

# REQUEST FOR PROPOSALS

Judicial Council of California

BYRNE STATE CRISIS INTERVENTION PROGRAM (BRYNE SCIP)

# **PROPOSALS DUE:**

**April 18, 2025,** NO LATER THAN 5:00 P.M. PACIFIC TIME

# **OFFICE HOURS:**

March 25, 2025 12:00 pm - 1:00 pm March 28, 2025 12:00 pm - 1:00 pm

#### I. Background and Purpose

The Judicial Council is partnering with the Board of State and Community Corrections (BSCC) to administer US Department of Justice (USDOJ) Byrne State Crisis Intervention Program (Byrne SCIP) funding. Approximately \$13 million is available for California courts responding to this Request For Proposals (RFP).

As authorized by the Bipartisan Safer Communities Act of 2022, Byrne SCIP provides funds to implement "state crisis intervention court proceedings" including mental health courts, drug courts, treatment mandated felony courts, veteran treatment courts and related programs or initiatives that work to keep guns out of the hands of those who pose a threat to themselves or others.

Under this opportunity, the Judicial Council is seeking proposals to fund collaborative justice treatment courts including diversion courts and treatment-mandated felony courts. With SCIP funding, courts may implement a new court program or enhance an existing one. Courts may expand their program eligibility criteria to include participants with firearm violations and other previously excluded charges among their proposed target population for services. While the USDOJ Adult Drug Court program prohibits participation by "violent offenders" (see 34 U.S.C. § 10612), that prohibition does not apply to Byrne SCIP. Because state and federal law include many prohibiting categories for owning or possessing firearms, some program participants will be subject to documentation of required relinquishment processes in Criminal Protective Orders or other firearm and ammunition prohibitions. Courts should propose to work with local law enforcement to plan and implement processes including, for example, a corresponding local court form documenting firearms relinquishment for those participating in diversion. All applicants must submit a sustainability plan as part of their final report. This plan should outline how the court intends to maintain its work and continue operations once the grant funding ends.

#### II. Eligibility

All superior courts in California are eligible to apply. Each court may contract with local service providers to fund drug treatment, mental health, supervision, and other relevant services and program supports for program participants as proposed.

Firearms prohibitions and associated relinquishment procedures must be included in the project plan. Courts should have a process in place identifying roles and responsibilities for reviewing information provided as part of the case regarding whether program participants are in the Armed Prohibited Persons System (APPS) or otherwise facing firearms prohibiting charges or firearm and ammunition prohibitions or other status-related concerns per their most recent arrest and in their criminal history. Courts should work with local law enforcement agencies who are engaged

in related activities that cannot reasonably and safely be conducted by the court, including, as needed accessing the Automated Firearms System (AFS), serving orders, and undertaking firearm seizure or relinquishment activities. Law enforcement agencies are defined as probation, sheriff, police, or multiagency teams including some or all these agencies in a jurisdiction. Courts should also work with their local District Attorney office to review and consider the types of charges eligible for treatment court or diversion program referral, including those that may result in a temporary or lifetime prohibition on firearm ownership, possession, or purchase. Both the proposal narrative and letters of support should make these kinds of additional stakeholder roles and responsibilities clear.

Please note that a minimum of \$600,000 of the funds available is reserved for awards to smaller county jurisdictions. We encourage the courts from the counties listed in **Attachment A** to apply. They will receive a scoring bonus in the proposal review process.

#### III. Available Funding

A total of approximately \$13 million in funding is available statewide to support proposed programs. The number of courts awarded will be subject to available funding and at the discretion of the Judicial Council. Superior courts that are awarded grants must spend or encumber the funds by August 31, 2027.

Funds may be used for:

- a. Court and local law enforcement staffing including probation and district attorney
- b. Supportive services including housing, drug treatment, counseling and mental health services
- c. Program participation supports including transportation to and from services or hearings
- d. Attending relevant training and educational events (including September 2025 statewide convening described in Proposal Budget Attachment B)
- e. Consultants to assist with developing protocols, procedures and any necessary local resources
- f. Secure storage and other costs related to safely storing relinquished firearms

Applicants may utilize the allocated funds for programs designed to support individuals involved in Proposition 36 Treatment Mandated Felony (TMF) cases.

This grant is reimbursement-based. Courts must submit monthly invoices for approved allowable expenses incurred. Grant funds will be disbursed on a quarterly basis once staff has determined that the claims comply with all grant reporting requirements. Prompt quarterly billing is critical to timely reimbursement as these grant funds must pass through BSCC, the administering agency, before being drawn down against California's approved SCIP allocation at the federal level.

