

REPORTING ON PROPOSITION 36
Implementation in Alameda County

Fiscal Year Ending 6/30/02

Submitted by:
Office of Management Services
Alameda County Behavioral Health Care

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Background

The Substance Abuse and Crime Prevention Act (SACPA), known as Proposition 36, was passed by California voters with 61% of the vote on November 7, 2000. This initiative allows first and second-time, non-violent, simple drug possession offenders the opportunity to receive substance abuse treatment instead of incarceration. The Act became effective on July 1, 2001.

Provisions of SACPA

Under SACPA, adults convicted of nonviolent drug possession offenses in California can choose to be placed on probation and receive drug treatment in the community instead of incarceration or community supervision without treatment. Paroled offenders who commit nonviolent drug possession offenses or who violate drug-related conditions of parole can also receive treatment services funded by Proposition 36 in lieu of re-incarceration.

SACPA also establishes sanctions for offenders who do not sustain their participation in treatment or who violate certain conditions of probation or parole.

Drug treatment programs serving SACPA offenders must be State-licensed and certified. Various types of treatment, including residential and outpatient services and narcotics replacement therapy may be included in a client's services plan.

The Alameda County plan:

On June 1, 2001, Alameda County submitted its plan for the implementation of the Substance Abuse and Crime Prevention Act of 2000.

Behavioral Health Care Services (BHCS) was designated as the lead agency for implementation of Proposition 36.

In addition, major responsibilities for the effective implementation of the legislation were delineated for Superior Courts, Probation Department, District Attorney, Public Defender, Department of Corrections, Parole, and Alameda County's Information Technology Department.

Among the key provisions of the Plan:

- Funding would 'follow the Client', regardless of the service or providing agency.
- Assessments would be done at court sites using standardized assessment instruments.
- Monitoring would be computer assisted for most clients.
- Client treatment progress information would include 'flags' for non-compliance to be reported as 'incidents' to Probation and the courts.

- Services would include a broad array of treatment services through a network of community based organizations (providers) and include: Detoxification; methadone detoxification and maintenance (opioid); residential and day treatment programs; outpatient programs, aftercare, and other services (family counseling, vocational services, case management, and mental health services).

Obtaining Proposition 36 Services In Alameda County:

- The District Attorney determines initial eligibility.
- The defendant is offered Proposition 36 services as an alternative (in court).
- The Defendant receives a standardized assessment of service needs by BHCS staff, using standardized assessment instruments: Addiction Severity Index (ASI) and American Society of Addiction Medicine Patient Placement Criteria (ASAM).
- The court sets Proposition36 services as a condition of probation.
- The defendant/client is referred to a specific BHCS provider for identified services.
- The provider of record reports client’s treatment status to probation/courts
- Court holds periodic follow-up hearings to review client/defendant status.
- Upon completion of treatment, client is eligible for discharge or aftercare.
- Alameda county residents on parole may also be assessed and referred for Proposition 36 services through the BHCS Assessment Unit.
- Persons residing in Alameda County but adjudicated in other counties may receive Proposition 36 services in Alameda County following referral to and assessment by BHCS staff.

Overview of first year operations and this report:

In general, the Proposition 36 system in Alameda County consists of the Courts, Probation, the District Attorney, the Public Defender, Behavioral Health Care, the Providers of client services, and the client-consumers of services.

The courts include: Alameda, Berkeley, Fremont, Hayward, Oakland, and Pleasanton/Livermore.

Behavioral Health Care (BHCS), as the designated ‘Lead Agency’, is responsible for maintaining a process of participation across multiple county agencies that results in effective and accountable services to the population.

To deliver these services, BHCS uses a Provider Network consisting of nineteen independent agencies offering forty-one different service programs. Provider sites extend from Berkeley through the south and east county areas.

This report will present some general information on the first year of implementation of Proposition 36 in Alameda County. Included will be data on the demographic and service needs of the population being served. The report will present information on what is known about the general pool of Alameda residents eligible for services as well as those who actually have received services, highlighting some of the differences between these groups.

The report will reflect the flow of clients through the Proposition 36 service system, with data comparisons among referrals, treatment, and progress follow-ups. Accompanying this data on users will be some information on the service delivery system and oversight that has evolved to meet Prop36 demands.

Data Sources And Disclosure:

There are several separate sets of data pertaining to the first year of Proposition 36 operations. Data was taken from multiple sources including CORPUS (criminal justice data), BHCS' reports database, and BHCS' utilization database which shows client and service transactions (PSP).

ASI information was collected on all clients referred for services in Alameda County. Data includes city of residence, race, education, arrest and detention history, employment, substance use, treatment history, and ancillary vocational, educational, and counseling service needs. ASI data may be missing on some clients, may have been collected more than once on some clients, and may have missing values for some items. Overall, however, the ASI data provides a worthwhile picture of the total group of clients coming to BHCS for services. It is the best source of information regarding the service needs of this group. The referral group does not exactly match the group of clients receiving services. This is because approximately 24% of the clients do not show-up for their initial service intake following referral.

Reasonable efforts were made to reconcile any differences in the data sets. However, some variation due to alternate codes and classifications that occur between separately designed and collected data remained unresolvable. In addition, there was an early period of implementation when data capture procedures and mechanisms were not fully operational. However, in general, only data fairly reflecting the overall implementation of the program were included. We would expect any more detailed and rigorous analysis to support the general description of the system presented by this data.

Referral Demographics:

Persons eligible for Proposition 36 services in Alameda County are drawn from convictions for non-violent drug offenses. Looking at the CORPUS database and dockets (cases) designated as Proposition 36 eligible, we find that there are about 6,892 such dockets for 5,783 unique persons. Of these 6,892 dockets about 71% are for felony charges and 29% for misdemeanor charges.

Initially, it was expected that approximately 2,500 unique individuals would use Proposition 36 funded services per year. Actually, 1,962 clients were assessed and received 2,474 referrals to services. Of the 1,962 unique clients, approximately 134 (7%) were identified as parolees. Approximately 177 of the 1,962 clients were referred out of county for services according to an agreement that services would be provided by the individual's county of residence.

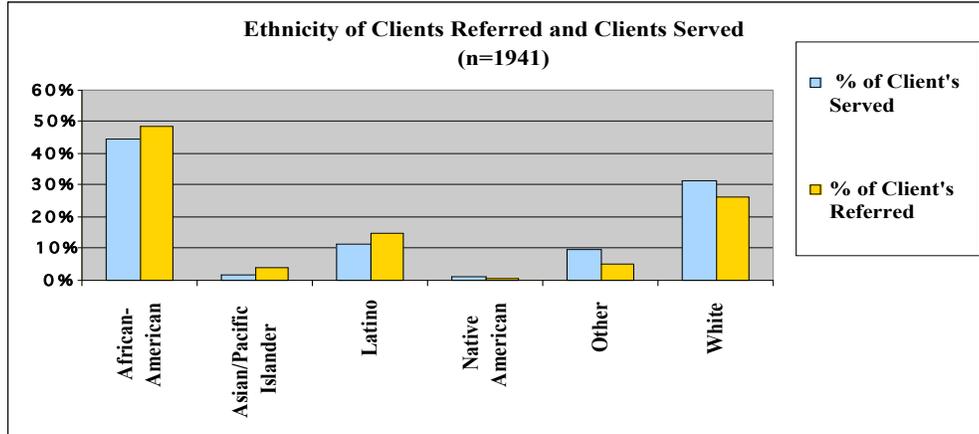
Looking at data collected at the time of BHCS' assessment and placement of referred clients, we can report that about 1800 clients have a completed ASI, which provides a source of some demographic data:

- About 70% of Proposition 36 referred clients in FY 2002 were male.
- Nearly half (48%) of referred clients were identified as African American, followed by Whites at 27% and Latinos at 15%. (See table I)
- Approximately half (907) had previously received drug treatment services. However, these 907 clients reported a lapse since they were engaged in treatment of an average of 3.5 years. (See table II)
- Nearly two out of three (1,174) reported previous violations of parole or probation. Those reporting such violations indicated an average of 3.4 violations per person.
- Educational attainment was reported at an average of 11.8 years of school completed.
- Nearly 65% (1,160) reported that they were usually unemployed or in a controlled environment and unable to work. Only one in six indicated they were usually employed in full-time work over the past three years. (See table III).
- Of those reporting, about 32% reported cocaine as their primary drug problem. Another 20% identified amphetamines and 11% specified heroin as drugs they used. 8% reported cannabis use. (See table IV).
- Nearly a quarter (23%) reports usual living arrangements as being with a sexual partner, with or without children. Another 43% report living with parents or family. Thus, about two of three appear to be living in fairly stable households. (See table V)
- About 11% of those reporting, indicate 'no stable living environment', while another 18% report living alone or with friends. (See table V).

