SUBSTANCE ABUSE AND CRIME PREVENTION ACT OF 2000

PROPOSITION 36
ANNUAL REPORT 2001-2002

ADPA

Alcohol & Drug Program Administration

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COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES
PUBLIC HEALTH

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EXECUTIVE SUMMARY

The Substance Abuse and Crime Prevention Act of 2000, also known as Proposition 36, amended existing drug sentencing laws to require criminal defendants who are convicted of a non-violent drug offense to be placed in drug treatment as a condition of probation, instead of incarceration. Drug treatment is also required for State parolees convicted of a non-violent drug related violation of parole. To cover local costs for treatment programs and other necessary services, Proposition 36 appropriates statewide funding of $120 million per year through Fiscal Year (FY) 2005-06, with an initial FY 2000-01 appropriation of $60 million for planning and implementation. Los Angeles County received $30 million for FY 2001-02 and anticipates similar funding for subsequent fiscal years through FY 2005-06. Statewide implementation of Proposition 36 began on July 1, 2001.

Los Angeles County utilized a coordinated, collaborative approach in implementing Proposition 36, involving the Court, District Attorney, Public Defender, Chief Probation Officer, Department of Health Services Alcohol and Drug Program Administration (ADPA), and community-based treatment providers. The Board of Supervisors designated the Countywide Criminal Justice Coordination Committee Proposition 36 Implementation Task Force as the advisory group responsible for the development of policy and procedures for the implementation of Proposition 36, and the ADPA as the lead agency for Los Angeles County's Proposition 36 responsibilities.

Overall, Los Angeles County's Proposition 36 program has been a success. Since the program began implementation on July 1, 2001 through June 30, 2002, a total of 8,329 defendants were convicted by the Court and sentenced to participate in Proposition 36 treatment services. Of the 8,329 eligible defendants, 6,920 were involved in treatment assessment. Total clients placed in treatment programs for FY 2001-02 were 5,997. Proposition 36 participants reflect the diversity of Los Angeles County and no single population has been receiving a greater portion of services. The proportion of male to female participants (80 percent to 20 percent) is reflective of the criminal justice population as well as Proposition 36. The percentage breakdowns for all Service Planning Areas have been relatively stable. In addition to providing quality services to the greatest number of Proposition 36 participants in the State, Los Angeles County:

- Sponsors Regional Coordinating Council meetings to enhance community involvement and promote on-going communication and collaboration with the Proposition 36 agencies and stakeholders
- Maintains the Proposition 36 Help Line to assist all involved Proposition 36 agencies and participants
- Provides public education briefings and training sessions on Proposition 36 and its implementation/operations
- Continues to develop tools (Proposition 36 newsletters and Website) to educate all Proposition 36 stakeholders
- Maintains the Treatment Courts and Probation eXchange (TCPX) system for data collection and program evaluation

The greatest challenge in the first year of Proposition 36 was to enhance the current collaboration and increase the availability of treatment services with minimal new funds. This challenge has been met as evidenced by the increased treatment services available for non-violent drug offenders. Long-term issues of concern include ensuring continued quality services and funding after FY 2005-06.

INTRODUCTION/BACKGROUND

On November 7, 2000, California voters passed the Substance Abuse and Crime Prevention Act of 2000, also known as Proposition 36. The purpose was to enhance public safety by reducing drug-related crime and preserving jail and prison space for violent offenders. Proposition 36 amended existing drug sentencing laws to require that adult criminal defendants who are convicted of possession, use, transportation for personal use, or being under the influence of a controlled substance be placed in drug treatment as a condition of probation, instead of incarceration. Proposition 36 also applies to State parolees who are convicted of non-violent drug offenses or who commit drug-related parole violations. Eligible offenders receive up to one year of drug treatment followed by six months of after-care. Vocational training, family counseling, literacy training and other services may also be provided. Proposition 36 allows for the dismissal of charges upon successful completion of treatment.