#### IV. Grant Period

Courts should propose activities for a project period that runs from July 1, 2025 through August 31, 2027.

The following table shows a timeline of estimated key dates related to the Byrne SCIP Program.

| Activity   | <b>Estimated Date</b>     |
|--|---------------------------|
| RFP released                                       | March 19, 2025            |
| "Office Hours" available to ask proposal questions | March 25, 2025 12:00-1:00 |
|  | March 28, 2025 12:00-1:00 |
| Court proposals due                                | April 18, 2025            |
| Grantee selection announced                        | May 23, 2025              |
|  |                           |
| Contract review and signature                      | June 27, 2025             |
|  |                           |
| Project activities begin                           | July 1, 2025              |
| First quarterly invoices and program reports due   | October 1, 2025           |
| Final day to charge program expenses               | July 30, 2027             |

#### V. Selection Criteria

A panel of subject matter experts will review proposal submissions. The following rating factors will be applied to each section of the proposal:

| Rating Factor                | Percent Total Value | <b>Application Sections</b> |
|------------------------------|---------------------|-----------------------------|
| Project Need                 | 10%                 | Project Narrative           |
| Project Description          | 20%                 |                             |
| Organizational Capacity and  | 15%                 |                             |
| Coordination                 |                     |                             |
|                              |                     |                             |
| Project Evaluation and       | 20%                 |                             |
| Monitoring                   |                     |                             |
|                              |                     |                             |
| Project Budget and Narrative | 20%                 | Attachments                 |
| Partner Letters of Support   | 10%                 |                             |
| Small County Designation     | 5%                  |                             |

During the selection process, statewide diversity in geographic location and court size will also be considered.

#### VI. Submission Deadline and Requirements

Applications must be emailed to CrimJusticeOffice@jud.ca.gov by 5:00 p.m. on April 18, 2025. CJS staff will be available for "Office Hours" on two occasions after the RFP is released, March 25, 2025 between 12:00 p.m. - 1:00 p.m. and March 28, 2025 between 12:00 p.m. - 1:00 p.m. as listed in the timeline above. Both office hours sessions will take place via teams and provide an opportunity for courts to ask any questions they need to help in their application process. All questions will be compiled into a FAQ. You can also email questions at any point to <a href="mailto:Aaron.Jang@jud.ca.gov">Aaron.Jang@jud.ca.gov</a>.

#### **Proposal Narrative Components:**

The proposal narrative should be no longer than 10 pages double spaced and must include the following sections.

#### A. Project Need

Describe the need(s) to be addressed by your program proposal.

- Identify the conditions or elements that contribute to the need including mental health and veterans service gaps, accessibility, geographic location and other specific community issues.
- Provide relevant local qualitative and/or quantitative data with citations in support of the need(s).
- Explain why your court is unable to address the defined need without grant funds.

#### **B.** Project Description

This section should describe how your court will utilize the requested funding to address the needs described above and implement a new collaborative justice treatment court or diversion court. If your court proposes to enhance an existing program, please describe the existing program and how funding will be used to expand it. This section should also address existing firearm prohibition processes and procedures including roles and responsibilities for identifying defendants' firearm access and ownership, how relinquishment is handled, and how procedures may be expanded or adapted with the proposed program (for example, developing or implementing protocols, reviewing cases for compliance with firearm and ammunition prohibitions, etc.).

The description should:

- Describe the key components of the proposed treatment or diversion court structure from referral through graduation.
- Identify the key partners involved in each component of the program.

- Provide an estimate of how many individuals will be served and the process for determining which services/activities an individual will receive.
- Address how the proposed project will, if applicable, incorporate trauma informed care and be culturally informed, competent, and responsive.
- Explain, at a high level, steps the superior court takes to comply with state law on firearms prohibitions and mandating firearm relinquishment. This includes relinquishment for those convicted of certain crimes or subject to criminal or civil protective or restraining orders. Then, please explain how the court will document relinquishment policies specific to participants in your proposed program population, depending on the type of collaborative court proposed.
- Identify any other firearms-related projects your court or community might already be engaged in.