- Oakland was reported by 44% of clients as their city of residence. Another 27% reported south-county cities such as Hayward, San Lorenzo, Newark, Union City, or Fremont as their place of residence. Less than 5% indicated residing in Berkeley. However, a little over 13% of placements were to provider(s) in Berkeley. Fewer than 40% were placed in Oakland and nearly 33% were assigned to south county providers. (See graph VI).

Ethnicity	Client's Referred	% of Client's Referred	Client's Served	% of Client's Served
African-American	939	48%	638	45%
Asian/Pacific Islander	81	4%	24	2%
Latino	291	15%	161	11%
Native American	16	1%	14	1%
Other	99	5%	138	10%
White	515	27%	450	32%
Total:	1941	100%	1425	100%

Source: ASI/PSP Database



TIME	# OF CLIENTS	% OF CLIENTS
NEVER	847	47%
PAST YEAR	410	23%
ONE OR TWO	140	8%
TWO OR 3	69	4%
THREE OR FOUR	64	4%
OVER 4	267	15%
TOTAL	1797	100%

SOURCE: ASI DATABASE

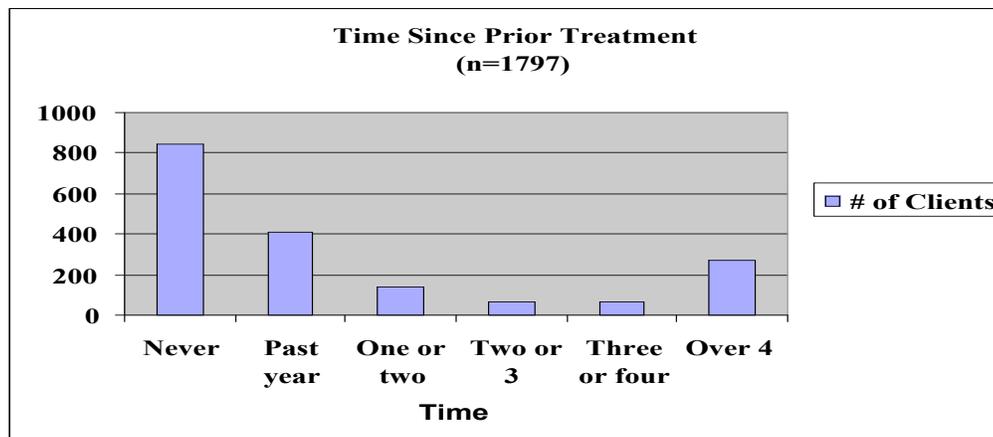


Table III - Clients Usual Employment Pattern		
Type of Work	# of Assessed Clients	% of Assessed Clients
Full Time Work	312	17%
Part Time Work	72	4%
Intermittent Work	118	7%
Student	13	1%
Retired/Disability	106	6%
Unemployed	738	41%
Controlled Environment	422	23%
Data Missing	24	1%
Total	1805	100%

Source: Addiction Severity Index

Population: Clients Assessed

Table IV - Major Substance Abuse Problem		
Substance	# of Clients	% of Clients
Alcohol	69	4%
Heroin	200	11%
Methadone	9	1%
Opiates/ Analgesics	5	0%
Barbiturates	1	0%
Sed/Hyp/Tranq	3	0%
Cocaine	563	32%
Amphetamines	352	20%
Cannabis	134	8%
Hallucinogens	5	0%
Inhalants	1	0%
Alcohol & one or more drugs	163	9%
More than one drug	258	15%
Total	1763	100%

Source: ASI Database

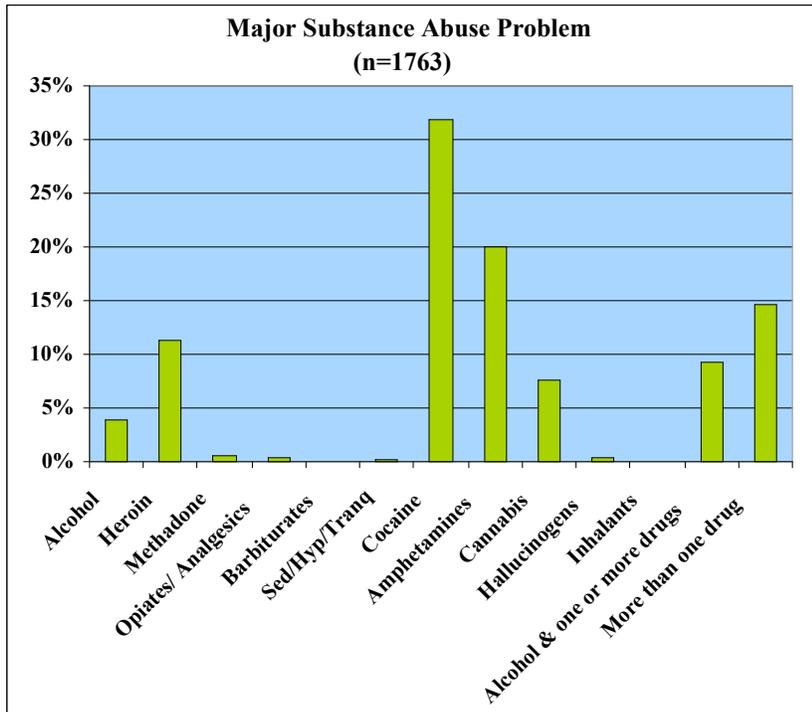
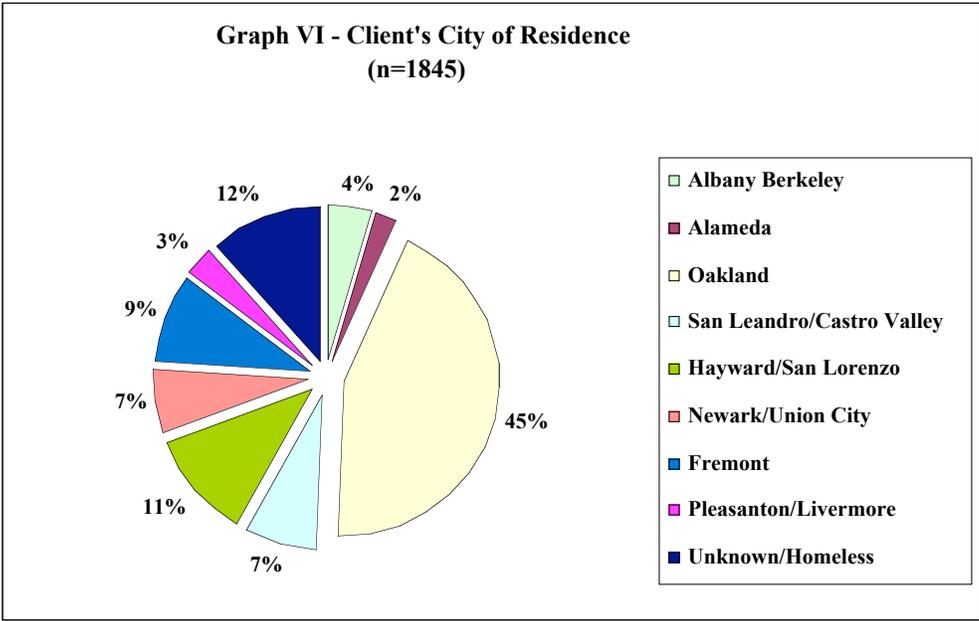
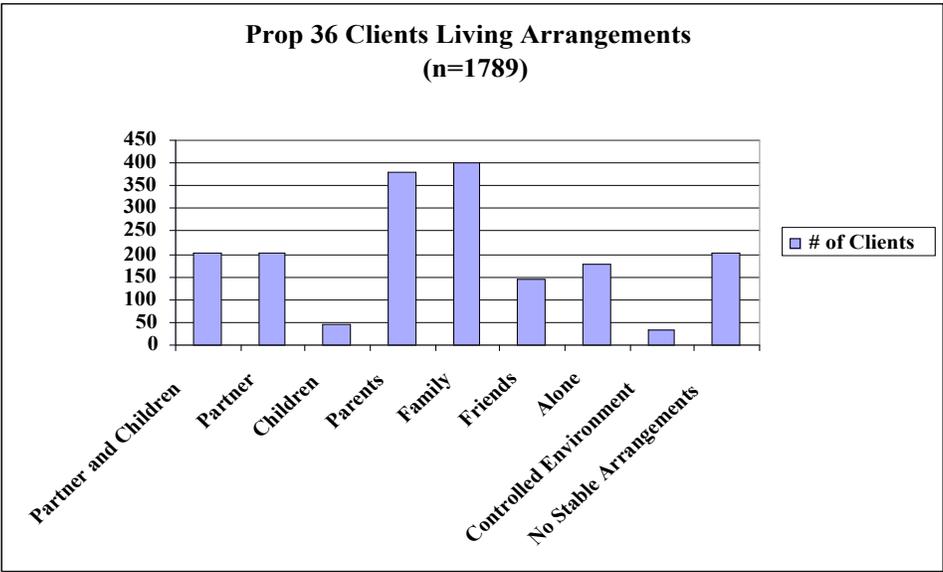
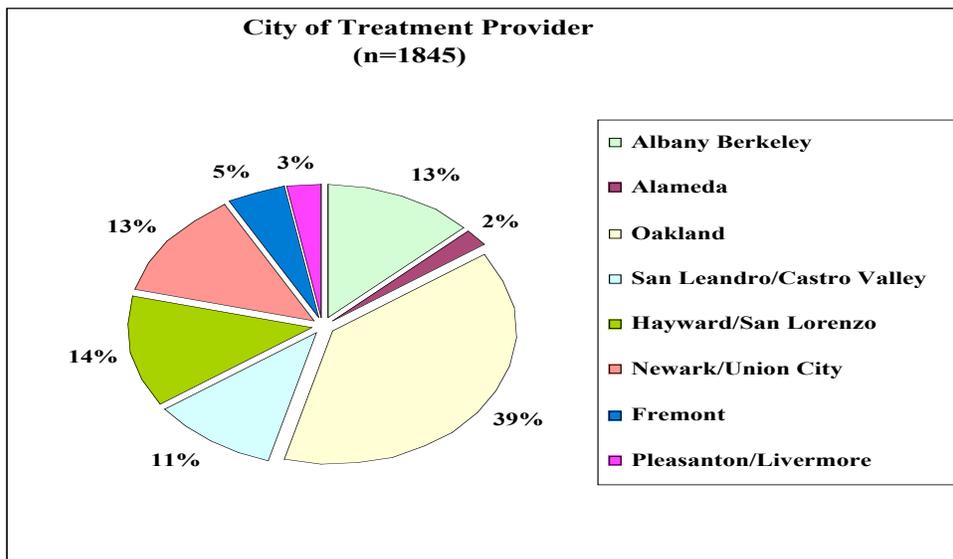