Proposition 36 became effective on July 1, 2001 and makes significant changes in the way many drug offenders are handled by both the criminal justice and treatment delivery systems. Court supervised treatment and probation are now required for offenders to break the cycle of drugs and crime, while still promoting public safety. Proposition 36 specifically does not include sales or anyone with prior violent felony convictions. Most non-violent offenders who are convicted of possession or under-the-influence offenses may now receive treatment in the community, in lieu of incarceration. This represents a significant shift in the handling of this population and provides an opportunity for both the treatment delivery system and the criminal justice system to move toward a more holistic approach of handling substance abuse offenders. Proposition 36 specifically requires that all treatment programs be licensed or certified by the State Department of Alcohol and Drug Programs.

To cover the costs for treatment programs and other necessary services, Proposition 36 appropriates statewide funding of $120 million per year through Fiscal Year (FY) 2005-06. An initial allocation of $60 million was provided for FY 2000-01 for planning and implementation. Senate Bill (SB) 223[1] allocated $8.4 million from the Federal Substance Abuse Prevention and Treatment Block Grant funds for the purposes of drug testing. Proposition 36 has no overall sunset date, but the funding appropriated will end at the close of FY 2005-06.

[1] Senate Bill 223 (Chapter 721, Statutes of 2001)

CHAPTER ONE

THE COUNTY OF LOS ANGELES IMPLEMENTATION PLAN

The County of Los Angeles is committed to successfully implementing Proposition 36 while preserving accountability, flexibility, quality treatment and appropriate supervision and public safety.

On November 15, 2000, the Countywide Criminal Justice Coordination Committee (CCJCC) established the Proposition 36 Implementation Task Force to develop a planning process for a comprehensive system of care for drug offenders sentenced under the new law. The Task Force was comprised of approximately 60 members representing County and City criminal justice agencies, judicial officers, the Chief Administrative Office, various County Departments including Health Services, Probation, Mental Health, Public Social Services, and various drug treatment provider associations. (Attachment 1)

On February 20, 2001, the Board of Supervisors of the County of Los Angeles resolved the following:

- Designated the County of Los Angeles Department of Health Services Alcohol and Drug Program Administration (ADPA) as the lead agency for Los Angeles County's Substance Abuse and Crime Prevention Act of 2000 responsibilities;
- Designated the Countywide Criminal Justice Coordination Committee Proposition 36 Implementation Task Force as the advisory group responsible for the development of policy and procedures for the coordinated implementation of the Act among all involved County departments and the Court;
- Assured that the County of Los Angeles shall comply with the provisions of the Act and the California Code of Regulations, Title 9, Division 4, Chapter 2.5, and
- Assured that the County of Los Angeles has established a Proposition 36 trust fund and shall deposit all funds received into that trust fund.

On May 15, 2001, as required by the regulations, the Board of Supervisors unanimously approved the Los Angeles County Plan. This was submitted to and approved by the State Department of Alcohol and Drug Programs, thereby allowing the County to receive its funding allocation.

Los Angeles County received $15.7 million for FY 2000-01, and $30 million for FY 2001-02. It anticipates receiving similar funding for subsequent fiscal years through FY 2005-06.

The funds are specifically earmarked for Proposition 36 services and must be used by the County to meet the statutory requirements for community-based drug treatment, probation supervision, court monitoring, and other related services. In addition, Los Angeles County received $2.2 million for the purpose of drug testing from the State for FY 2001-02. On July 1, 2001, Proposition 36 treatment services were implemented in Los Angeles County.

I. PROGRAM IMPLEMENTATION

Successful implementation and operation of the Proposition 36 program requires coordinated collaboration between the Court, the ADPA, the Probation Department, the District Attorney, the Public Defender, and community-based treatment providers in the County.