#### C. Organizational Capacity and Coordination

Describe your court's ability to administer the proposed project. In the description include:

- Staffing required and available to operate the project including staff qualifications and training.
  - O Please specifically identify the staff person who will be responsible for working with Judicial Council staff to explain current local processes for handling gun relinquishment. This person could be court or law enforcement staff. Commitment will involve 2-3 one-hour interviews and follow up with any requested details as necessary.
- Extent to which existing staff resources will be utilized.
- Project management and oversight to ensure the proposed project is implemented as intended.
- Roles and responsibilities of the court and each agency, including the responsibilities of each position that this funding would support, as listed in your budget attachment.
- Timeline for the execution of contracts or memoranda of understanding with any other agencies and the implementation of their involvement/role such that they are in a reasonable timeframe to support the project. Include a description of the readiness to proceed, if funded.

#### D. Project Evaluation and Sustainability

Proposals should explain which staff will be responsible for program reporting. Program reporting will consist of:

- Quarterly invoicing for reimbursement of eligible expenses
- Quarterly program progress report
- Ongoing program participant data collection and submission

Templates for the quarterly reimbursement and progress reporting will be provided with selected

grantee contract agreements.

In this section, courts should indicate how they will sustain their project to continue service collaborative court program participants and supporting the firearms relinquishment processes put in place beyond the life of the grant funding.

Participating courts will be required to collect individual level data on their program participants. Data elements will include participant demographics, service referral and prohibited persons firearm relinquishment findings. Please see Attachment C for a list of required data elements. The Judicial Council may make amendments to the list provided in Attachment C in response to feedback received during the solicitation and grant administration process.

#### **Proposal Attachments**

#### **Project Budget with Budget Narrative**

Please use **Attachment B** as the template for your budget proposal. Include a narrative description, where provided, for each section. Line items proposed for funding should directly align with your narrative. Please include costs for court staff and key local partners to attend a 2 day statewide convening in September 2025.

#### **Partner Letters of Support**

Please provide letters of support for any key stakeholders that will receive grant funding or play a role in program implementation. Letters should be written on agency letterhead and signed by appropriate agency leadership. Letters should describe the agency commitment to expanding your collaborative court program's participating population, providing treatment, mental health and other services and ensuring firearm relinquishment for any prohibited person enrolled in your program.

# Attachment A

Small County Jurisdictions to Receive Special Application Consideration

Alpine

Amador

Colusa

Del Norte

Glenn

Inyo

Kings

Lassen

Marin

Mariposa

Modoc

Mono

Napa

San Benito

Sierra

Siskiyou

Solano

Sutter

Tehama

Trinity

Yolo

| Court   | Attachment B: Budget Detail Worksheet and Narrative |              |                |                     |                           |  |                            |      |
|---|---|--------------|----------------|---------------------|---------------------------|--|----------------------------|------|
| State Crisis Intervention Grant Program Cost Proposal and Narrative/Justification Program Year 1: July 1, 2025 – August 31, 2026 COURT PERSONNEL SALARIES & FRINGE BENEFITS |   |              |                |                     |                           |  |                            |      |
| A. Court Personnel Salaries  Name/Position  | Computatio  | n (Salary no | er month X num | ber of months       | needed X nerce            | entage FTE)                            |                            | Cost |
|   | 2 paratio   | (~ J P       |                |                     |                           | ······································ |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           | Pe                                     | rsonnel Total              | \$   |
| <b>B. Fringe Benefits</b> (list the benefits)   |   | )            |                |                     |                           |  |                            |      |
| Name/Position   | Medical %   | Dental %     | Retirement %   | Life<br>Insurance % | Social Sec/<br>Medicare % | Other (please describe) %              | Total<br>Benefit<br>Rate % | Cost |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           |  |                            | \$   |
|   |   |              |                |                     |                           | I                                      | Benefits Total             | \$   |
|   | Personnel & Fringe Benefits Total \$                |              |                |                     |                           |  |                            | 3    |
|   |   |              |                |                     |                           |  |                            |      |

#### **OPERATING EXPENSES**

C. Travel (Include location, number of travelers, hotel, meals, transportation, etc.)

| Purpose of Travel | Item | Computation | Cost            |
|-------------------|------|-------------|-----------------|
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   | •    | ·           | Travel Total \$ |

**D. Equipment** (non-expendable)

| Item | Computation     | Cost |
|------|-----------------|------|
|      |                 | \$   |
|      |                 | \$   |
|      |                 | \$   |
|      | Equipment Total | \$   |

**E. Supplies** (items such as office supplies, training materials)

| Item | Computation    | Cost |
|------|----------------|------|
|      |                | \$   |
|      |                | \$   |
|      |                | \$   |
|      |                | \$   |
|      | Supplies Total | \$   |

