



Legislation Details (With Text)

**File #:** 24-1361      **Version:** 1      **Name:**

**Type:** Discussion Item      **Status:** Passed

**File created:** 3/11/2024      **In control:** Commissioners Court

**On agenda:** 3/26/2024      **Final action:** 3/26/2024

**Title:** Request for discussion and approval of a Community Safety and Justice Innovation Jail Infrastructure Planning and Governance framework.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:**

| Date      | Ver. | Action By           | Action | Result |
|-----------|------|---------------------|--------|--------|
| 3/26/2024 | 1    | Commissioners Court |        |        |
| 3/26/2024 | 1    | Commissioners Court |        |        |

**Department:** County Administration  
**Department Head/Elected Official:** Diana Ramirez

**Regular or Supplemental RCA:** Supplemental RCA  
**Type of Request:** Policy

**Project ID (if applicable):** N/A  
**Vendor/Entity Legal Name (if applicable):** N/A

**MWDBE Contracted Goal (if applicable):** N/A  
**MWDBE Current Participation (if applicable):** N/A  
**Justification for 0% MWDBE Participation Goal:** N/A - Goal not applicable to request

**Request Summary (Agenda Caption):**  
 Request for discussion and approval of a Community Safety and Justice Innovation Jail Infrastructure Planning and Governance framework.

**Background and Discussion:**

Framework to follow.

**Expected Impact:**

TBD

**Alternative Options:**

TBD

**Alignment with Goal(s):**

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment
- Governance and Customer Service

**Prior Court Action (if any):**

| Date | Agenda Item # | Action Taken |
|------|---------------|--------------|
|      |               |              |

**Location:**

Address (if applicable):

Precinct(s): Choose an item.

| <b>Fiscal and Personnel Summary</b>                                             |                          |           |       |                    |
|---------------------------------------------------------------------------------|--------------------------|-----------|-------|--------------------|
| Service Name                                                                    | Current Fiscal Year Cost |           |       | Annual Fiscal Cost |
|                                                                                 | Labor                    | Non-Labor | Total | Recurring Expense  |
| <b>Funding Sources</b>                                                          |                          |           |       |                    |
| <b>Existing Budget</b>                                                          |                          |           |       |                    |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| <b>Total Current Budget</b>                                                     | \$                       | \$        | \$    | \$                 |
| <b>Additional Budget Request</b> ( <i>Requires Fiscal Review Request Form</i> ) |                          |           |       |                    |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| Choose an item.                                                                 | \$                       | \$        | \$    | \$                 |
| <b>Total Additional Budget Request</b>                                          | \$                       | \$        | \$    | \$                 |
| <b>Total Funding Request</b>                                                    | \$                       | \$        | \$    | \$                 |
| <b>Personnel</b> (Fill out section only if requesting new PCNs)                 |                          |           |       |                    |
| Current Position Count for Service                                              | -                        | -         | -     | -                  |
| Additional Positions Request                                                    | -                        | -         | -     | -                  |

|                 |   |   |   |   |
|-----------------|---|---|---|---|
| Total Personnel | - | - | - | - |
|-----------------|---|---|---|---|

**Anticipated Court Date:** March 26, 2024

**Anticipated Implementation Date (if different from Court date):**

**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item

**Contact(s) name, title, department:**

Tonya Mills, Managing Director, Justice Innovation, OCA  
Diana Ramirez, County Administrator, OCA  
Chief Mike Lee, Executive Command, Harris County Sheriff's Office  
Asst. Chief Phillip Bosquez, Detention Command, Sheriff's Office  
The Honorable Ed Gonzalez, Harris County Sheriff

**Attachments (if applicable):** Forthcoming