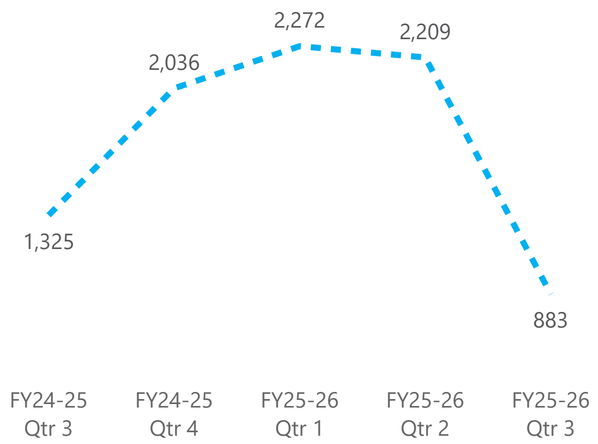
MCRT Clients Characteristics-

12K
Calls Responded To Since Program Start

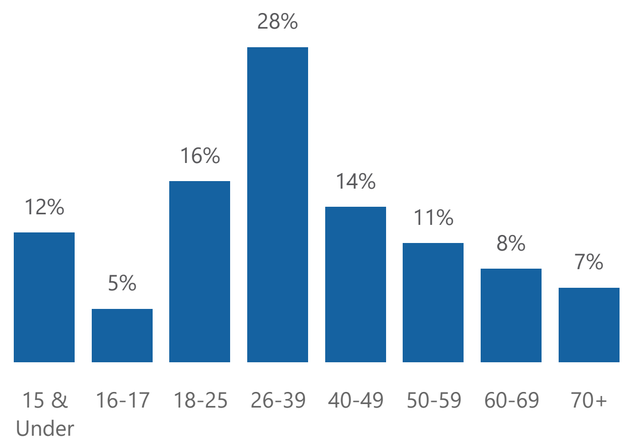
7,350
Unique Clients Since Program Start