**F. Other Costs** (items such as incentives, non-contracted costs)

| Description | Computation | Cost |
|-------------|-------------|------|
|             |             | \$   |
|             |             | \$   |

| Description            | Com                                   | putation                    | Cost           |
|------------------------|---------------------------------------|-----------------------------|----------------|
|                        |                                       |                             | \$             |
|                        |                                       |                             | \$             |
|                        |                                       | Other Costs Total           | \$             |
|                        |                                       | Operating Expenses Total \$ |                |
|                        |                                       | CONSULTANTS/CONTRACTORS     |                |
|                        |                                       | CONSULTANTS/CONTRACTORS     |                |
| G. Consultants/Contra  | actors (includes local justice system | m partners staff costs)     |                |
| Consultant/Contractors | Services Provided                     | Cost Breakdown of Service   | Cost           |
|                        |                                       |                             | \$             |
|                        |                                       |                             | \$             |
|                        |                                       |                             | \$             |
|                        |                                       |                             | ¢              |
|                        |                                       |                             | \$             |
|                        |                                       |                             | \$             |
|                        |                                       |                             |                |
|                        |                                       |                             | \$             |
|                        |                                       |                             | \$<br>\$       |
|                        |                                       | Consultants Total \$        | \$<br>\$<br>\$ |

# **BUDGET JUSTIFICATION/NARRATIVE**

| Personnel & Fringe Benefits |  |
|-----------------------------|--|
| Travel                      |  |
| Equipment                   |  |
| Supplies                    |  |
| Other Operating Costs       |  |
| Consultants/Contracts       |  |
| Summary                     |  |
|                             |  |
|                             |  |

# State Crisis Intervention Grant Program Cost Proposal and Narrative/Justification Program Year 2: July 1, 2026 – August 31, 2027

#### COURT PERSONNEL SALARIES & FRINGE BENEFITS

#### A. Court Personnel Salaries

| Name/Position | Computation (Salary per month X number of months needed X percentage FTE) | Cost         |
|---------------|---|--------------|
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               |   | \$           |
|               | Person  | nel Total \$ |

**B. Fringe Benefits** (list the benefit percent below)

| Name/Position | Medical % | Dental % | Retirement % | Life<br>Insurance % | Social Sec/<br>Medicare % | Other<br>(please<br>describe) % | Total Benefit<br>Rate % | Cost |
|---------------|-----------|----------|--------------|---------------------|---------------------------|---------------------------------|-------------------------|------|
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               |           |          |              |                     |                           |                                 |                         | \$   |
|               | •         | L        |              | 1                   |                           |                                 | Benefits Total          | \$   |

| Personnel & Fringe Benefits Total \$ |                                   |    |
|--------------------------------------|-----------------------------------|----|
|                                      | Personnel & Fringe Benefits Total | \$ |

#### **OPERATING EXPENSES**

C. Travel (Include location, number of travelers, hotel, meals, transportation, etc. Include costs for travel to Judicial Council as per RFP Section 3.2)

| Purpose of Travel | Item | Computation | Cost            |
|-------------------|------|-------------|-----------------|
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      |             | \$              |
|                   |      | •           | Travel Total \$ |

**D. Equipment** (non-expendable)

| Item | , | Computation     | Cost |
|------|---|-----------------|------|
|      |   |                 | \$   |
|      |   |                 | \$   |
|      |   |                 | \$   |
|      |   | Equipment Total | \$   |

**E. Supplies** (items such as office supplies, training materials)

| Item | 11 | Computation    | Cost |
|------|----|----------------|------|
|      |    |                | \$   |
|      |    |                | \$   |
|      |    |                | \$   |
|      |    |                | \$   |
|      | •  | Supplies Total | \$   |

F. Other Costs (items such as incentives, non-contracted costs)

| Description | Computation | Cost |
|-------------|-------------|------|
|             |             | \$   |
|             |             | \$   |

|             |             |                            | \$   |
|-------------|-------------|----------------------------|------|
|             |             |                            | \$   |
|             |             |                            |      |
| Description | Computation |                            | Cost |
|             |             | Other Costs Total          | \$   |
|             |             |                            |      |
|             |             | Operating Expense Total \$ |      |

