

# LOS ANGELES COUNTY – DEPARTMENT OF PUBLIC HEALTH SUBSTANCE ABUSE PREVENTION AND CONTROL

## DRINKING UNDER THE INFLUENCE SYSTEM (DUI)

The purpose of this manual is to provide you with detailed instruction guidance as to how the application works. The current DUI system is completely web based. All you need is a username and a password to log in to the system.

Our DUI website address is: <https://sapccis.ph.lacounty.gov/DUI>

### User log in:

You will have a username and password to log in.

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SUBSTANCE ABUSE PREVENTION AND CONTROL  
DRIVING UNDER THE INFLUENCE SYSTEM

Tuesday, June 8, 2021 [\[ Log In \]](#)

**Access to this device is restricted to authorized persons only.  
Any unauthorized access may result in disciplinary action or criminal prosecution.  
ALL CONNECTIONS ARE MONITORED AND LOGGED.  
Use this device is deemed acceptance of these conditions.**

**Log In**

Please enter your username and password.

**Account Information**

Username:

Password:

Figure1: Password screen

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After logging in to the system – database main screen shows up.



There are five menu items:

1. Home
2. Participant Information
3. Provider Reports
4. Change Password
5. User Manual

### Changing your password

If you want to change password – please click on the change password. The following screen shows up where you can enter current password once and new

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password two times and click on “Change Password” to activate the new

CHANGE PASSWORD

Use the form below to change your password.

New passwords are required to be a minimum of 6 characters in length.

Account Information

Old Password:

New Password:

Confirm New Password:

**Participant Information** contains two sub

menu items.

- 1) New Intake
- 2) Existing Participants

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DEMO, INC.

### CLIENT INTAKE/CHANGE OF STATUS

11. Docket Citation # - No. Of Def:  01 ▼

When entering Docket Citation # - please make sure not to enter the extension with hyphen

Intake Type:  ▼

Select Location:  ▼

Select Referred Program:  ▼

1. Provider Number: 5486140XX

2. Participant's Name:

Last Name:

First Name:

Middle Name:

Legal Name:

3. Birthdate:

Age:

4. Sex:  ▼

Citation Number:

7. Client ID:

8. Participant's Zip Code:  ▼

9. Enrollment Date:

Arrest Date:

10. Conviction Date:

Client Phone Number:

[Non LA County Court Click Here](#)

Upon entering the intake information click on the 'Submit' button to complete the transaction. After the record has been saved it will show up in existing participant menu

### PARTICIPANT LISTING

Search By:

All  Active  Not Active

Case Number	Last Name	First Name	Enrollment Date	Conviction Date	Edit
<a href="#">Select</a> 2121256-01	bugs	bunny	6/1/2015	6/18/2014	<a href="#">Edit</a> <a href="#">Print</a>
<a href="#">Select</a> mp321-01	Ed	Mr	6/29/2015	6/8/2015	<a href="#">Edit</a> <a href="#">Print</a>
<a href="#">Select</a> 454232-01	Fllinstone	Fred	6/4/2015	6/16/2015	<a href="#">Edit</a> <a href="#">Print</a>
<a href="#">Select</a> 1242565-01	Simpson	Homer	5/12/2014	5/25/2015	<a href="#">Edit</a> <a href="#">Print</a>
<a href="#">Select</a> 4789651-01	TestLast	TestFirst	6/24/2015	6/25/2015	<a href="#">Edit</a> <a href="#">Print</a>

CHANGE OF STATUS ( [\[+\] Insert New](#) )

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You can search the clients by first name, last name or case number.