Reporting Period
2/1/2025 to 1/31/2026

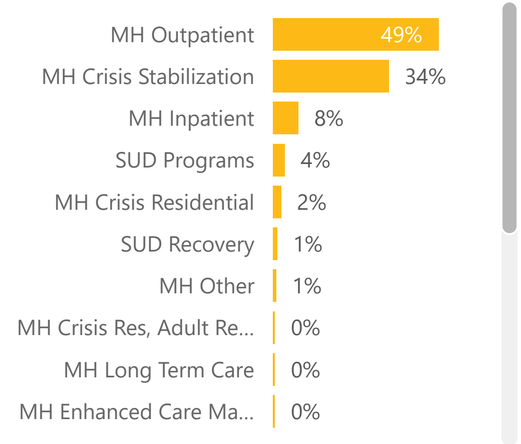
Unique Clients Served over Time



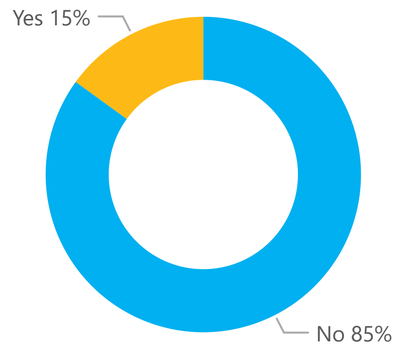
Age



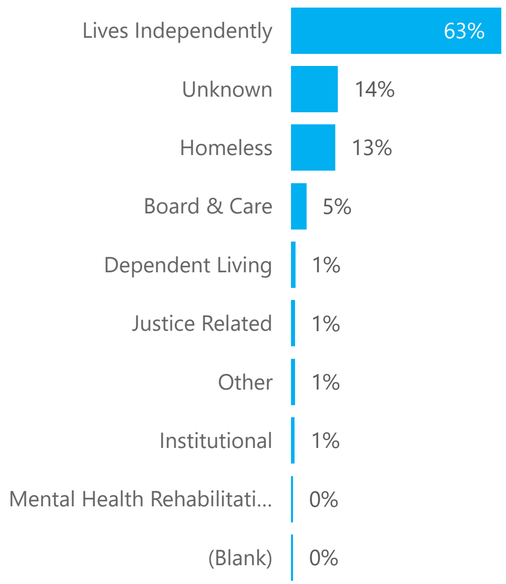
Connecting Programs**



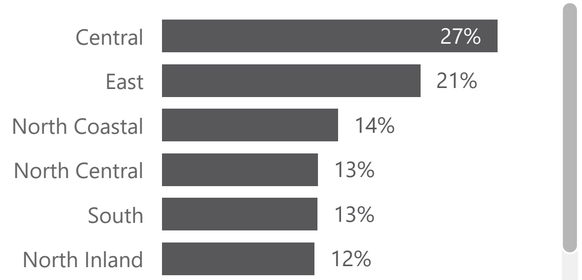
Previous Justice Involvement



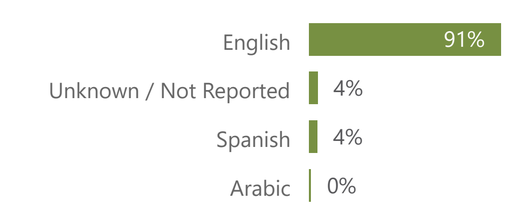
Housing Status



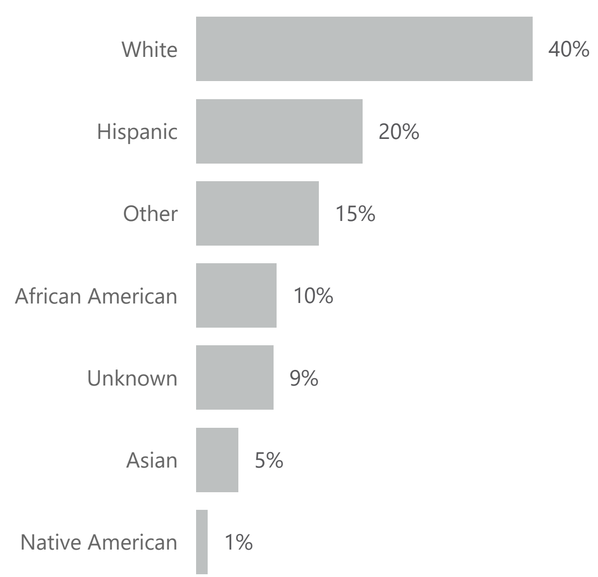
Region of Intervention (by Calls)



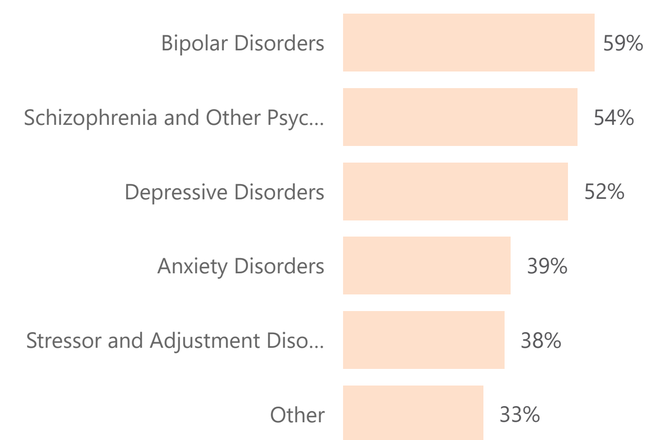
Preferred Language



Race/Ethnicity



Presenting Mental Health Diagnoses*



*MCRT does not diagnose clients. Diagnoses are determined when clients are either identified as existing BHS clients, or subsequently connected to the BHS system of care, and provided

Data from Assignments, Services, Diagnosis, and Demographics data extracts from Optum pre 9/1/2024, SmartCare data after. Call data from monthly program call log. **Program client first enrolled in within 60 days.

CBHDA 2025-26 Legislative Bill Matrix - Watch and Under Review

As of 2/20/2026

Bill Author	Description	Position
AB 46 Nguyen D	**Diversion. (Amended: 2/13/2026)** Current law authorizes a court to grant pretrial diversion to a defendant suffering from a mental disorder, on an accusatory pleading alleging the commission of a misdemeanor or felony offense, in order to allow the defendant to undergo mental health treatment. Current law provides that a defendant is eligible for diversion if they have been diagnosed with certain mental disorders and the court finds that the mental disorder was a significant factor in the commission of the charged offense, unless there is clear and convincing evidence that the disorder was not a motivating, causal, or contributing factor to the defendant's involvement in the alleged offense. Current law prohibits defendants charged with specified offenses, including murder, from being placed in this diversion program. This bill would require that the diagnosis with a mental disorder be within 5 years before the alleged offense. **Status:** 2/17/2026 - Withdrawn from committee. Re-referred to Com. on RLS.	2. Oppose AB 46 Sen. APPR Opposition Letter AB 46 Fact Sheet
AB 96 Jackson D	**Mental health services: peer support specialist certification. (Amended: 1/5/2026)** Current law establishes a schedule of benefits under the Medi-Cal program and provides for various services, including behavioral and mental health services that are rendered by Medi-Cal enrolled providers. Current law authorizes a county, or an agency representing the county, to develop a peer support specialist certification program, subject to department approval. Current law imposes specified requirements on applicants for certification as a peer support specialist, including that the applicant be at least 18 years of age and possess a high school diploma or equivalent degree. This bill would remove the requirement of possessing a high school diploma or equivalent degree from the requirements necessary for an applicant to receive certification. **Status:** 1/27/2026 - In Senate. Read first time. To Com. on RLS. for assignment.	1. CBHDA Sponsor AB 96 Fact Sheet AB 96 Coalition Letter to Asm. Health
AB 308 Ramos D	**Mobile crisis teams or units: procedures. (Amended: 4/24/2025)** Current law sets forth various provisions relating to mobile crisis teams, including with regard to behavioral health crisis services under the Miles Hall Lifeline and Suicide Prevention Act, involuntary commitment under the Lanterman-Petris-Short Act, and community-based mobile crisis intervention services through a Medi-Cal behavioral health delivery system under the Medi-Cal program. Current law requires a regional center, which serves individuals with intellectual or developmental disabilities, to implement an emergency response system for, among other groups, consumers who receive mobile crisis services. Current law requires a regional center and a county mental health agency to develop a general plan for crisis intervention for persons served by both systems. Current law establishes an advisory council for purposes of developing recommendations for improving outcomes of interactions between law enforcement and people with intellectual or developmental disabilities or with mental health conditions. This bill, in the case of a county that operates, or that contracts for the operation of, a mobile crisis team or unit, would authorize the county behavioral health director to develop procedures for the mobile crisis team or unit that include the handling of an emergency situation, or a crisis incident, involving an	8. Watch AB 308 Fact Sheet