Table V - Prop 36 Clients Living Arrangements

Living Arrangements	# of Clients	% of Clients
Partner and Children	204	11%
Partner	202	11%
Children	46	3%
Parents	378	21%
Family	399	22%
Friends	144	8%
Alone	178	10%
Controlled Environment	34	2%
No Stable Arrangements	204	11%
Total	1789	100%

Source: ASI Database





Referral Sources And Placements:

Using the CORPUS database and looking at the charges for defendants designated as eligible for Proposition 36 services, we can group the charges into misdemeanor and felony cases (dockets).

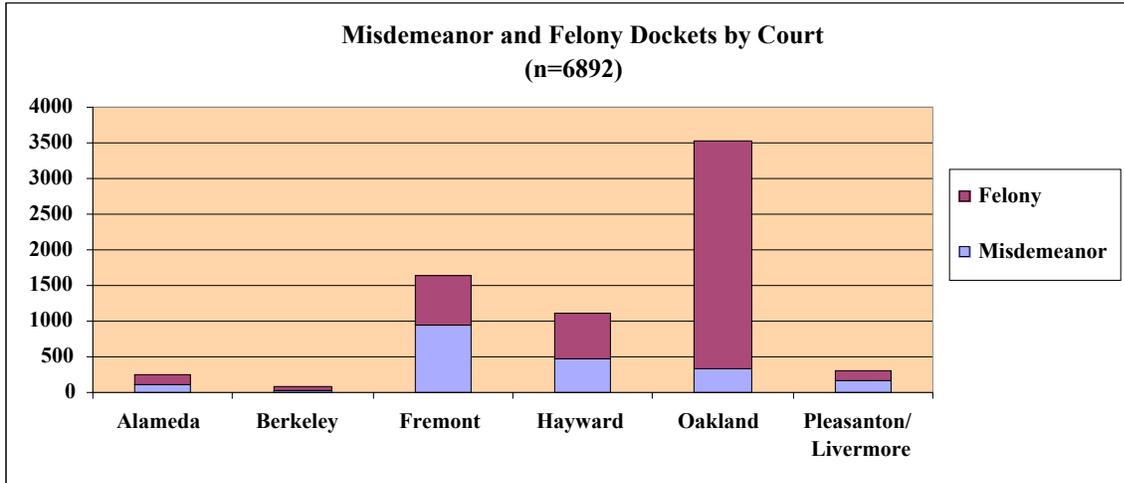
We find, overall, that about 71% of all defendants’ dockets designated as eligible for Proposition 36 services have felony charges and 29% have misdemeanor charges. About 90% of dockets considered eligible at the Oakland Court have felony charges, while 58% of those cases at the Hayward Court stem from felony charges, and 42% of the eligible cases in Fremont have felony charges. (See table VII).

Combining felony and misdemeanor cases, about 51% of Proposition 36 eligible cases are being adjudicated at the Oakland Court, 24% at the Fremont Court and another 16% in the Hayward Court. (See table VII).

Over the course of the first full year, approximately 2,474 referrals were made for about 1,962 clients. Using BHCS’ Referral and Report Database, we can report that:

- Approximately 60% of all referrals came through the Oakland Court, followed by the Fremont Court with 21% and the Hayward Court at 12%. (See appendix table I)
- About 75% of all referrals were to programs offering outpatient services, another 12% of referrals were to opioid maintenance services. Day treatment programs received about 12% of referrals. About 7% of clients were referred to residential services. (See table VIII).
- While the volume of referrals climbed to approximately 280 per month, new clients (those receiving first referrals) reached a maximum of slightly over 200. By April of 2002, nearly 40% of all referrals were re-referrals of existing clients. (See table IX)
- About 32% of clients felt that receiving vocational services was at least moderately important to them. Of these 32%, about three-quarters felt that receiving vocational services was extremely important. However 60% felt such services were of little or no importance to them (see table X).

- Ancillary literacy and mental health services were not identified at significant levels in provider reports regarding services to clients. Less than 10% of served clients were reported to need mental health services and less than 5% were reported as needing literacy training. (See table XI).



Court	# of Dockets	% of Dockets	Misdemeanor	Felony	% Felony
Alameda	242	4%	103	139	57%
Berkeley	72	1%	19	53	74%
Fremont	1632	24%	943	689	42%
Hayward	1106	16%	465	641	58%
Oakland	3527	51%	337	3190	90%
Pleasanton/ Livermore	313	5%	153	160	51%
Total	6892	100%	2020	4872	71%

Source: CORPUS

Table VIII - Clients by Service Type				
Service Type	Clients	% of Total	Referrals	% of Total
Opioid	117	6%	146	6%
Day Treatment	229	12%	284	12%
Early Intervention	91	5%	94	4%
Outpatient	1430	73%	1656	70%
Residential	148	8%	170	7%
Total	1962	100%	2350	100%

Source: ASI Database

* Data from referrals through June 30, 2002

* Data allows for duplication of clients across service types. Totals may be over stated.

* Clients referred Out of County excluded (undetermined service level).

