, receive and implement feedback, send draft products to CAB members and receive their feedback, and revise according to feedback received.

## Literature Search Methods

We began by developing search terms, informed by the external expert interviews described above. We also identified three content experts internal to RAND who helped to develop the search terms for each of their content areas. We then worked with a RAND librarian to develop and pilot a systematic literature search. The strategy consisted of search strings using the identified search terms to query academic and grey literature from January 2000 – June 2022. Search criteria also included inclusion and exclusion criteria delimiting the scope of the review.

We started with 5,933 articles. Team members simultaneously screened a subset of article titles and abstracts to establish a uniform approach to screening, then divided the remaining articles for screening. After a review of the relevance of the titles and abstracts of the articles, we were left with 851 for full-text review. Of these, 411 articles met our inclusion criteria, which represented 234 programs and practices. Programs refer to structured set of activities designed to achieve specific goals or outcomes, while a practice refers to specific actions or methods that are routinely applied in various contexts.

The team developed a standardized data extraction template in an Excel spreadsheet, where each row included unique sources and columns included the criteria for extraction (including characteristics of the program/practice, service recipients, research design/quality (informs confidence in findings), results (clinical and economic impact), and other considerations (unique details, qualitative results).

For each study, the following variables were extracted:

- *Program or practice being evaluated:* The name of the program or practice.
- *Type of intervention:* Individual intervention, family intervention, group intervention, residential/milieu care, multimodal, medication, legal intervention, other



- *Settings:* Outpatient, day treatment center, residential treatment center, inpatient/hospital, juvenile justice office, youth detention center, home, foster home, group home, school, community setting, other
- *Provider discipline/role:* Mental health, substance use, juvenile justice, child welfare, education, early childhood, military, medical, public health, nursing, community-based organization, multidisciplinary team
- *Provider level of education:* Professional/doctoral, Master's, Graduate student, Bachelor's, Associate's, high school/GED, less than high school, multidisciplinary team
- *Comparison condition(s), if any:* no intervention, waitlist, attention placebo, medication placebo, services as usual, alternative intervention of interest, other
- *Sample size:* total and (when relevant) for each intervention condition
- *Youth age:* Average, minimum, maximum
- *Youth gender:* Boys, Girls, Non-Binary or Gender Diverse
- *Youth race/ethnicity:* Black, Latino/a/x or Hispanic, White, Asian or Pacific Islander, Indigenous American or Alaskan Native, Multiracial
- *Youth languages spoken:* English, Spanish, Other
- *Family income or SES level:* Low income if  $\geq 25\%$  of the sample from low-income families,
- *Problem severity:* Justice Involvement Level: Minimal or not specified, Initial only (deflection or diversion population), Moderate involvement (probation population), Serious involvement (SB 823 realignment population)
- *Location of study:* California, other West Coast or Southwestern state, other U.S. state, international
- *Involvement of intervention developers:* Yes/No
- *Assignment to conditions:* Randomized design, matched design, nonrandom/nonmatched design
- *Intent-to-treat analysis:* Whether all cases assigned to an intervention condition were included in outcome analyses for that condition
- *Statistical adjustments for bias:* Analyses include adjustment for pretreatment differences (when relevant), study-wide error rate when conducting multiple comparisons, and effects of attrition (when  $< 80\%$  of sample retained for outcome measures)

In addition, the following information was collected for each outcome measure within a study:

- *Youth outcomes that showed improvement in program/practice:*
  - Justice system outcome (arrest, incarceration)
  - Violent behavior

- Problematic sexual behavior
- Other disruptive behavior problems
- Substance use
- Other
- *Timepoint measure collected*: months since intervention assignment/completion (specify which used)
- *Sample size for measure*: total and (when relevant) for each intervention condition
- *Effect size or clinical/practical significance information*: note metric used, and whether the comparison is between-group or within-group
- *Masking*: Whether measure rater/informant was unaware of intervention condition assignment
- *Any outcomes that showed differences by demographic characteristics*: note the outcome and which group(s) showed differences
- *Any non-significant or negative/harmful outcomes*
- *Any outcomes for which results were not reported (selective reporting)*