The screenshot displays a web browser window with the URL <https://sapccis.ph.lacounty.gov/DUI/Intake/ProviderNewClientEntry2.aspx>. The browser's address bar shows the URL and a search field. The page content includes a navigation menu with options: Home, Participant Information, Provider Reports, Change Password, and User Manual. A dropdown menu under 'Provider Reports' is open, listing: Remittance Report, Enrollment Summary, State Quarterly Report, Find Enrolled Client List, Change of Program Client List, and Transfer Client List. The main form area is titled 'CHANGE OF STATUS' and contains several input fields and dropdown menus. On the left side, there is a field for '11. Docket Citation # - No. Of Def.' with a value of '01' and a dropdown arrow. Below it is a note: 'When entering Docket Citation # - please make sure not to enter the extension with hyphen'. The 'Intake Type' is set to 'New Intake'. 'Select Location' is '123 Main Street' and 'Select Referred Program' is 'AB541'. The '1. Provider Number' is '5486140XX'. Under '2. Participant's Name', there are fields for 'Last Name', 'First Name', and 'Middle Name'. On the right side, there are fields for 'Citation Number', '7. Client ID', '8. Participant's Zip Code', '9. Enrollment Date', and 'Arrest Date'. The browser's taskbar at the bottom shows the Windows logo, a search bar with 'Type here to search', and various application icons. The system tray on the right shows the time '2:08 PM' and the date '6/8/2021'.

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### Provider Report Menu

- 1) Remittance Report
- 2) Enrollment Summary
- 3) State Quarterly Report
- 4) Find Enrolled Client List
- 5) Change of Program Client List
- 6) Transfer Client List

Provider Report menu actually provides various reports based on client input. Please review each and every item to get an idea of these reports functionality and usefulness.

Actual Summary:

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH  
SUBSTANCE ABUSE PREVENTION AND CONTROL  
Summary of Services Remittance Report  
DRIVER SAFETY AWARENESS PROGRAM, INC.  
For the Month of: 07/2014

	AB341		AB762		AB1333		SB38		SB1176		SB1265		PC1000		PC1210		Total	
	Month	YTD	Month	YTD	Month	YTD	Month	YTD	Month	YTD	Month	YTD	Month	YTD	Month	YTD	Month	YTD
<b>A. ADMISSIONS</b>																		
1. Participants Admitted	0	1	0	1	0	0	0	0	0	2	0	0	0	0	0	0	0	4
2. Transfers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>B. STATUS</b>																		
1. Completions	0	0	0	0	0	0	0	0	0	0	0	0					0	0
2. Transfers to LA	0	0	0	0	0	0	0	0	0	0	0	0					0	0
3. Transfers Outside LA	0	0	0	0	0	0	0	0	0	0	0	0					0	0
4. Deceased	0	0	0	0	0	0	0	0	0	0	0	0					0	0
5. Referred Back to Court	0	0	0	0	0	0	0	0	0	0	0	0					0	0
6. Re-enrolled	0	0	0	1	0	0	0	0	0	0	0	0					0	1
7. Terminated By the Court	0	0	0	0	0	0	0	0	0	0	0	0					0	0
<b>C. ADMINISTRATIVE FEES</b>																		
1. Total Admissions	0	1	0	1	0	0	0	0	0	2	0	0	0	0	0	0	0	4
2. Less: Total GR. Indigent	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
3. Total Non Indigent	0	1	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	3
4. Administration Fee	\$21.00		\$21.00		\$21.00		\$46.00		\$21.00		\$46.00		n/a		n/a			
Prior Period Adjustment	0	0	0	0	0	0	0	0	0	0	0	0					0	0
5. Amount Due	0.00	21.00	0.00	21.00	0.00	0.00	0.00	0.00	0.00	21.00	0.00	0.00					\$0.00	\$63.00
6. Total Paid (New Payment Received, View History)																		\$0
7. Balance																	0.00	-63.00