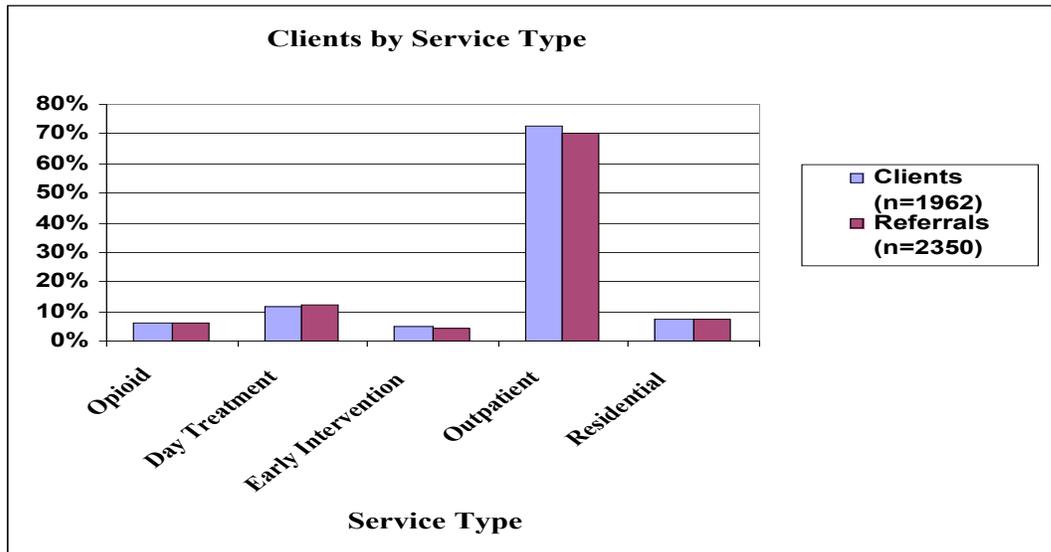


Table IX - Referrals by Month				
Referrals by Month	# of Clients*	% of Clients	# of Referrals*	% of Referrals
July	135	6.9%	135	5.5%
August	154	7.8%	159	6.4%
September	158	8.1%	165	6.7%
October	177	9.0%	191	7.7%
November	145	7.4%	157	6.3%
December	142	7.2%	168	6.8%
January	192	9.8%	237	9.6%
February	164	8.4%	214	8.6%
March	204	10.4%	274	11.1%
April	205	10.4%	284	11.5%
May	175	8.9%	280	11.3%
June	111	5.7%	210	8.5%
Total	1962	100.0%	2474	100.0%

Source: Referral/Report Database

* Data from referrals through June 30, 2002

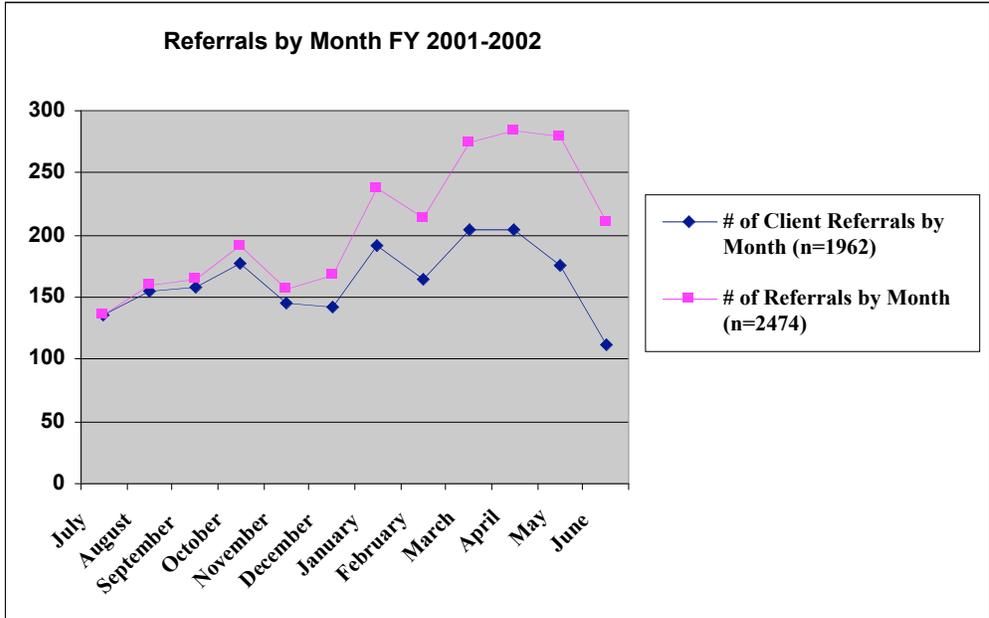


TABLE X - IMPORTANCE OF EMPLOYMENT COUNSELING		
IMPORTANCE	# OF CLIENTS	% OF CLIENTS
NOT AT ALL	1106	61%
SLIGHTLY	115	6%
MODERATELY	124	7%
CONSIDERATELY	147	8%
EXTREMELY	311	17%
TOTAL	1803	100%

SOURCE: ASI DATABASE



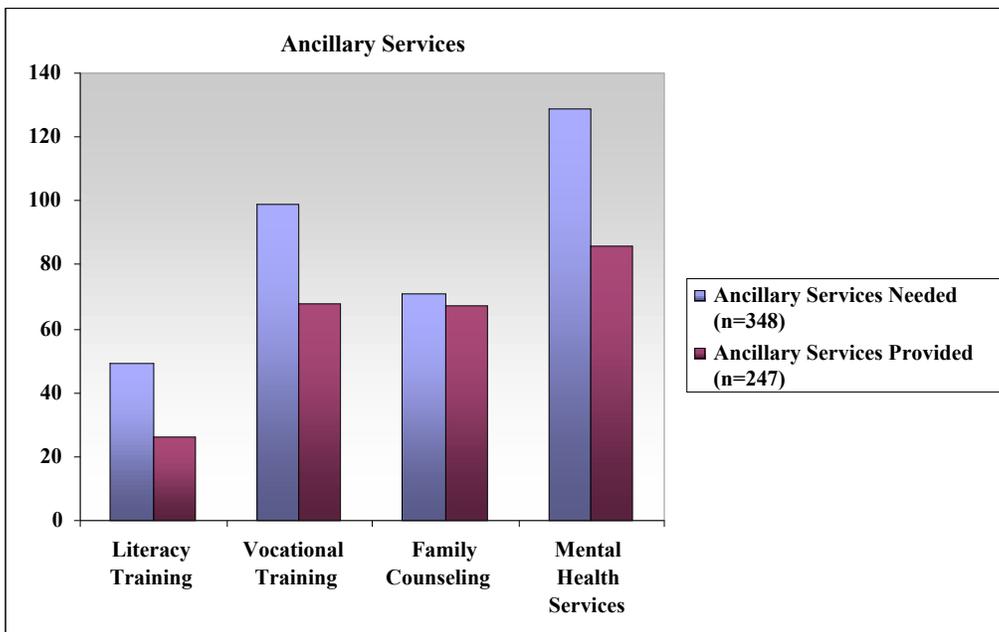
Table XI - Ancillary Services		
Ancillary Services Needed (1)	Count	Ancillary Services Provided (2)
Literacy Training	49	26
Vocational Training	99	68
Family Counseling	71	67
Mental Health Services	129	86
Total	348	247

Source: Referral/Report Database

This data reflects treatment information that were only available as of February 2007 and only includes treatment plans for whom treatment plans were filed:

- (1) As determined by ASI data collected at time of assessment for referral.
- (2) As indicated by provider submitted treatment plans.

Approximately 17.7% of prop 36 clients received one or more ancillary service.



Treatment And Retention:

Using data from BHCS' utilization database (PSP), we can look at the impact of Proposition 36 on BHCS' service delivery system. We can also look at rates of client engagement, services used by Proposition 36 clients, and aspects of client retention in the Proposition 36 system. Comparisons can also be made between the population referred and the population served.

Expansion under Proposition 36 restored system capacity to nearly the number of clients served by BHCS in 1999 (approximately 9,500 unique clients). The primary impact of service demand for Proposition 36 clients was in outpatient services. Opioid services have continued to increase, while residential services continue to decline in clients served. (See table XII).

About 96% of clients served were able to be served in English. Another 2% required services in Spanish and 1% of clients were recorded as needing services in a Filipino dialect. (See appendix table V)

About 72% of served clients were male, up from 70% of referred clients.

Drugs identified as primary problems showed significant changes from those identified in the referral process. Heroin increased from 15% to 17%. Cocaine dropped from 32% to 26%. Cannabis increased from 8% to 13%. Amphetamine problems were reported at a rate of 29%, up from the 20% reported at assessment (see appendix table V) (see table IV).

Attrition varied by ethnicity. About 55% of Latino's referred to services actually received one or more services, while 68% of African American clients referred were served, and 87% of whites referred were ultimately admitted to a provider service. (See table XIII).

When comparing clients served through Proposition 36 with clients served in the traditional substance abuse services, it was found that Proposition 36 clients were a little younger, with more people in age brackets under age 45 and fewer in the older age brackets (see table XIV).

Proposition 36 clients were more likely to be African American (45%) than were traditional substance abuse clients (41%) and less likely to be Latino (11% vs. 16%). The proportion of whites remains about the same (32%-33%). (See table XV).

Traditional substance abuse services included a higher proportion of females than present in the population being served through Proposition 36 (40% vs. 28%).

Retention in services for clients receiving at least one Proposition 36 service varied by type of service from 60% retention for six months or more in outpatient services to 25% in residential programs and about 30% in Day treatment (see table XVI).