	individual with an intellectual or developmental disability or an individual with a behavioral health condition. **Status:** 7/17/2025 - Failed Deadline pursuant to Rule 61(a)(10). (Last location was HUM. S. on 5/21/2025) (May be acted upon Jan 2026)	
AB 1267 Pellerin D	**Consolidated license and certification. (Amended: 4/24/2025)** Current law requires the State Department of Health Care Services to license and regulate adult alcohol or other drug recovery or treatment facilities that provide residential nonmedical services, as specified, and further requires the department to certify and regulate alcohol and other drug programs, as specified. Current law requires the department to charge various fees for a license or certification. This bill would, beginning January 1, 2027, require the department to offer a consolidated license and certification that allows the holder to operate more than one facility that requires a license, a program that requires a certification, or a combination thereof, that the holder operates within the same geographic location. This bill would define “same geographic location” as the physical location where clients are generally co-located, intermingle, reside, or receive services in one building or multiple buildings within 1,000 feet of each other in areas not zoned exclusively for residential use under local zoning ordinances. **Status:** 9/11/2025 - Failed Deadline pursuant to Rule 61(a)(14). (Last location was INACTIVE FILE on 9/8/2025)(May be acted upon Jan 2026)	8. Watch AB 1267 Fact Sheet
AB 1540 González, Mark D	**988 Suicide & Crisis Lifeline: LGBTQ+ youth. (Amended: 2/17/2026)** Current federal law, the National Suicide Hotline Designation Act of 2020, designates the 3-digit telephone number “988” as the universal number within the United States for the purpose of the national suicide prevention and mental health crisis hotline system operating through the 988 Suicide and Crisis Lifeline. The Miles Hall Lifeline and Suicide Prevention Act requires, among other things, the Office of Emergency Services (OES) to verify that technology that allows for transfers between 988 centers, as well as between 988 centers and 911 public safety answering points, is available to 988 centers and 911 public safety answering points throughout the state, to appoint a 988 system director, and to verify interoperability between and across 911 and 988. Current law establishes the 988 State Suicide and Behavioral Health Crisis Services Fund and provides that 988 surcharge revenue in the fund is available, upon appropriation by the Legislature, for purposes of the act. This bill would require OES to, no later than July 1, 2027, ensure that technology enabling transfers between 988 centers and a subnetwork of LGBTQ+ specialized youth suicide prevention service providers is available, as specified, and that callers may dial 988 and press “3” to be automatically routed to an LGBTQ+ suicide prevention specialist. The bill would also require OES to, no later than December 1, 2027, ensure that technologies enabling text or chat contacts between a caller and 988 centers or a specified subnetwork are available. **Status:** 2/18/2026 - Re-referred to Com. on HEALTH.	5. Support AB 1540 Fact Sheet
AB 1579 Ramos D	**Children’s Crisis Continuum Pilot Program. (Introduced: 1/13/2026)** Current law requires the State Department of Social Services, jointly with the State Department of Health Care Services (DHCS), to establish the Children’s Crisis Continuum Pilot Program. Current law requires the department, jointly with DHCS, to award grants under the pilot program and requires participating entities to develop a highly integrated continuum of care for the foster youth served in the pilot program. This bill would authorize a participating entity that does not have a crisis residential program as a part of its continuum of care, but that has included in its continuum of care a comparable type of treatment component designed to serve children and youth experiencing the highest level of acute behavioral health needs in a residential setting, to utilize all awarded grant funds, including any funds specifically designated to fund a crisis residential program, to fund any other component of the continuum of care. **Status:** 2/2/2026 - Referred to Com. on HUM. S. ***Hearing:*** *3/10/2026 1:30 p.m. - State Capitol, Room 437 ASSEMBLY HUMAN SERVICES, LEE, ALEX, Chair*	5. Support AB 1579 Fact Sheet

