



**SACPA**

**Substance Abuse and  
Crime Prevention Act  
(Proposition 36)**

**Implementation in Alameda County**

**Annual Report Executive Summary**

**Fiscal Year July 1, 2003 to June 30, 2004**

**Submitted by:**

**Office of Management Services**  
Alameda County Behavioral Health Care

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## SACPA Overview

The Substance Abuse and Crime Prevention Act (SACPA), also known as Proposition 36, was passed by California voters November 7, 2000 and became effective July 1, 2001. The purpose of SACPA is to reduce incarceration for drug offenders by offering probation with drug treatment and aftercare. The treatment program also is available to County parolees who are on parole for non-violent offenses and County residents adjudicated in other counties.

Alameda County's SACPA organizational structure includes Behavioral Health Care Services (BHCS) as lead agency<sup>1</sup>. The Superior Courts, Probation Department, District Attorney, Public Defender, Department of Corrections, Parole, and Alameda County's Information Technology Department share major responsibilities for implementation of SACPA requirements.

Key provisions of the implementation include:

- Funding follows the Client, like an insurance plan, regardless of the service or providing agency.
- Assessments of client treatment needs are accomplished using standardized assessment instruments.
- Monitoring of clients and transmission of treatment progress information is computer assisted for most clients with reporting through the web-based PC 1210 Tracking System, implemented in FY 02-03.
- Treatment, provided through a network of community based organizations (providers) includes methadone (opioid) detoxification and maintenance; residential, day treatment, outpatient, and early intervention programs, aftercare, and other (ancillary) services such as family counseling, vocational training, case management, and mental health services.

The process of introducing a person arrested for substance abuse crimes into the treatment system consists of:

- The District Attorney determines initial eligibility.
- Upon conviction, if the defendant accepts SACPA, the court sets participation in SACPA services as a condition of probation.
- BHCS staff conducts an assessment of service needs using two standardized assessment instruments and refers the client to a BHCS provider for identified services that may also include ancillary services such as employment, mental health counseling, etc.<sup>2</sup>

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<sup>1</sup> At the time, BHCS already had a network of substance-abuse service providers in place who could be used for SACPA treatment.

<sup>2</sup> Referral has two meanings: referral from Courts or Parole to assessment and referral from assessment to a treatment provider. The meaning of the word is defined within the context of the data presented.

- The provider reports on the client's treatment status to Probation/Courts prior to court hearings, or sooner if the treatment plan is not proving successful.
- Periodically, the Court holds hearings to review client/defendant treatment progress and provider recommended changes in that status, if any.
- Upon conclusion of treatment, the client is eligible for aftercare.
- Defendants successfully completing their treatment/aftercare program and fulfilling all other terms of probation, can petition the Court to expunge their record (dismiss the charges and clear their record of the conviction).
- Alameda county residents on parole or adjudicated in other counties, as well as defendants from other counties who move to Alameda County, may also be assessed and referred for Alameda County SACPA services through the BHCS Assessment Unit.

### **Overview of the Annual Report**

The report presents data comparing the first, second, and third year of implementation in Alameda County. Data was obtained from:

- CORPUS (the criminal justice system that incorporates SACPA data from the web based Penal Code 1210 Tracking System),
- AccuData for demographic information based on ASI assessments<sup>3</sup>,
- Insyst (PSP), the BHCS service utilization database, and,
- BHCS' financial system for expenditures.

Client counts are for unique clients i.e. when clients are referred to more than one provider to meet the client's service needs, or has multiple progress reports or hearings, each instance of that activity is counted but the client is counted only once.

Increased access to CORPUS data and better methods of matching records for defendants/clients from one data set to another has resulted in some significant changes in the conclusions reached in previous annual reports. To avoid the confusion that might occur from constant references to past reports illustrating each change, this annual report is designated as the baseline for future analysis.

If you have questions or need more information, please contact Flo Samuels, BHCS, (510) 777-2156.

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<sup>3</sup> ASI data includes city of residence, race, education, arrest and detention history, employment, substance use, treatment history, and ancillary vocational, educational, and counseling service needs.