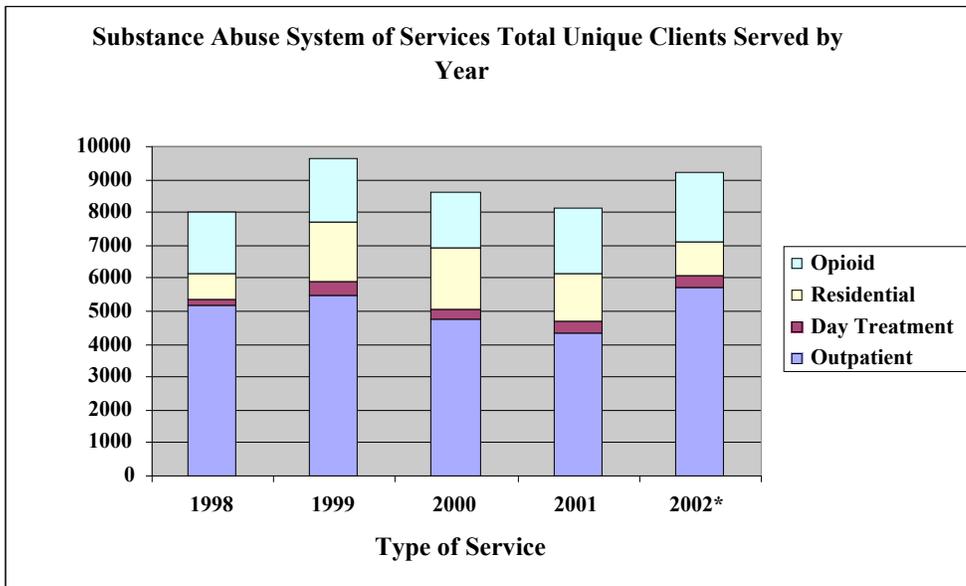
A common measure of retention for 30 days or more showed about 10% of outpatient clients who received at least one service being closed within 30 days, but over 25% of day treatment clients being closed in 30 days. (See table XVI).

When compared with traditional substance abuse programs in Alameda county, the Proposition 36 clients show about the same rates of retention in outpatient services, but significantly higher retention rates in residential and day treatment programs through the first six months. (See table XVI).

Table XII - Substance Abuse System Of Services					
Total Unique Clients Served By Year					
Type of service	1998	1999	2000	2001	2002*
Outpatient	5196	5458	4769	4320	5713
Day Treatment	186	420	308	405	355
Residential	766	1826	1835	1415	1031
Opioid	1852	1928	1713	1977	2110

Source: ASI Database

*First year of Proposition 36 Services



Ethnicity	Clients in Service	Referrals	Clients Served
African-American	68%	939	638
Latino	55%	291	161
White	87%	515	450
Total		1745	1249

Source: ASI Database

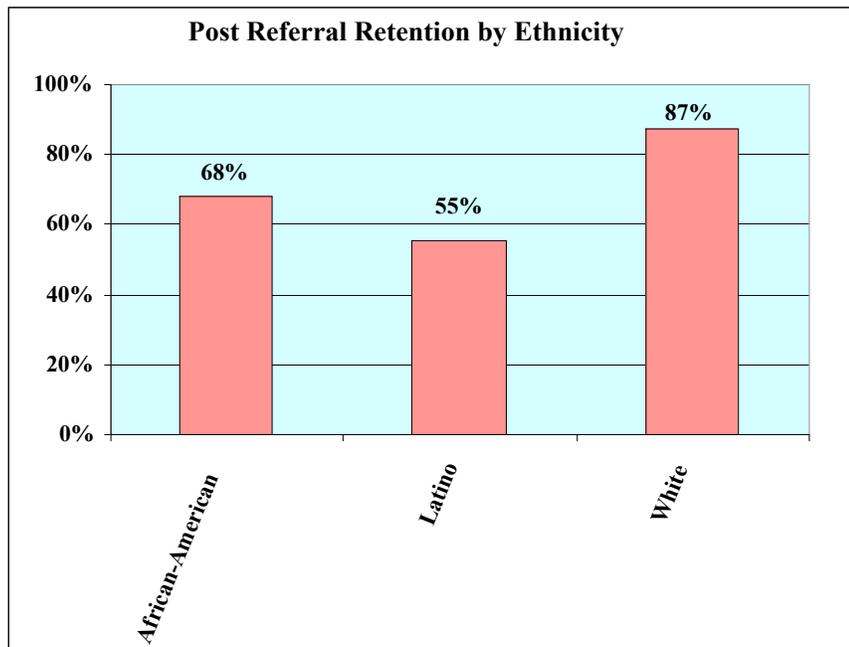


Table XIV - Prop 36 and Non Prop 36 Age Comparison				
Age at time of Referral	Prop36	%	Non Prop 36	%
18 -25	242	17%	1023	15%
26 - 35	340	24%	1558	23%
36 - 45	536	38%	2327	34%
46 - 55	259	18%	1481	21%
56 - 65	40	3%	439	6%
> 65	4	0%	88	1%
Total	1421	100%	6916	100%

Source: ASI/PSP Database

This data compares clients admitted to Prop 36 AOD programs and clients admitted to all other AOD programs.

The percentages of prop 36 and AOD clients are proportional with both groups having the largest percentage of clients ages between 36 to 45 years of age.

Note: Data includes only clients admitted to AOD programs as indicated by records of episodes in PSP utilization database.

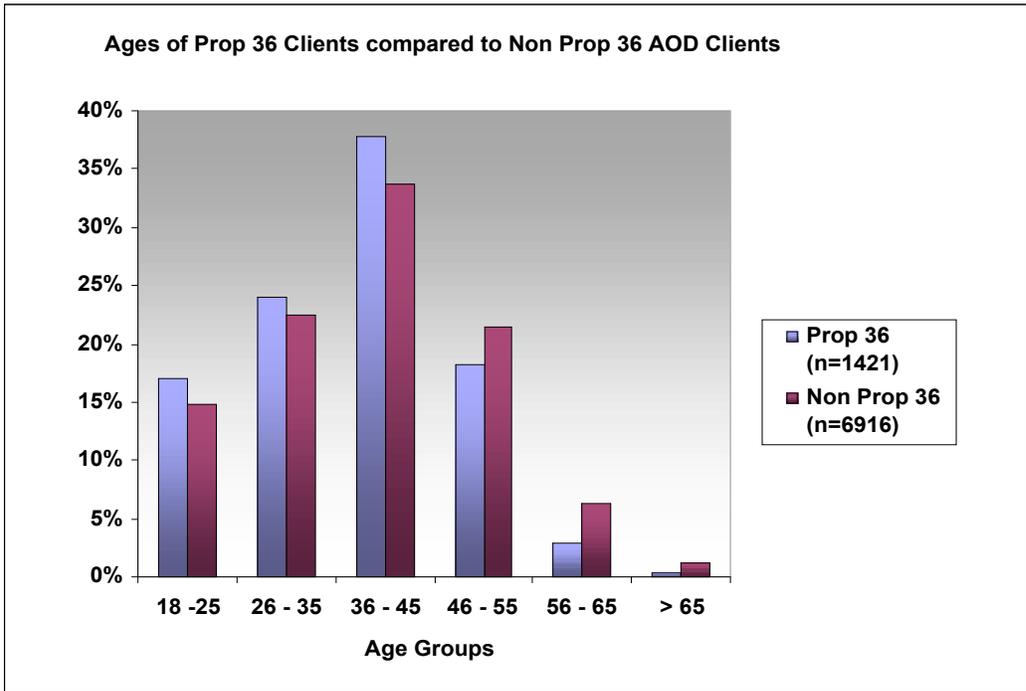


Table XV - Percentage of Clients Served by Ethnicity Comparison				
AOD/Prop36 (n=1425)	# of Clients	% of Clients	AOD/Non-Prop36 (n=7479)	% of Clients
African-American	638	45%	3035	41%
Asian/Pacific Islander	24	2%	131	2%
Filipino	30	2%	115	2%
Latino	161	11%	1181	16%
Native American	14	1%	101	1%
Other	108	8%	433	6%
Unknown	0	0%	13	0%
White	450	32%	2470	33%
Total	1425	100%	7479	100%