As part of the process for synthesizing information about a given program or practice across all available studies, we checked to see if the program/practice was listed in the Results First Clearinghouse Database<sup>1</sup> and reviewed the entry on that website when available. Results First compiles information on the effectiveness of social policy programs from nine national clearinghouses of research evidence. It clearly distinguishes each program using a rating system on whether the program has an overall negative impact to positive impact, which we checked against our own assessment of the program or practice's evidence base. If additional research studies were cited in Results First that had not been found in our literature review, we also reviewed them and incorporated additional details in our overall program/practice summary.

## Implementation Toolkit Methods

The next step was to supplement the information collected from the literature review with information related to key strategies for supporting EEPP implementation. We only conducted these searches for programs and practices classified as Evidence-Based, Emerging, or Exploratory (i.e., some type of EEPP designation that would recommend their implementation).<sup>2</sup>

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<sup>1</sup> <https://evidence2impact.psu.edu/what-we-do/research-translation-platform/results-first-resources/clearing-house-database/>

<sup>2</sup> These criteria are summarized in the Definitions tab of the toolkit (Program/Practice Characteristics > Evidence Base). There is a general description under "Level of Evidence" and then specific requirements are listed for each level designation.

## *Steps for Searching*

First, we checked to see if the program/practice identified in the compendium is in the Results First Clearinghouse Database and reviewed the entry on the website, as it often linked to comprehensive information about program/practice implementation.

Second, we searched for websites<sup>3</sup> that describe the program/practice and its implementation. Examples include: The California Evidence-Based Clearinghouse for Child Welfare Program Registry, Institute of Education Sciences (IES) What Works Clearinghouse (WWC), Blueprints for Healthy Youth Development, National Institute of Justice's CrimeSolutions, and Social Programs That Work. However, we experienced more barriers obtaining public implementation information for "Emerging" and "Exploratory" programs/practices on these websites, as compared to "Evidence-Based" programs/practices. Therefore, we developed some additional search strategies to find as much accurate implementation information as possible.

- Use details from the article(s) we reviewed (e.g., developer names, institutional affiliations, etc.) to confirm the correct website is being used.
- Check if the articles are listed or referenced on the website.
- Review the original articles to see if they include a reference to implementation materials, manual in an appendix, etc.

When the program/practice was not available in Results First or the standard sources described above, we conducted a Google search instead. The search terms we used included:

- How to implement [program/practice]
- Training on/for [program/practice]
- Does [program/practice] have a manual?
- Books on/about [program/practice]
- Who created/developed [program/practice]?
- How much does [program/practice] cost to implement?
- How much does [program/practice] cost to deliver?
- Is [program/practice] cost-effective?

On any website used to gather information (including the examples mentioned above), we noted the date(s) that the program/practice information was last updated. When information was conflicting, we used the most recent/current details unless there was a compelling reason why the older information would be more accurate. If we were unable to find certain implementation information, we marked the entry as "Not found." If the implementation information was not relevant to a certain program/practice (e.g., training information for medications), then we marked the entry as "N/A" (not applicable).

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<sup>3</sup> These websites typically had not published any implementation information pertaining to specific medications (e.g., risperidone) or programs without a formal name (e.g., sand play therapy).

Additional searches were conducted to find a list of individuals or organizations that have successfully completed implementation of the program/practice in California. Information recorded, if available, are the website link to the resource; any notes on how to access the resource; and the number of individuals or organizations listed in California.

For programs/practices with missing training information, we sent follow-up emails to the developers (discussed in the “Finalizing Implementation Toolkit” section below), requesting those details. If we found that there were multiple organizations (i.e., universities, private companies, etc.) that offered training on the program/practice, and the training costs vary across each of the organizations, we would try to determine which organization is most closely affiliated with the program/practice’s original purveyor. For example, if a therapy intervention was developed by two university professors, and training is offered by both (a) the university and (b) an online platform in the psychology space, we completed the spreadsheet columns with details pertaining to the training offered by the university, since this is where the intervention was founded.