## **Referral Sources And Placements:**

- In FY 01-02, 2,329 dockets were designated in CORPUS as SACPA eligible (conviction) with the number decreasing to 1,850 in FY 02-03 and further decreasing to 1,601 by FY 03-04. Of those eligible in the first two fiscal years, 63% were felony convictions with the rate dropping to 59% in FY 03-04.
- For Accepts, 1,810 defendants with eligible dockets accepted in FY 01-02, 1,264 in FY 02-03, and 961 in FY 03-04.<sup>4</sup> Felonies for those accepting also dropped from 64% of total defendants accepting in FY 01-02 to 58% in FY 03-04. In the same time period, Accepts decreased as a proportion of total convictions from 76% to 59%.
- The no-show rate, defined as attrition between acceptance and being assessed by the BHCS Assessment Unit within 30-days of conviction, increased from 25% (457 out of 1,810 defendants) in FY 01-02 to 38% (363 out of 961 defendants) in FY 03-04. From assessment to treatment, defined as receiving at least one treatment service from a treatment provider, the no-show rate decreased from 18% (253 of 1,394 clients) to 15% (129 of 865 clients).
- With a 34% decrease in new client assessments from FY 01-02 to FY 03-04 (1,825 to 1,204), referrals from the BHCS Assessment Unit to treatment providers increased 10% (2,535 to 2,782).<sup>5</sup> By the end of FY 01-02, 24% of assessments were reassessments or evaluations for re-referral of ongoing clients. This had increased to 41% by the end of FY 02-03 and 52% in FY 03-04.<sup>6</sup>
- Although the Oakland Court's share of client referrals (and clients) to treatment providers decreased during the three fiscal years (referrals from 62% to 52% and clients from 58% to 47%), the need for multiple referrals<sup>7</sup> for Oakland defendants (1.61 per client in FY 03-04) was the highest of all the courts.
- Clients referred to Residential treatment providers increased from 8% to 13% of all clients over the three fiscal years. Clients utilizing Opioid Maintenance services increased from 2% to 7% although a decrease from FY 02-03's 11%. Outpatient remained the highest service with 78% of all clients served, a slight decrease from 81% in FY 01-02.

## **Referral Demographics:**

- Males represented 73% of clients who accepted, were assessed, and treated.
- African Americans represented 44% of defendants who accepted SACPA services followed by Caucasians at 26% and Latinos at 12%. Unclassified was 12% with

<sup>4</sup> Due to data collection issues still being resolved, 13% of accepts are not so identified in the SACPA CORPUS system.

<sup>5</sup> Client and referral numbers include parolees from other counties or Alameda County and clients from other counties who receive services in Alameda County.

<sup>6</sup> Reassessments/evaluations included clients who entered the SACPA program in FY 01-02 or FY 02-03.

<sup>7</sup> As a result of the assessment, the client is referred to more than one provider due to the need for multiple services. For example, an outpatient client may also need methadone while attending outpatient services or may need opioid detox before outpatient.

Asian and Native American the remaining 6%. These proportions were generally retained through assessment and treatment.

- Assessed clients with previous violations of parole or probation decreased from 61% to 57% while the average total violations per person increased from 3.4 to 4.2.
- Over the three years, cocaine as primary drug of choice dropped from 32% to 18%. The use of alcohol and drugs together increased from 9% to 26%.
- Assessed clients who had previously received drug treatment services increased from 33% to 36% and the time between last treatment and the current conviction increased from 5.2 to 5.8 years.
- While the average years in school for assessed clients remained steady at 11, the average for new clients in treatment fell from 13.3 years in FY 01-02 to 11.9.
- The unemployed and under-employed (part-time/intermittent) represented 70% of clients, a sharp increase from 52% in FY 01-02. Those in a controlled environment (restricted in ability to leave) represented 3%, a significant drop from the 23% of FY 01-02. In FY 03-04, 36% considered treating their employment problem as extremely or considerably important, an increase over 24% in FY 01-02.
- While Defendant residence patterns remained constant, there was a significant shift in referrals to treatment sites with Oakland increasing from 36% of the client base in FY 01-02 to 43% in FY 03-04. South county providers accounted for 41% of total treatment referrals.