AB 1586 Ramos D	**Opioid overdose reversal medication: school resource officers. (Introduced: 1/14/2026)** Current law authorizes a school district, county office of education, and charter school to provide emergency naloxone hydrochloride or another opioid antagonist to school nurses and trained personnel who have volunteered, and authorizes school nurses and trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose. This bill, to be known as the School Safety and Opioid Overdose Prevention Act, would require a school district, county office of education, or charter school to ensure that (A) each school resource officer, as defined, while on duty at a school campus or school-sponsored activity, carries an opioid antagonist to provide emergency treatment to persons who are suffering, or reasonably believed to be suffering, from an opioid overdose and (B) each school resource officer, upon assignment to a schoolsite, and at least every 2 years thereafter, completes an opioid overdose recognition and response training, as specified. By imposing additional duties on local educational agencies, the bill would impose a state-mandated local program. The bill would prohibit a school resource officer who administers an opioid antagonist while assigned to a schoolsite, and their employing or contracting entity, from being held liable in a civil action or being subject to criminal prosecution for the school resource officer's acts or omissions, unless those acts or omissions constitute gross negligence or willful and wanton misconduct, as provided. **Status:** 1/15/2026 - From printer. May be heard in committee February 14.	5. Support AB 1586 Fact Sheet
AB 1626 Gabriel D	**Youth health: sports: coaches. (Introduced: 1/26/2026)** Current law, commencing January 1, 2027, requires a youth sports organization to ensure that its coaches are certified, and recertified every 2 years to, among other things, perform cardiopulmonary resuscitation, as specified. This bill would state the intent of the Legislature to enact legislation relating to mental health training for youth sports coaches. **Status:** 1/27/2026 - From printer. May be heard in committee February 26.	5. Support

AB 1660 Schiavo D	**Public guardians and public administrators. (Introduced: 1/29/2026)** Current law requires a public guardian to apply for appointment as a guardian or conservator of the person, the estate, or the person and estate, if there is an imminent threat to a person's health or safety or the person's estate, there is no one else who is qualified and willing to act, as specified, the appointment would be in the best interests of the person, and the person is domiciled in the county. Current law similarly requires a court to order a public guardian of a county to apply for appointment as a guardian or conservator if it appears that there is no one else who is qualified and willing to act, that the appointment as guardian or conservator appears to be in the best interests of the person, and the person is domiciled in the county. Current law grants public guardians a variety of powers, including the right to take control of real or personal property, issue written certification of this fact, and to restrain any person from entering, encumbering, or disposing of any real or personal property held in a trust, as specified. Current law establishes the public administrator as an officer of a county. Current law regulates the administration of estates of decedents and permits the public administrator to be appointed to administer these estates under certain circumstances. Current law grants public administrators a variety of powers in this regard, including the right to take control of a decedent's property, issue written certification of this fact, and summarily dispose of property, as specified. Current law requires a financial institution, government or private agency, retirement fund administrator, insurance company, licensed securities dealer, or other person, without inquiring into the truth of the written certification, without requiring a death certificate, without charge, and without court order or letters being issued, to perform specified functions, including providing the public administrator complete information concerning property held in the name of the decedent, including names and addresses of beneficiaries or joint owners, as specified. This bill would require a court to award sanctions of no less than $1,000 per violation for fees paid and costs incurred for failure of a financial institution, government or private agency, retirement fund administrator, insurance company, licensed securities dealer, or other person, as specified, to comply with these requirements. **Status:** 2/17/2026 - Referred to Com. on JUD.	5. Support
AB 1779 Davies R	**Alcoholism and drug abuse recovery and treatment programs: inducement of participants. (Introduced: 2/9/2026)** Current law provides for the licensure and regulation of drug testing laboratories and adult alcoholism or drug abuse recovery or treatment facilities and provides for the certification and regulation of adult alcoholism or drug abuse recovery or treatment programs by the State Department of Health Care Services and authorizes the department to enforce those provisions. Current law authorizes a facility described above to offer transportation services to an individual who is seeking recovery or treatment services only if specified conditions are met, including, among other things, that any air transportation provided to the individual includes a return ticket that may be used by the individual upon discharge and that a return ticket not used by an individual upon discharge is made available to the individual upon request for a period of one year following the individual's discharge. This bill would require a laboratory, facility, or program described above that provides air transportation to provide a ticket for round-trip transportation, to obtain written acknowledgment by the individual that the transportation is not tied to insurance benefits or program participation, to document the purpose and cost of the transportation, to compile information related to the provision of transportation, and to annually publish the compiled information on its internet website. The bill would require a laboratory, facility, or program to retain the information for a minimum of 5 years and to provide that information to the department upon request. **Status:** 2/10/2026 - From printer. May be heard in committee March 12.	8. Watch AB 1779 Fact Sheet
AB 1898 Schultz D	**Workplace artificial intelligence tools. (Introduced: 2/12/2026)** Would require an employer to provide a written notice to an employee that a workplace AI tool, as defined, was used to assist the employer in making employment-related decisions or to surveil the workplace. The bill would require the notice to be given to a worker within a specified time and would require the notice to contain specified information, including the specific employment-related decisions potentially affected by the use of the workplace AI tool. The bill would	8. Watch