# CONSULTANTS/CONTRACTORS

**G.** Consultants/Contractors (includes local justice system partners staff costs)

| Consultant/Contractors | Services Provided | Cost Breakdown of Service | Cost |
|------------------------|-------------------|---------------------------|------|
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |
|                        |                   |                           | \$   |

| 1 |                    | Φ.         |
|---|--------------------|------------|
|   | Consultants I otal | , <b>)</b> |
|   |                    | i '        |

# **BUDGET JUSTIFICATION/NARRATIVE**

| Personnel & Fringe Benefits |  |
|-----------------------------|--|
| Travel                      |  |
| Equipment                   |  |
| Supplies                    |  |
| Other Operating Costs       |  |
| Consultants/Contracts       |  |
| Indirect Costs              |  |
| Summary                     |  |
|                             |  |
|                             |  |

# Attachment C

| Data Element  | <b>Possible Responses</b>  | Definition  |  |
|---|--|---|--|
| I. Case Details/Referrals                                 |  |   |  |
| Case Filing Date  | mm/dd/yyyy   | Date the case was filed.  |  |
| Charge(s)   | Text   | Offense(s) the participant was charged with prior to receiving the collaborative court referral.  |  |
| Referral Date   | mm/dd/yyyy   | Date the participant was referred to the collaborative court.   |  |
| Court Type  | Veterans Treatment<br>Court, Military<br>Diversion (PC §<br>1001.80), Mental<br>Health Diversion<br>(PC § 1001.36) | Type of collaborative court the defendant is participating in.  |  |
| II. Intake/Screening                                      |  |   |  |
| Intake Result   | Admitted, Denial for Eligibility, Denial for Suitability   | Final decision as to whether the referred defendant was admitted into the program?  |  |
| Date of Collaborative Court<br>Entry (Program Admission)* | mm/dd/yyyy, Blank  | The court assigned program start date for defendants admitted to the program. This field should be left Blank if program entry was denied.                            |  |
| III. Participant Information                              |  |   |  |
| Referred Person ID  | Text   | A county-generated unique identifier that is specific to each person referred to the collaborative court. This identifier should be distinct to an individual and NOT |  |

| Data Element | <b>Possible Responses</b>   | Definition   |
|--------------|---|--|
|              |   | contain personally identifiable information (e.g., name, initials, DOB, CDL, SSN, etc). This field will serve as a linking key that should allow the county to match identifying information that is stored separately (e.g., in a person identifying key file) with each row of data in the data entry sheet. |
| Gender       | Cisgender man, Cisgender woman, Transgender man, Transgender woman, Nonbinary person  | Gender of participant.   |
| Race         | American Indian or<br>Alaska Native,<br>Asian, Black or<br>African American,<br>Hispanic or Latino,<br>Middle Eastern or<br>North African, More<br>Than One Race,<br>Native Hawaiian or<br>Pacific Islander,<br>White | Race of participant.   |

| Data Element                        | <b>Possible Responses</b>  | Definition  |
|-------------------------------------|--|---|
| Housing Stability at Intake*        | Unhoused, Housed,<br>Imminent Risk of<br>Houselessness,<br>Blank   | Housing status of participant at program intake.  |
| Language Most Comfortable Speaking* | English, Spanish, Vietnamese, ASL, Cantonese, Korean, Punjabi, Russian, Arabic, Farsi, Other/Not Listed, Blank   | Primary Language spoken at home for participant.  |
| Veteran Status*                     | Current Service Member (Active Duty), Prior Service (Veteran), Not Applicable, Blank   | Field captures whether the participant either serves or served in one of the branches listed under Service Branch.                    |
| Service Branch*                     | Army (including Army National Guard or Reserve), Navy (including Reserve), Marine Corps (including Reserve), Air force (including Air National Guard or Reserve), Coast Guard (Including Reserve), Space Force, National | Field captures the participant's branch of service.  This field should be left blank if response to Veteran Status is Not Applicable. |

| Data Element                         | <b>Possible Responses</b>   | Definition  |
|--------------------------------------|---|---|
|                                      | Oceanic and Atmospheric Administration (NOAA), the commissioned corps of the Public Health Service (PHS), Blank |   |
| Dishonorable Discharge*              | Yes, No, Blank  | Field captures whether the participant received a dishonorable discharge separation of service.  This field should be left blank if response to Veteran Status is Not Applicable or Current Service Member. |
| IV. Program Activity                 |   |   |
| Employment Assistance Provided*      | Yes, No, Not<br>Applicable, Blank   | Flag for if the participant has received employment services through the collaborative court.   |
| Housing Assistance Provided*         | Yes, No, Not<br>Applicable, Blank   | Flag for if the participant has received housing services through the collaborative court.  |
| Mental Health Treatment<br>Provided* | Yes, No, Not<br>Applicable, Blank   | Flag for if the participant has received mental health treatment services through the collaborative court.  |
| Substance Abuse Treatment Provided*  | Yes, No, Not<br>Applicable, Blank   | Flag for if the participant has received substance abuse treatment services through the collaborative court.  |
| Other Services Provided*             | Yes, No, Not<br>Applicable, Blank   | Flag for if the participant has received one or more service type not captured by the other flags.  |
| Other Service List*                  | Text, Blank   | List of other service(s) provided.  |