For the implementation toolkit, we recorded information for the following categories if available and/or applicable:

- Program or practice name
- Other program/practice characteristics
  - Duration of intervention
  - Caregiver participation required? (Y/N)
  - Program developer/owner
  - Provider minimum level of education
  - Languages program can be delivered in
- Purveyor/training organization
  - Training organization name
  - Organization website
  - Contact name
  - Phone number
  - Email address
- Implementation supports available?
  - Training available? (Y/N)
    - Training type/location
    - Number of training days/hours
  - Manual? (Y/N/not found/N/A)
    - Notes about the manual(s)
    - Manual link (if applicable)
    - Manual citation (if applicable)

- (If no manual available) Research article describing the program/practice
- Additional needs for implementation (e.g., books, videos, forms, etc.)
  - Links: Additional Needs for Implementation (e.g., books, videos, forms, etc.)?
- Supervision/consultation?
- Train-the-trainer model?
- Certification?
- Fidelity monitoring/evaluation
  - Links: Fidelity Monitoring/Evaluation?
- Other (e.g., readiness assessment, booster training, outcome monitoring)
  - Links: Other (e.g., readiness assessment, booster training, outcome monitoring)?
- Resources for alternate modes of delivery
  - Videoconference?
  - Telephone?
  - Home-based?
  - Link(s) to specific trainings/resources for a mode of delivery (if available)
    - Links: Link(s) to Specific Trainings/Resources for a Mode of Delivery (if available)
- Implementation costs
  - Start-up costs
  - Intervention implementation costs
  - Implementation support and fidelity monitoring costs
  - Other cost considerations
  - Year 1 cost \*EXAMPLE\*
  - Economic evaluations (e.g., cost-benefit, cost-effectiveness, cost analysis)
  - Link/citation to economical evaluation (if applicable)
- CA Implementation information
  - Number of CA Sites/Providers
  - Link to List of Sites/Providers
  - Notes on How to Access List

### *Finalizing Implementation Toolkit*

For finalizing the implementation toolkit, we double checked certain information that was limited to make sure there weren't additional details to report and cleaned each entry for all programs/practices. Some examples include:

- Adding links or citations to implementation resources that were mentioned in an entry.
- Clarifying information.
- Simplifying language.
- Removing unnecessary or redundant information.
- Moving information to another category or entry.
- Writing "in one study" if the information only came from the original article.

- Replacing “parent” with “caregiver” when applicable.
- Removing all titles from contact names.
- Only including the original article if there is no link to the manual or manual citation.
- Replacing “N/A” with “Not found” when needed.

We had more specific edits for the training information, contact information, economic evaluations, medication program entries, and out-of-date program entries.

- For the training information, we followed up with each program contact by email on 11/14, 12/4, and 12/11 to see if they had training available. If we received a response, we updated the information. If we did not receive a response by 12/15, the “Training available?” entry was changed to “Not found.”
- We searched Google to cross-reference the “Contact name,” “Phone Number,” and “Email Address” for all program/practice entries to ensure the most up-to-date information was provided.
- For economic evaluations, we only included studies that had a comparison group and cost-effectiveness estimates to report.
- For medications, we used “N/A” for most categories. The following categories were the only entries that were not automatically “N/A” by default: “Duration of intervention,” “Caregiver participation required?,” “Program Developer/Owner,” “Provider minimum level of education,” “Video-conference? (Y/N),” “Telephone? (Y/N),” “Home-based? (Y/N),” “Economic evaluations (e.g., cost-benefit, cost-effectiveness, cost analysis),” “Link/citation to economic evaluation (if applicable),” “Number of CA sites/providers,” “Link to list of sites/providers,” and “Notes on how to access list.”
- For out-of-date program information, we scrubbed the entire entry to ensure the most up-to-date information was provided. We did this for First Step to Success (FSS) and Motivational Enhancement Therapy and Cognitive Behavioral Therapy for Adolescent Cannabis Users and Other Substance Users (MET/CBT).