Source: PSP Database

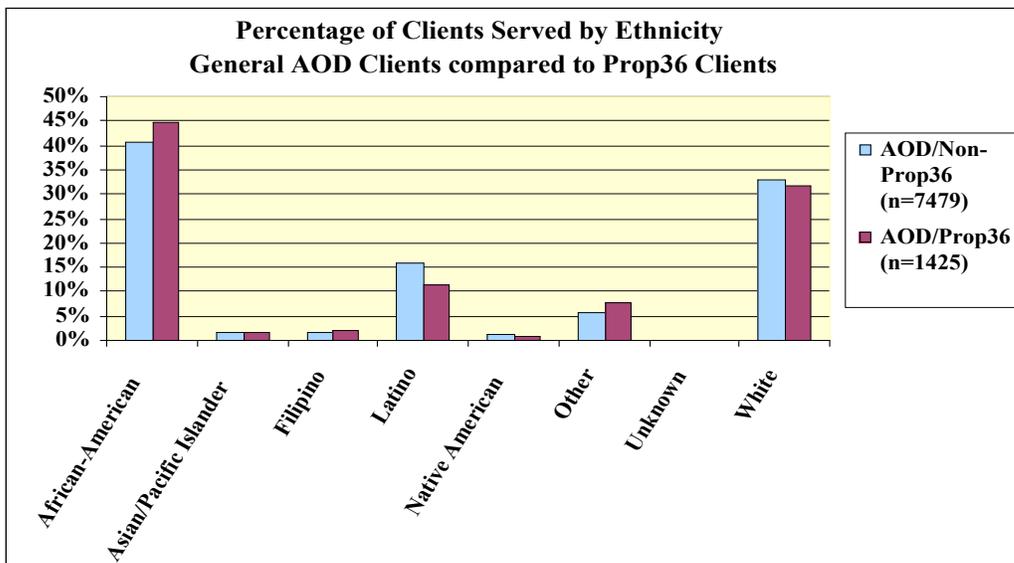
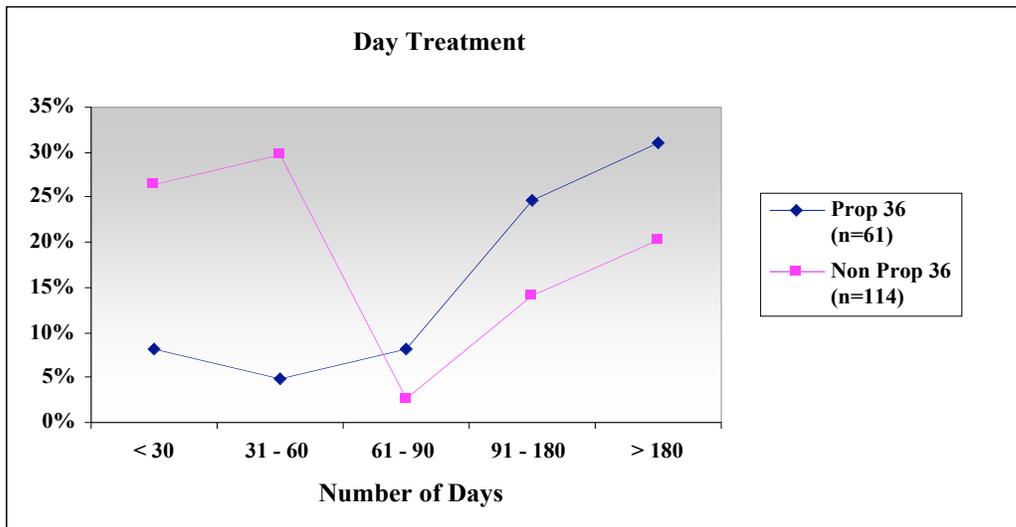


Table XVI - Retention

	Day Treatment		Day Treatment	
	Prop 36		Non Prop 36	
Length of stay	# of Clients	%	# of Clients	%
< 30	5	8%	30	26%
31 - 60	3	5%	34	30%
61 - 90	5	8%	3	3%
91 - 180	15	25%	16	14%
> 180	19	31%	23	20%
Unserviced	14	23%	8	7%
Total	61	100%	114	100%

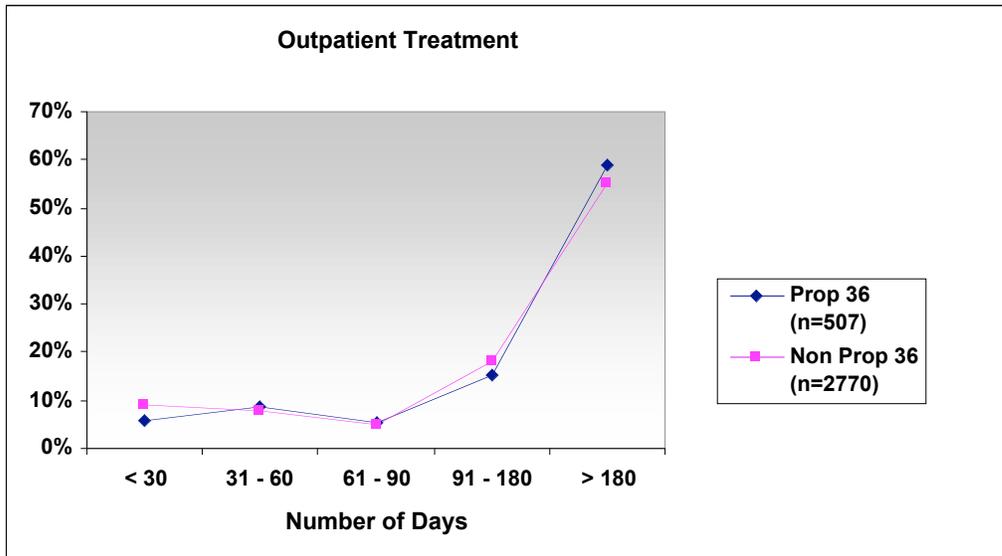
Source: ASI/PSP Database



*1421 prop 36 clients identified from PSP, and 6916 clients are from Non Prop 36 clients receiving AOD Services.

	Outpatient Treatment		Outpatient Treatment	
	Prop 36		Non Prop 36	
Length of Stay	# of Clients	%	# of Clients	%
< 30	30	6%	246	9%
31 - 60	43	8%	212	8%
61 - 90	28	6%	138	5%
91 - 180	78	15%	507	18%
> 180	299	59%	1529	55%
Unservd	29	6%	138	5%
Total	507	100%	2770	100%

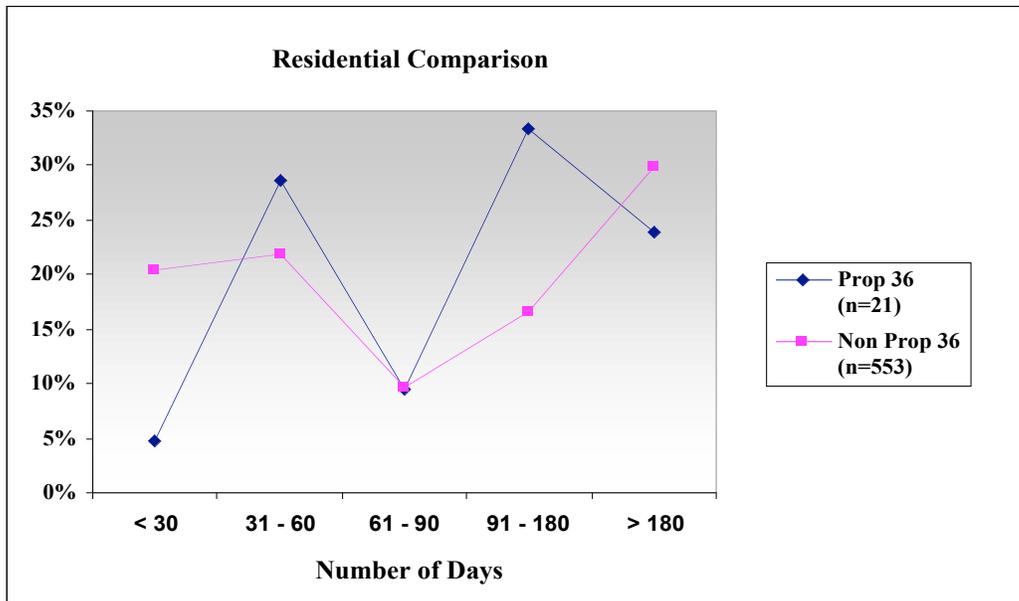
Source: ASI/PSP Database



*1421 prop 36 clients identified from PSP, and 6916 clients are from Non Prop 36 clients receiving AOD Services.

	Residential		Residential	
	Prop 36		Non Prop 36	
Length of Stay	# of Clients	%	# of Clients	%
< 30	1	5%	113	20%
31 - 60	6	29%	121	22%
61 - 90	2	10%	53	10%
91 - 180	7	33%	92	17%
> 180	5	24%	165	30%
Unserviced	0	0%	9	2%
Total	21	100%	553	100%

Source: ASI/PSP Database



*1421 prop 36 clients identified from PSP, and 6916 clients are from Non Prop 36 clients receiving AOD Services.