### **Treatment: (Compared to Non-SACPA admissions)**

- Over the three fiscal years, a higher proportion of African Americans were admitted to the substance abuse treatment system through SACPA than through our traditional service programs (46% to the non-SACPA 40%). Latino admissions increased faster in the SACPA population than in other BHCS programs (11% to 15% for SACPA and 17% to 19% for non-SACPA).
- Age distribution for both groups was similar, even after adjusting for non-SACPA clients under 18 (a population not served by SACPA). Close to one-third of clients are in the 36 to 45 age range. Clients between 20 and 36 in both populations have increased: from approximately 35% in FY 01-02 to 40% in FY 03-04.
- About 90% of clients in either group spoke English, down from 93% in FY 01-02. Spanish language services accounted for 9%, up from 6% in FY 01-02.
- In FY 03-04, 920 clients requested ancillary services (vocational and family counseling, literacy training, and mental health services) and referrals were made for 507 to receive such services. The overall need increased by 283% with the greatest increase in vocational counseling (492%) and family counseling (497%).

## **Retention:**

Definitions: Retention is defined as the length of time the client actually received services. Early drop-out is defined as appearing for registration but not treatment.

- In FY 02-03, 1½ to 3 times the number of SACPA clients stayed over 90 days in treatment compared to non-SACPA clients.<sup>8</sup> In FY 03-04 however, this difference narrowed significantly with non-SACPA clients being 20% more likely to stay over 90 days than SACPA clients.
- By ethnicity, combined rates for early drop-out plus less-than-30-days of treatment ranged from 39% (African-Americans) to 29% (Latino). For non-SACPA clients, the same combined rates ranged from 43% (Latino) to 39% (Caucasian).
- Age, substance type, or sex of the client had no discernible influence on SACPA retention.

## **Budget and Expenditures:**

FY 03-04 expenditures of \$8.1 million were funded by the annual allocation of \$5.4 million with the remaining \$2.7 million coming from roll-over funds. Treatment, including assessments, accounted for \$5.8 million, 72% of total expenditures. Probation and the Courts accounted for another \$1.26 and \$700,000 was spent for support services provided by BHCS that includes BHCS Administration and Information Technology.

- Of total treatment dollars, residential treatment for FY 03-04 increased from 31% in FY 02-03 to 35% in FY 03-04 (\$1.6 million to \$2.million).<sup>9</sup> Residential clients represented 13% of total clients treated, up from 11% the previous year.
- Outpatient expenditures represented 35% of total treatment dollars down from 39% in FY 02-03. The percentage of clients served also declined but at a slightly slower rate (66% to 64%).
- While a SACPA service, Aftercare is not considered as treatment. Even so, it represented approximately 6% of expenditures when included in treatment costs (up from 2% in FY 02-03) and 14% of total unique clients (up from 7% in FY 02-03).<sup>10</sup>

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<sup>8</sup> Large empirical studies such as the Drug Abuse Reporting Program, the Treatment Outcome Prospective Study, and the Drug Abuse Treatment Outcome Study have shown that treatment outcomes are positively associated with the length of time an individual remains in treatment.

<sup>9</sup> In an attempt to slow residential expenditures, new protocols were implemented to better define referrals and transfers to residential treatment facilities.

<sup>10</sup> Because Aftercare follows from successful completion of treatment, in most cases clients in Aftercare will have been double-counted in some other treatment service.

## **Treatment Reporting and Supervision:**<sup>11</sup>

- In FY 03-04, 17% of clients received a recommendation for transfer to less intensive levels of treatment, an increase from 11% in FY 02-03. Another 7% received a recommendation for transfer to more intensive levels of treatment, down from 17% the previous year.
- In FY 03-04, all categories of SACPA-related hearings increased due to the increase in clients in the system. While the number of hearings increased, the number per client remained constant except for SACPA non36PR hearings, which decreased by 17% (from 2.8 per client to 2.3). Bench warrants for failure to appear, probation violations, revocations, reinstatements, and incarceration all decreased from FY 02-03, reflecting the decrease (ranging from 11% to 23%) in the number of clients convicted of these charges. The number of findings per client remained stable over the two years.
- In FY 03-04, 259 defendants had their records expunged and 456 were dismissed from the SACPA system as unsuccessful, waive or declines. In FY 02-03, 129 had their records expunged and 481 were unsuccessful, waived or declined. This brought the three-year total for dismissals to 391 and unsuccessful/ waives to 1,006.

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<sup>11</sup> The reporting format for incident and progress reports was changed from manual to electronic in FY 02-03. Additional changes in report formats were made in FY 03-04. Therefore, no reasonable comparison can be made between the fiscal years on volume or client count reports. Therefore, treatment reporting will only address FY 03-04 progress reports.