| Data Element                                     | <b>Possible Responses</b>  | Definition   |  |  |
|--|--|--|--|--|
| V. Outcomes                                      |  |  |  |  |
| Collaborative Court Outcome*                     | Successful Completion, In Progress, Terminated, Blank  | What was the outcome of the participant's collaborative court episode? If participant is still participating in the program, select In Progress.                                   |  |  |
| Collaborative Court Exit Date*                   | mm/dd/yyyy, Blank  | Enter the date of the outcome (for example, the date that the judge terminated the participant from the program).  |  |  |
| Housing Stability at CC Exit*                    | Unhoused, Housed,<br>Imminent Risk of<br>Houselessness,<br>Blank   | What is participant's housing status at the time of program exit?  |  |  |
| VI. Relinquishment                               |  |  |  |  |
| Participant Prohibited from Possessing Firearms* | Yes – order under<br>PC § 1001.36(m) or<br>PC § 1001.80(p),<br>Yes – any other<br>reason, No, Blank  | Is the participant barred from possessing firearms? If yes, are they barred under PC § 1001.36(m) or PC § 1001.80(p), or for another reason?                                       |  |  |
| Court Received Firearms Check Information*       | Yes – AFS check,<br>Yes – Other credible<br>information such as<br>a police report, Yes –<br>AFS check and other<br>credible information,<br>No, Blank | Did the court receive information regarding whether the participant possesses firearms?  This field should be left Blank if Participant Prohibited from Possessing Firearms is No. |  |  |
| Participant Possesses Firearms*                  | Yes, No, Blank   | Did the findings of the firearms check show that the participant possessed firearms?   |  |  |

| Data Element                                    | <b>Possible Responses</b>   | Definition   |
|---|---|--|
|   |   | This field should be left Blank if Participant Prohibited from Possessing Firearms is No.  |
| Court Received Documentation of Relinquishment* | Yes, No, Blank  | Did the court receive documentation proving relinquishment occurred from the prohibited participant?  This field should be left Blank if Participant Prohibited  |
|   |   | from Possessing Firearms is No or Participant Possesses Firearms is No.  |
| Relinquishment Completed*                       | Yes, No, Blank  | Did the participant relinquish all firearms found to be in their possession?   |
|   |   | This field should be left Blank if Participant Prohibited from Possessing Firearms is No or Participant Possesses Firearms is No.  |
| Firearm Dissociation Method*                    | Relinquished to Law Enforcement, Relinquished to Licensed Firearms Dealer, Completed BOF 4546 form indicating they are no longer in possession, Law Enforcement seized firearms in response | Under which method did the firearm(s) come to be not in the possession of the participant? Select all that apply.  This field should be left Blank if Participant Prohibited from Possessing Firearms is No or Participant Possesses Firearms is No. |
|   | to noncompliance to requirement to relinquish, Not  |  |

| Data Element                       | <b>Possible Responses</b>  | Definition   |
|------------------------------------|--|--|
|                                    | Applicable – firearms not recovered, Blank   |  |
| Relinquishment Documentation Date* | mm/dd/yyyy, Blank  | Date the court received documentation of relinquishment of all firearms found in the firearms check.  This field should be left Blank if Relinquishment Completed is No.   |
| Response to Non-Compliance*        | Search warrant to recover remaining firearm(s) in possession, Participation in collaborative court program paused until firearms are relinquished, | If the participant failed to provide proof of relinquishment of all firearms determined to be within their possession through the firearms check, what action was taken? Select all that apply.  This field should be left Blank if Participant Prohibited from Possessing Firearms is No, Participant Possesses Firearms is No, or Relinquishment Completed is Yes. |
|                                    | Terminated from program due to non-compliance, Blank   |  |

Fields that are marked with \* should be left Blank if the individual was NOT <u>admitted</u> to the program.