## Toolkit Funding Sources Table Methods

We decided to provide general guidance on funding sources, rather than linking this information to specific EEPPs (as part of the Implementation Toolkit), because funding sources are rarely specific to named programs/practices. We identified funding sources using several strategies. First, we searched the California Grants Portal (<https://www.grants.ca.gov/>) for forecasted, active, and closed grants using the following search terms: “juvenile justice,” “juvenile prevention,” “youth justice,” and “youth prevention.” We also searched [youth.gov](https://www.youth.gov) using the “Juvenile Justice” filter to identify youth-focused federal grants. In addition to these searches, we included grants and organizations known to the RAND research team, as well as additional funding sources suggested by CCJBH, OYCR, and CAB members. Finally, a snowball

sampling strategy was used in which we identified additional grants and funding organizations through the websites of the funding sources in the original search.

We applied the following inclusion criteria for funding sources: (1) could include state (California) government organizations, federal government organizations, or foundations/organizations; (2) funds juvenile prevention programs or services, including those aimed at improving outcomes for justice-involved youth and youth at risk of justice system involvement, delinquency prevention programs, substance abuse prevention programs, and youth mental health programs; (3) funds programs federally or statewide in California; and (4) is not a one-time grant opportunity. When organizations offered only one relevant grant, the grant was included in the table. When organizations or agencies offered multiple grants, the organization was listed as the funding source, as individual grant programs often change from year to year. However, relevant formula grants were included, as these would be expected to be more consistent over time.

Our search resulted in a total of 36 examples of funding sources/grants. These include ten federal grants/funding agencies, five foundations/organizations, 19 California state grants/funding agencies, and two combined state/federal funding sources. While these are representative of the types of sources that can be used to fund programs in the Juvenile Justice Compendium and Toolkit, they are not exhaustive, given the wide range of programs and practices included and the resulting range of possible funding sources.

For each grant we provide a summary that gives an overview of the grant or organization, as well as the target population when applicable. We also provide detailed information on the grant. To extract this information, we reviewed the funding source website, as well as the most recent request for proposals/grant guidelines when available. We included the following information for each grant (as available):

- Type: federal, state (California), foundation, organization
- Applicant: description of which entities can apply to receive this funding option and how it is allocated
- Funding amount: most current information available about the amount of funding available through this funding option
- Programs funded: description of the types of programs that typically receive funds through this funding option
- Other Requirements: Other information about requirements to apply for and/or receive this funding option
- Funding Option Links: Links to web pages that provide publicly available information about the funding option

## Conclusion

The toolkit includes detailed information about Evidence-Based, Emerging and Exploratory Programs and Practices (EEPP) for youth currently involved in the juvenile justice system, and for those who may be diverted from system involvement. The toolkit is formatted in Tableau, which is user-friendly and easily searchable, and is available on the Council on Criminal Justice and Behavioral Health website. The toolkit has been designed to incorporate three basic steps. The first step is to search for programs and practices based on different program/practice characteristics, outcomes, or demographic information. The second step allows you to compare the results and details of all selected programs and practices. The third step allows the user to view all the details of any individual selected program or practice. For EEPPs, this includes practical information about implementing the program or practice.

The final stage of this project is to work with CCJBH to develop a plan for training and technical assistance (TTA) to support the use of the toolkit. The goal of the TTA plan is to prepare a contracted TTA provider in the next steps of the implementation of this work. This will include developing training materials, planning for orienting county representatives to the toolkit, and helping them select EEPPs that can feasibly be used to meet their service improvement goals. TTA can also be used to guide programs to promote the programs and practices found to be most effective. The technical assistance will provide ongoing support to counties to sustain EEPPs (includes addressing barriers and facilitators to using the EEPPs). During the TTA period, the toolkit will also be periodically updated with research and other implementation information. Finally, TTA work will include an evaluation component.