	require an employer to maintain an updated list of all workplace AI tools currently in use and to provide the list to workers annually. The bill would provide for enforcement by the Labor Commissioner or a public prosecutor, and alternatively would authorize any worker who has suffered damages, or their exclusive representative, to file a civil action for damages caused by the adverse action. The bill would establish remedies and penalties for violations, including a penalty of up to $500 per employee for each violation. **Status:** 2/13/2026 - From printer. May be heard in committee March 15.	
AB 1970 Harabedian D	**Health care coverage: mental health or substance use disorders. (Introduced: 2/13/2026)** Would prohibit a health care service plan contract or a health insurance policy that is issued, amended, or renewed on or after January 1, 2027, from imposing step therapy as a prerequisite to authorizing coverage of any prescription drug used for the treatment of mental health or substance use disorders, as defined. The bill would specify that the prohibition on step therapy does not apply when the United States Food and Drug Administration-labeled indications and usage of a drug indicate that some prior medication must be taken. Because a willful violation of this provision by a health care service plan would be a crime, the bill would impose a state-mandated local program. **Status:** 2/14/2026 - From printer. May be heard in committee March 16.	8. Watch
SB 28 Umberg D	**Treatment court program standards. (Amended: 5/23/2025)** Current law, the Treatment-Mandated Felony Act, an initiative measure enacted by the voters as Proposition 36 at the November 5, 2024, statewide general election, authorizes certain defendants convicted of specified felonies or misdemeanors to participate in a treatment program, upon court approval, in lieu of a jail or prison sentence, or grant of probation with jail as a condition of probation, if specified criteria are met. The Legislature may amend this initiative by a statute passed in each house by a rollcall vote entered in the journal, 2/3 of the membership concurring, or by a statute that becomes effective only when approved by the voters. This bill would include a new standard that, as part of the treatment court program, a drug addiction expert, as defined, conducts a substance abuse and mental health evaluation of the defendant, and submits the report to the court and the parties. The bill would remove the requirement that the Judicial Council revise the standards of judicial administration. The bill would require that a treatment program that complies with existing judicial standards be offered to a person that is eligible for treatment pursuant to the Treatment-Mandated Felony Act. By requiring the court to implement a treatment program that complies with existing judicial standards, the bill would amend that initiative statute. **Status:** 7/15/2025 - July 15 hearing postponed by committee.	4. Support if Amended SB 28 SIA to Asm. Pub Safety SB 28 Supp. if Amended Letter to S. PS SB 28 Fact Sheet
SB 329 Blakespear D	**Alcohol and drug recovery or treatment facilities: investigations. (Amended: 3/28/2025)** Current law provides for the licensure and regulation of alcohol or other drug recovery or treatment facilities by the State Department of Health Care Services. Current law prohibits operating an alcohol or other drug recovery or treatment facility to provide recovery, treatment, or detoxification services within this state without first obtaining a current valid license. If a facility is alleged to be providing those services without a license, existing law requires the department to conduct a site visit to investigate the allegation. Current law also authorizes the department to conduct announced or unannounced site visits to licensed facilities for the purpose of reviewing them for compliance, as specified. This bill would require the department to assign a complaint under its jurisdiction regarding an alcohol or other drug recovery or treatment facility to an analyst for investigation within 10 days of receiving the complaint. If the department receives a complaint that does not fall under its jurisdiction, the bill would require the department to notify the complainant, in writing, that it does not investigate that type of complaint. **Status:** 8/28/2025 - Failed Deadline pursuant to Rule 61(a)(11). (Last location was APPR. SUSPENSE FILE on 7/2/2025)(May be acted upon Jan 2026)	3. Oppose Unless Amended SB 329 Fact Sheets
SB 363 Wiener D	**Health care coverage: independent medical review. (Amended: 7/17/2025)** Current law provides for the regulation of health insurers by the Department of Insurance. Existing law establishes the Independent Medical	8. Watch