Treatment Budget:

Alameda county’s budget for implementation of the Proposition included roughly \$5.4 million plus an allocation for start-up costs of another \$1.3 million. Of this \$6.7 million, approximately \$4.8 million was budgeted for treatment (72%). Another \$1.7 million was directed toward criminal justice (Probation \$1.1 million, courts \$.6 million). Finally, approximately \$.26 million was set aside for other services provided by BHCS and schools.

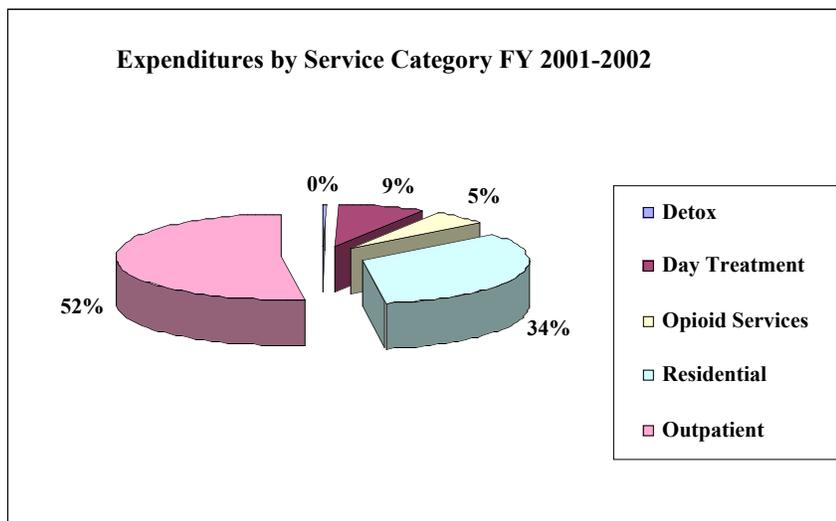
As funds became available, another \$389,000 was budgeted for the costs of required drug testing.

First year budget expenditures for service showed about 34% of funds were spent on residential programs serving about 10% of the proposition 36 clients. About 10% of the budget was used for day treatment matching the proportion of clients and about 52% of funds were spent on outpatient programs, which served about 70% of the clients. (See table XVII).

Table XVII - Expenditures by Service Category		
Service Category	Expenditures	% of Expenditures
Detox	6200	0%
Day Treatment	130800	9%
Opioid Services	82300	5%
Residential	515700	34%
Outpatient	799800	52%
Total	1534800	100%

Source: PSP Database

Total expenditure for the fiscal year were \$1,534,800



Oversight And Reporting:

Providers are required to report specific events as significant incidents in a client’s treatment progress. Looking at BHCS’ Referrals and Reports Database, we found that:

- Of the 1,962 clients referred to providers, 478 (24%) were reported as failing to appear for the first intake appointment. (See table XVIII).
- Clients were reported as missing at least two scheduled meetings at a rate of 33%.
- About 26% of clients were reported as having tested positive for drugs at some point in the course of their treatment.
- Data from progress reports suggests about 36% of clients missed drug tests due to absences.

Reports are reviewed by Probation and forwarded to the courts for review as part of the Proposition 36 review hearings.

A total of 1,433 review hearings have been held during the first year of operations for Proposition 36 clients. The proportion of hearings roughly matches the proportion of clients referred by court, with Oakland Court handling 62% of the hearings, Fremont 21%, and Hayward 13%. Of these, only Fremont, with 14% of the referrals, does not reflect the same proportion of review hearings and clients referred to Proposition 36. (See table XIX).

Proposition 36 provides funding for up to twelve months of treatment and up to six additional months of aftercare following treatment. Not surprisingly, then, there are few identified clients who have completed Proposition 36 services for whom we can report any outcomes as of June 30, 2002.

Table XVIII - Incident Reports		
Number of Clients Per Incident.*	Count	%
Failed to report to initial interview/intake.	478	24%
Missed two scheduled meetings while in treatment.	644	33%
Failed to participate in ancillary services contained in the approved treatment plan.	3	0%
Refused to provide a fresh, undiluted, unadulterated, personal urine sample upon request.**	470	24%
Tested positive for drugs.	517	26%
Has used or possessed alcohol, other drugs or weapons.	68	3%
Has acted in a violent manner and/or has made threats to harm him/herself or others.	22	1%
Has incurred a new arrest for crimes other than bench warrants, infractions, or misdemeanor traffic offenses.	19	1%
Total of Clients***	1962	100%

Source: Referral/Report Database

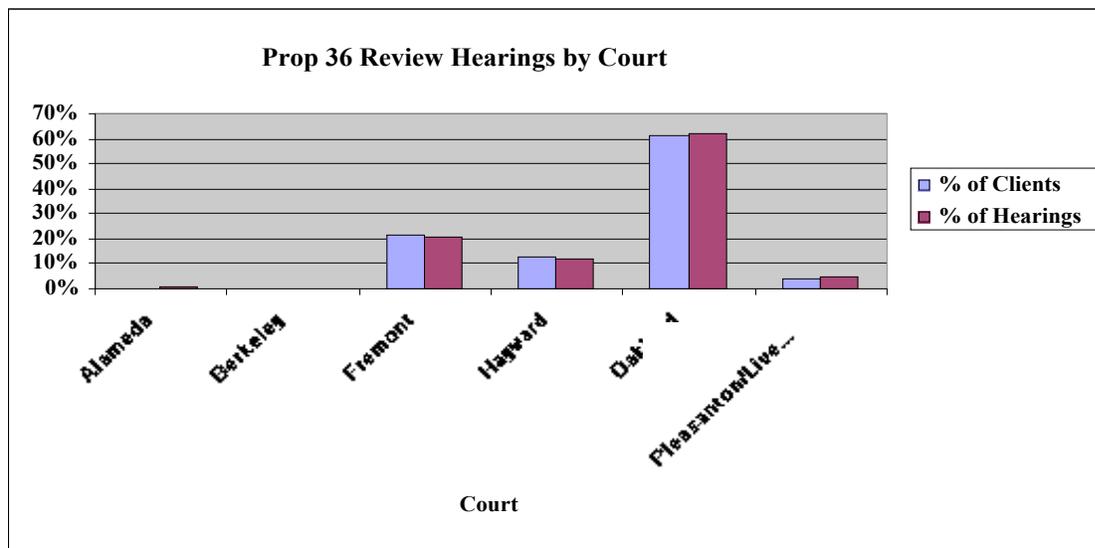
* Data from referrals through June 30, 2002

**Includes clients not available on test days. Those clients did not actually 'refuse'.

***1314 of 1962 clients (66.9%) had at least one incident reported.

Table XIX - Prop 36 Review Hearings by Court				
Court	# of Clients	% of Clients	# of Hearings	% of Hearings
Alameda	5	0%	27	1%
Berkeley	1	0%	5	0%
Fremont	307	21%	1012	21%
Hayward	188	13%	583	12%
Oakland	879	61%	3043	62%
Pleasanton/Livermore	53	4%	215	4%
Total	1433	100%	4885	100%

Source: Corpus Database



Conclusions And Observations:

This report does not purport to assess the achievements of the Proposition 36 implementation in Alameda County. The intent is only to provide sufficient data to describe the scope of that implementation, provide data on clients being served and describe the impact of those services on the courts, probation, and the service delivery system.

There are data that might provide a basis for assessing performance as the Proposition 36 implementation matures. It is worthwhile to identify some indicators for comparisons between future years and this first year of experience. Some of this data may provide a baseline for such an undertaking. However, it is crucial that this data not be taken for more than it is. Most of the data is subject to some estimation arising from operational changes and what data was collected and how.

The data presented herein can provide useful baseline information on Alameda County's implementation of Proposition 36. The data can help in identifying areas for improvement. However, conditions that applied for much of the first year and, thus, might give rise to certain conclusions based on the first year data might now be no longer relevant due to substantial operational changes having already occurred.

All that being said, it remains clear that some broad conclusions are in order. We can say, for instance, that Proposition 36 in Alameda County is an extremely complex and comprehensive undertaking.

The flow of clients from courtroom defendants to program service clients seems to be working fairly well.

The number of clients is large and approximates original expectations with the difference attributable, perhaps, to fewer than expected parolees.

There are many and diverse providers offering a broad range of services.

Client diversity in services appears to reflect that of the eligible population, with the proviso that some attention should be paid to variances in attrition rates between referral and initial service contacts.