Year to Date (YTD) as of: 6/29/2015

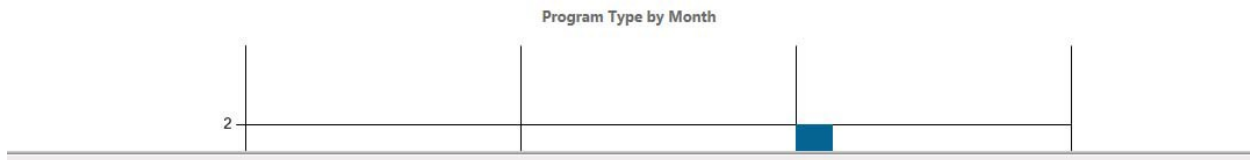
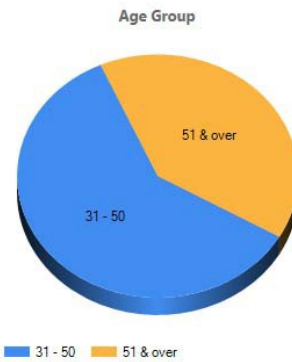
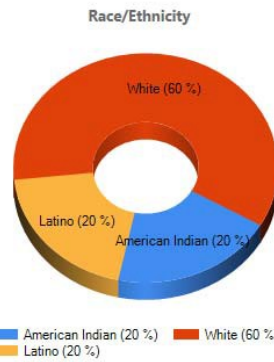
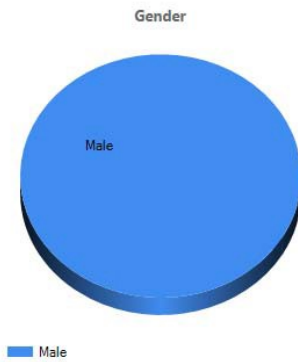
# LOS ANGELES COUNTY – DEPARTMENT OF PUBLIC HEALTH SUBSTANCE ABUSE PREVENTION AND CONTROL

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Enrollment Summary:

YEAR-TO-DATE ENROLLMENTS

Address	AB541	AB762	AB1353	SB38	SB1176	SB1365	PC1000	PC1210
16909 PARTHENIA Street, North Hills	2	1	0	0	2	0	0	0



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Quarterly Summary:

Location:  Program:  Fiscal Year:  QTR:

1 of 1 100% Find | Next

State of California - Health and Human Services Agency

Department of Health Care Services  
Substance Use Disorder Compliance Division

### FIRST OFFENDER PROGRAM QUARTERLY LICENSING AND PARTICIPANT ENROLLMENT REPORT

**FIRST OFFENDER PROGRAM**

INSTRUCTIONS: This form is to be used for computing quarterly licensing fees due and reporting enrollment and participant data for the respective DUI program. See reverse for completing and mailing instructions.			
PART 1 - PROVIDER INFORMATION			
1. Program Name (as shown on DHCS license)		DHCS License Number	
DRIVER SAFETY AWARENESS PROGRAM, INC.			
2. Street Address			
16909 PARTHENIA Street			
3. City	County	Zip Code	
North Hills	Los Angeles	91343	
4. Contact Person		Telephone	
		(818) 830-8870	
PART 2 - LICENSE FEE COMPUTATION			
5. Check quarter for which you are reporting.		Fiscal Year: 2013-2014	
<input checked="" type="checkbox"/> 1st Quarter (July 1 - Sept 30)	<input type="checkbox"/> 2nd Quarter (Oct 1 - Dec 31)	<input type="checkbox"/> 3rd Quarter (Jan 1 - Mar 31)	<input type="checkbox"/> 4th Quarter (Apr 1 - June 30)
6. Enter months being reported	7. Number of new participants enrolled		
		a. First Offender (V.C. 23152-23153)	b. Ages 18-20 Years (V.C. 23140-2nd Offense)
	July	a. 0	b. 0
	August	a. 0	b. 0
	September	a. 0	b. 0
8. SUBTOTAL new participants enrolled		a. 0	b. 0
9. TOTAL Licensing fee due (multiply line 8 by \$10.00)		a. \$0.00	b. \$0.00
PART 3 - STATISTICAL INFORMATION			
		a.	b.

State quarterly report is developed per some of your request to help automate additional work that you go through to prepare and submit to the state.



LOS ANGELES COUNTY – DEPARTMENT OF PUBLIC HEALTH  
SUBSTANCE ABUSE PREVENTION AND CONTROL

**DRINKING UNDER THE INFLUENCE SYSTEM (DUI)**

**Help:**

If you need any help please contact the following persons:

William Mendoza: (626) 299 - 4153

Martin Nguyen: (626) 299 - 3205

Akbar Siddiqui: (626) 299-4599