	Review System within each department, under which an enrollee or insured may seek review if a health care service has been denied, modified, or delayed by a health care service plan or health insurer and the enrollee or insured has previously filed a grievance that remains unresolved after 30 days. This bill would require a health care service plan or health insurer to annually report to the appropriate department the total number of claims processed by the health care service plan or health insurer for the prior year and its number of treatment denials or modifications, separated and disaggregated as specified, commencing on or before June 1, 2026. The bill would require the departments to compare the number of a health care service plan's or health insurer's treatment denials and modifications to (1) the number of successful independent medical review overturns of the plan's or insurer's treatment denials or modifications and (2) the number of treatment denials or modifications reversed by a plan or insurer after an independent medical review for the denial or modification is requested, filed, or applied for. For a health care service plan or health insurer with 10 or more independent medical reviews in a given year, the bill would make the health care service plan or health insurer liable for an administrative penalty, as specified, if more than 50% of the independent medical reviews filed with a health care service plan or health insurer result in an overturning or reversal of a treatment denial or modification in any one individual category of specified general types of care. **Status:** 8/28/2025 - Failed Deadline pursuant to Rule 61(a)(11). (Last location was APPR. SUSPENSE FILE on 8/20/2025)(May be acted upon Jan 2026)	SB 363 Fact Sheet
SB 490 Umberg D	**Alcohol and drug programs. (Amended: 1/5/2026)** Current law provides for the licensure and regulation of adult alcohol or other drug recovery or treatment facilities by the State Department of Public Health and prohibits the operation of one of those facilities without a current valid license. Current law requires the department, if a facility is alleged to be in violation of that prohibition, to conduct a site visit to investigate the allegation. Current law requires, if the department's employee or agent finds evidence that the facility is providing services without a license, the employee or agent to take specified actions, including, among others, submitting the findings of the investigation to the department and issuing a written notice to the facility that includes the date by which the facility is required to cease providing services. Current law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, through fee-for-service or managed care delivery systems. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Current law establishes the Drug Medi-Cal Treatment Program (Drug Medi-Cal) and authorizes the department to enter into a Drug Medi-Cal contract with each county for the provision of alcohol and drug use services within the county service area. This bill would require the department, if it determines it has jurisdiction over the allegation, to initiate that investigation within 10 days of receiving the allegation and, except as specified, complete the investigation within 60 days of initiating the investigation. The bill would require the department, if it receives a complaint that does not fall under its jurisdiction, to notify the complainant that it does not investigate that type of complaint. The bill would require the employee or agent to provide the notice described above within 10 days of the employee or agency submitting their findings to the department and to conduct a followup site visit to determine whether the facility has ceased providing services as required. **Status:** 1/26/2026 - Read third time. Passed. (Ayes 39. Noes 0.) Ordered to the Assembly. In Assembly. Read first time. Held at Desk.	2. Oppose SB 490 Sen. Health OPP Letter
SB 492 Menjivar D	**Youth Housing Bond Act of 2026. (Amended: 1/22/2026)** The Veterans and Affordable Housing Bond Act of 2018 authorizes the issuance of bonds in the amount of $4,000,000,000 pursuant to the State General Obligation Bond Law and requires the proceeds from the sale of these bonds to be used to finance various housing programs and a specified program for farm, home, and mobilehome purchase assistance for veterans, as provided. Current law establishes, among various other programs intended to address homelessness in this state, the Homeless Housing, Assistance, and Prevention program for the purpose of providing jurisdictions with one-time grant funds to support regional coordination and expand or develop local capacity to address	8. Watch SB 492 Fact Sheet

	their immediate homelessness challenges informed by a best-practices framework focused on moving homeless individuals and families into permanent housing and supporting the efforts of those individuals and families to maintain their permanent housing. This bill would enact the Youth Housing Bond Act of 2026 (bond act), which, if adopted, would authorize the issuance of bonds in the amount of $1,000,000,000 pursuant to the State General Obligation Bond Law to finance the Youth Housing Program, established as part of the bond act. The bill, as a part of the program, would require the Department of Housing and Community Development to make awards to local agencies, nonprofit organizations, and joint ventures for the purpose of acquiring, renovating, constructing, and purchasing equipment for youth centers or youth housing, as those terms are defined. **Status:** 1/27/2026 - Read third time. Urgency clause adopted. Passed. (Ayes 30. Noes 9.) Ordered to the Assembly. In Assembly. Read first time. Held at Desk.	
SB 903 Padilla D	**Mental health professionals: artificial intelligence. (Introduced: 1/21/2026)** Current law establishes the Board of Behavioral Sciences in the Department of Consumer Affairs to regulate licensees under the Licensed Marriage and Family Therapist Act, the Educational Psychologist Practice Act, the Clinical Social Worker Practice Act, and the Licensed Professional Clinical Counselor Act. Existing law regulates the use of artificial intelligence, as defined. Current law requires a health facility, clinic, physician's office, or office of a group practice that uses generative artificial intelligence to generate written or verbal patient communications pertaining to patient clinical information to ensure those communications include a disclaimer that indicates to the patient that a communication was generated by artificial intelligence and instructions describing how a patient may contact a human health care provider, employee, or other appropriate person. This bill would prohibit a licensed professional, as defined, from engaging in the use of artificial intelligence to assist in providing supplementary support in therapy or psychotherapy where the client's therapeutic session is recorded or transcribed unless the patient or their authorized representative is informed that artificial intelligence will be used and provides consent, as specified. The bill would also prohibit an individual, corporation, or entity from providing, advertising, or otherwise offering therapy or psychotherapy, including through the use of internet-based artificial intelligence, to the public in this state unless the therapy or psychotherapy services are conducted by an individual who is a licensed professional. **Status:** 2/18/2026 - Referred to Coms. on B. P. & E.D. and P., D.T., & C.P.	5. Support
SB 947 McNerney D	**Employment: automated decision systems. (Introduced: 2/2/2026)** Current law requires the Department of Technology to conduct, in coordination with other interagency bodies as it deems appropriate, a comprehensive inventory of all high-risk automated decision systems (ADS) that have been proposed for use, development, or procurement by, or are being used, developed, or procured by, any state agency. Current law establishes the Labor and Workforce Development Agency, which is composed of various departments responsible for protecting and promoting the rights and interests of workers in California, including the Division of Labor Standards Enforcement, led by the Labor Commissioner, within the Department of Industrial Relations. This bill would prohibit an employer from using an ADS to perform certain functions and would limit the purposes for and way in which an ADS may be used. The bill would authorize a worker to request, and require an employer to provide, a copy of the most recent 12 months of the worker's own data primarily used by an ADS to make a disciplinary, termination, or deactivation decision, as specified. The bill would require an employer that uses an ADS to assist in making a disciplinary, termination, or deactivation decision to provide the affected worker with a written postuse notice, as specified. This bill would prohibit an employer from discharging, threatening to discharge, demoting, suspending, or in any manner discriminating or retaliating against any worker for taking certain actions asserting their rights under the bill. **Status:** 2/18/2026 - Referred to Coms. on L., P.E. & R. and P., D.T., & C.P.	8. Watch