Retention rates—as the time elapsed between engagement and latest service date—appear to be quite high, reflecting one expects a consistency of engagement expectations among providers, probation and the courts. Other measures of client retention in services should be applied to test this early impression.

Considerable second and third efforts seem to be going into ensuring appropriate client placements and persistence in treatment success. Thus, we see a rising ratio of referrals to unique clients over the course of the year.

The system demands of accommodating a large number of new clients may have required some conversion of service delivery resources, but the total service system appears to have grown in response to the demand, rather than displacing traditional users of services. It is an issue worth continuing attention, however.

Some attention should be paid to the apparent mismatch between service locations and client residences. It is not clear whether the discrepancies have an impact on client attrition and 'no show' rates.

While treatment may have been some time ago, many clients have had prior experiences with treatment.

A high proportion of clients being referred indicated an extensive history in the criminal justice system, including probation and parole.

Appendix

Appendix Table I - Referrals Summarized by Referral Source

Referral Source	# of Clients	% of Clients	# of Referrals*	% of Referrals
Alameda	16	1%	16	1%
Berkeley	7	0%	7	0%
Fremont	299	15%	340	14%
Hayward	300	15%	327	13%
Oakland	1107	55%	1493	60%
Pleasanton/Livermore	53	3%	65	3%
Other County	104	5%	107	4%
Parole	56	3%	59	2%
Unknown	57	3%	60	2%
Total	1999	100%	2474	100%

Source: Referral/Report Database

Appendix Table II - Referrals Summarized by Service Levels

Service Category	# of Clients	% of Clients	# of Referrals **	% of Referrals
Day Treatment	230	12%	286	12%
Detox	21	1%	41	2%
Early Intervention	91	5%	94	4%
Opioid Svcs	127	7%	267	12%
Outpatient Level 1	118	6%	122	5%
Outpatient Level 2	679	35%	744	32%
Outpatient Level 3	457	24%	524	23%
Outpatient Level 4	68	4%	71	3%
Residential	149	8%	170	7%
Total	1940	100%	2319	100%

Source: Referral/Report Database

* Referrals through June 30, 2002

Data allows duplication across categories. Totals may be overstated.

Clients may have been counted in more than one service category.

**Referrals by service level excludes clients referred out of county for services.

Appendix Table III - Referrals Summarized by Court and Service Level

Source	Service Level	# of Clients	# of Clients	# of Referrals*	% of Referrals
Alameda	Outpatient	13	81%	13	81%
Alameda	Residential	3	19%	3	19%
	Total	16	100%	16	100%
Berkeley	Outpatient	1	14%	1	14%
Berkeley	Day Treatment	5	71%	5	71%
Berkeley	Residential	1	14%	1	14%
	Total	7	100%	7	100%
Fremont	Early Intervention	1	0%	1	0%
Fremont	Outpatient	22	8%	23	7%
Fremont	Day Treatment	5	2%	6	2%
Fremont	Residential	251	87%	282	88%
Fremont	Opioid Svcs	10	3%	10	3%
	Out of County	23	8%	24	7%
	Total	289	100%	322	100%
Hayward	Early Intervention	5	2%	5	2%
Hayward	Outpatient	12	4%	12	4%
Hayward	Day Treatment	23	7%	24	7%
Hayward	Residential	253	81%	271	81%
Hayward	Opioid Svcs	21	7%	21	6%
	Out of County	17	5%	18	5%
	Total	314	100%	333	100%
Oakland	Early Intervention	213	17%	298	20%
Oakland	Outpatient	38	3%	45	3%
Oakland	Day Treatment	77	6%	104	7%
Oakland	Residential	801	65%	956	63%
Oakland	Opioid Svcs	100	8%	125	8%
	Total	1229	100%	1528	100%
Pleasanton/Livermore	Early Intervention	3	6%	3	5%
Pleasanton/Livermore	Outpatient	2	4%	2	3%
Pleasanton/Livermore	Residential	44	85%	51	85%
Pleasanton/Livermore	Opioid Svcs	3	6%	4	7%
	Total	52	100%	60	100%
Other County	Early Intervention	5	5%	6	6%
Other County	Outpatient	10	10%	10	10%
Other County	Day Treatment	3	3%	3	3%
Other County	Residential	79	78%	81	78%
Other County	Opioid Svcs	4	4%	4	4%
	Total	101	100%	104	100%
Parole	Early Intervention	1	2%	1	2%
Parole	Outpatient	44	80%	5	9%
Parole	Day Treatment	5	9%	5	9%
Parole	Residential	47	85%	48	84%
Parole	Opioid Svcs	3	5%	4	7%
	Total	55	100%	57	100%
Unknown	Early Intervention	5	9%	5	8%
Unknown	Outpatient	38	67%	39	66%
Unknown	Day Treatment	2	4%	3	5%
Unknown	Residential	3	5%	2	3%
Unknown	Opioid Svcs	2	4%	8	14%
Unknown	Out of County	7	12%	2	3%
	Total	57	100%	59	100%

Source: Referral/Report Database

* Referrals through June 30, 2002

Data allows for duplication of clients across service types. Totals may be over stated.

Clients may have been counted in more than one service category.

Appendix Table IV - Clients by Agency and Service Type

Agency	Service Type	# of Clients*	Total Clients
Alameda Med Center	Outpatient	232	
Alameda Med Center	Day Treatment	46	
Alameda Med Center	Out of County	1	279
Bi- Bett	Outpatient	191	191
CURA	Residential	30	30
EBCRP	Outpatient	25	
EBCRP	Day Treatment	62	
EBCRP	Residential	13	100
Grace Inc.	Residential	9	9
HAART	Opioid	1	1
Horizon	Residential	37	37
Latino Commission	Outpatient	82	
Latino Commission	Residential	3	85
Milestones	Residential	41	41
New Bridge Foundation	Outpatient	35	
New Bridge Foundation	Day Treatment	16	
New Bridge Foundation	Residential	21	72
New Leaf	Outpatient	97	
New Leaf	Out of County	1	98
Options	Outpatient	187	
Options	Day Treatment	116	303
Second Chance	Early Intervention	73	
Second Chance	Outpatient	555	628
Solid Foundation	Outpatient	14	
Solid Foundation	Residential	6	20
Successful Alternatives	Opioid	5	5
Valley	Early Intervention	10	
Valley	Outpatient	49	59
Xanthos	Early Intervention	8	
Xanthos	Outpatient	32	40
ZDK	Opioid	65	65
Total		2063	2063

Source: Referral/Report Database

* Data from referrals through June 30, 2002

* Data allows for duplication of clients across service types. Totals may be over stated.

Appendix Table V - Alameda County Proposition 36 Client Information

Clients With Records Of Engagement (episodes) Opened 7/1/01 to 06/30/02									
n=1,425									
Sex			Ethnicity						
Male	1031	72%	White	450	32%				
Female	394	28%	African American	638	45%				
	1425	100%	Native American	14	1%				
			Hispanic	161	11%				
			Chinese	4	0%				
			Filipino	30	2%				
			Pacific Islander/ Asian	17	1%				
			Other	111	8%				
					0%				
					0%				
					0%				
				1425	100%				
			Employment						
Language			Status						
English	1368	96%	Part or full time training	86	6%				
Spanish	29	2%	Unemployed/looking	0	0%				
Filipino Dialect	21	1%	Part time	423	30%				
Vietnamese	1	0%	Full time	575	40%				
Other	6	0%	Home-maker	325	23%				
	1425	100%	Rehab (part or full time)	16	1%				
				1425	100%				
Primary Diagnosis			Substance Problems Primary			Substance Problems Secondary			
Alcohol Dependence	89	6%	Heroin	238	17%	Heroin	28	2%	
Alcohol Abuse	75	5%	Alcohol	171	12%	Alcohol	328	23%	
Opioid Dependence	179	13%	Methamphetamines	412	29%	Methamphetamines	94	7%	
Opioid Abuse	51	4%	Other Amphetamines	12	1%	Other Amphetamines	11	1%	
Cocaine Dependence	228	16%	Cocaine	393	28%	Cocaine	157	11%	
Cocaine Abuse	171	12%	Marijuana/Hashish	179	13%	Marijuana/Hashish	212	15%	
Cannabis Dependence	86	6%	Other	13	1%	Other Amphetamines	12	1%	
Cannabis Abuse	79	6%	None	7	0%	None	583	41%	
Amphetamine Dependence	311	22%		1425	100%		1425	100%	
Amphetamine Abuse	114	8%							
Phencyclidine Dependence	25	2%							
Other	17	1%							
	1425	100%							