Total Measures: 19

January 15, 2026

Post Release Community Supervision Fact Sheet

Public Safety Realignment (AB109) established a population of *Post Release Community Supervision* (PRCS) clients. PRCS clients are supervised by county probation departments upon their release from state prison. Prior to AB109, PRCS clients were supervised by state parole.

Individuals Under Supervision: 1,348

Registered Sex Offenders:* 38

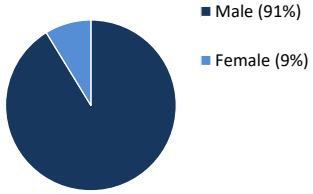
City	Housed	Transient / Homeless	City	Housed	Transient / Homeless
Alpine	3	0	Mount Laguna	0	0
Bonita	0	0	National City	19	1
Bonsall	0	0	Oceanside	40	13
Borrego Springs	0	0	Pala	0	0
Boulevard	0	0	Palomar Mountain	0	0
Camp Pendleton	0	0	Pauma Valley	0	0
Campo	6	0	Pine Valley	0	0
Cardiff By The Sea	1	0	Potrero	0	0
Carlsbad	7	2	Poway	3	0
Chula Vista	40	4	Ramona	6	1
Coronado	0	0	Ranchita	0	0
Del Mar	0	0	Rancho Santa Fe	0	0
Descanso	0	0	San Diego	529	57
Dulzura	0	0	San Luis Rey	0	0
El Cajon	49	12	San Marcos	14	0
Encinitas	0	0	San Ysidro	3	0
Escondido	66	6	Santa Ysabel	0	0
Fallbrook	9	3	Santee	15	0
Guatay	2	0	Solana Beach	0	0
Imperial Beach	3	0	Spring Valley	28	1
Jacumba	0	0	Tecate	0	0
Jamul	0	0	Valley Center	8	0
Julian	1	0	Vista	60	7
La Jolla	1	0	Warner Springs	0	0
La Mesa	11	1	Out of County	21	0
Lakeside	12	0	No Known City	139	63
Lemon Grove	33	2	TOTAL	1129	173
Lincoln Acres	0	0			

Successful Terminations

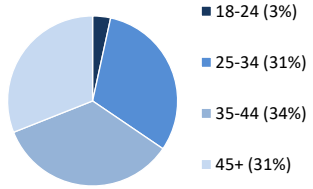
Full Term-No Recidivism	Early Discharge
24	8
Dec 15 – Jan 15	Dec 15 – Jan 15

	In County	Out of County	Unknown
Housed 84%	969	21	139
	86%	2%	12%
Transient/ Homeless 13%	110	0	63
	64%	0%	36%
No Known Address 3%			46
			100%

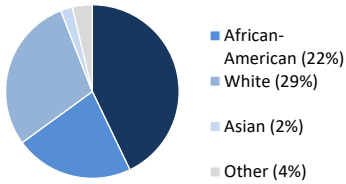
Gender



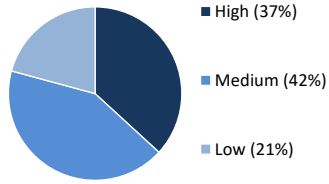
Age



Ethnicity

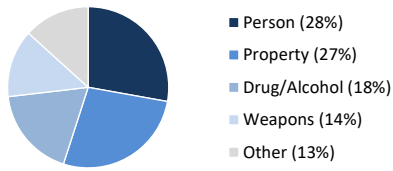


Assessed Risk Level



Committing Offense		DUI	77	Sex Crimes**	45
Arson	21	Escape	4	Theft	140
Assault	324	Forgery/Checks	3	Weapons	171
Auto Theft	65	Hit and Run	6	Other Felonies	206
Burglary	64	Homicide	1	Other Misdemeanors	16
Drugs	150	Robbery	2	Other/Unknown	53

Committing Offense Type



*Low/Medium-Risk per Static 99/SARATSO; subset of overall population
** Not all sex crimes are committed by registered sex offenders

For additional information please go to: http://www.sdcounty.ca.gov/probation/ccp.html

January 15, 2026

Mandatory Supervision Fact Sheet

Public Safety Realignment (AB109) established a population of *Mandatory Supervision* (MS) clients. MS clients receive a "split" sentence, meaning a portion of their time is completed in local custody, with the remaining balance spent in the community under probation supervision.

Individuals Under Supervision: 287

Registered Sex Offenders:* 0

City	Housed	Transient / Homeless	City	Housed	Transient / Homeless
Alpine	0	0	Mount Laguna	0	0
Bonita	1	0	National City	13	0
Bonsall	0	0	Oceanside	10	0
Borrego Springs	0	0	Pala	0	0
Boulevard	0	0	Palomar Mountain	0	0
Camp Pendleton	0	0	Pauma Valley	1	0
Campo	1	0	Pine Valley	0	0
Cardiff By The Sea	1	0	Potrero	0	0
Carlsbad	0	0	Poway	1	0
Chula Vista	34	0	Ramona	0	0
Coronado	0	0	Ranchita	0	0
Del Mar	0	0	Rancho Santa Fe	1	0
Descanso	0	0	San Diego	128	1
Dulzura	0	0	San Luis Rey	0	0
El Cajon	8	0	San Marcos	1	0
Encinitas	0	0	San Ysidro	7	1
Escondido	13	0	Santa Ysabel	0	0
Fallbrook	1	0	Santee	3	0
Guatay	0	0	Solana Beach	0	0
Imperial Beach	5	0	Spring Valley	9	0
Jacumba	0	0	Tecate	0	0
Jamul	1	0	Valley Center	0	0
Julian	0	0	Vista	12	0
La Jolla	0	0	Warner Springs	0	0
La Mesa	8	0	Out of County	13	0
Lakeside	3	0	No Known City	1	0
Lemon Grove	7	0	TOTAL	283	2
Lincoln Acres	0	0			

Successful Terminations

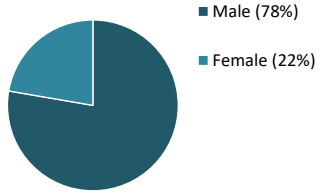
Full Term-No Recidivism

2

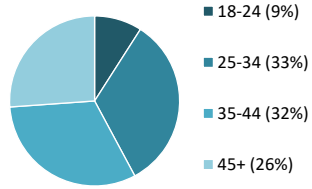
Dec 15 – Jan 15

	In County	Out of County	Unknown
Housed 98%	269	13	1
	95%	4%	1%
Transient/ Homeless 1%	2	0	0
	100%	0%	0%
No Known Address 1%			2
			100%

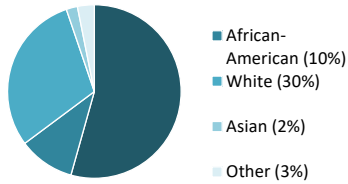
Gender



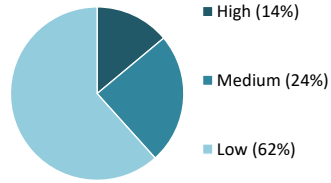
Age



Ethnicity

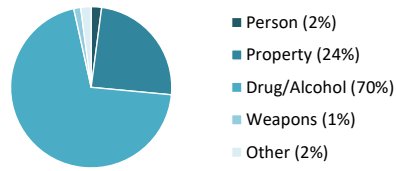


Assessed Risk Level



Committing Offense		DUI	5	Sex Crimes**	0
Arson	0	Escape	0	Theft	29
Assault	4	Forgery/Checks	4	Weapons	2
Auto Theft	11	Hit and Run	0	Other Felonies	12
Burglary	10	Homicide	0	Other Misdemeanors	0
Drugs	194	Robbery	0	Other/Unknown	16

Committing Offense Type



*Low/Medium-Risk per Static 99/SARATSO; subset of overall population
** Not all sex crimes are committed by registered sex offenders

For additional information please go to: http://www.sdcounty.ca.gov/probation/ccp.html