A. Court Processing

Following submission of a plea, defendants are referred to one of 26 designated Proposition 36 Monitoring Courts for the purposes of sentencing, monitoring treatment progress, and, when necessary conducting violation hearings to revoke probation. (Attachment 2)

Once eligibility has been determined, participants are placed on formal probation and ordered to participate in program of treatment services. Many of the Proposition 36 Monitoring Court bench officers are also experienced Drug Court judges. The bench officers have an understanding of the different levels of treatment, the need to intensify treatment services, the use of drug testing as a therapeutic tool, and the provision of incentives to facilitate recovery. Active and consistent court supervision is essential to the success of the drug treatment services required by Proposition 36.

While Proposition 36 allows the Court to sanction offenders who are not amenable to treatment, successful completion of the treatment program also provides an important incentive for offenders. If there have been no violations of probation, all fees and fines are paid, and the Court finds reasonable cause to believe that the participant will not abuse controlled substances in the future, the Court may dismiss the case.

B. Probation Processing

The Probation Department's Pretrial Services Division assesses Proposition 36 eligibility after the District Attorney and defense counsel have screened offenders. This assessment consists of a criminal history review to determine whether a defendant must be excluded from the benefits of Proposition 36 based on prior criminal convictions or concurrent charges. Following conviction on eligible charges and the offender's willingness to participate in Proposition 36, the offender is ordered by the Court to report to a Community Assessment Service Center (CASC) for an assessment of addiction severity and referral to an

appropriate community-based treatment provider. Eleven CASC sites were established throughout the County to process Proposition 36 participants. (Attachment 3)

Deputy Probation Officers (DPOs) are co-located at the CASCs and provide participants with an orientation as to the terms and conditions of probation, and to coordinate the initial provision of treatment and supervision services. Once a participant has been interviewed by both treatment and probation staff at the CASC, he/she is immediately placed into a community-based treatment program. The participant is ordered to return to Court within 30 days for monitoring as to compliance with all Court-ordered conditions of probation and a review of the initial treatment plan. Progress report dates will be set by the Proposition 36 Monitoring Courts according to risk assessment and ongoing compliance/non-compliance with set orders.

The DPOs obtain information from the treatment provider on the progress of the participant in treatment, including drug-testing results, attendance at required counseling sessions and meetings, and other necessary information. Progress reports are submitted by Probation and treatment providers to the Court on a regular basis, or as ordered. All violations are reported to the Court by Probation within 72 hours. Minimum length of probation supervision is approximately 36 months, unless the participant's progress in treatment merits early termination and dismissal of his/her case.

C. Treatment Delivery

ADPA contracts with community-based substance treatment and recovery programs to provide a comprehensive array of services. This existing system of treatment and recovery programs serves as the foundation for providing treatment services for Proposition 36 participants.

The first step of treatment involves the referral of the participant from the Court to a Community Assessment Service Center (CASC) for an assessment of treatment needs. A professional counselor, utilizing the Addiction Severity Index (ASI), assesses each participant. The ASI is a nationally recognized tool used widely in the addiction treatment field to determine the level of each person's substance abuse problems and other life situations.

Treatment services for Proposition 36 participants consist of a three-level system increasing in duration and intensity depending on the assessed severity of addiction, coupled with the criminal history risk assessment. Those who have a low level of severity receive outpatient services (including a combination of individual, family and group counseling sessions), self-help group meetings, and supplemental treatment services, which include literacy training, vocational guidance, mental health services, health services and transitional housing. Those participants assessed at mid to high severity levels receive more intensive services

such as day treatment, residential detoxification, residential treatment and narcotic replacement therapy, as indicated, in addition to the range of services provided to lower-level participants. Random observed drug testing is conducted for all participants. (Attachment 4)

Continuing care services are available for six months following completion of the more intensive treatment services, as court ordered, for participants at all levels.

The Monitoring Court bench officer, in consultation with the treatment provider and DPO, maintains the flexibility to adjust a participant's treatment plan based on the participant's compliance or non-compliance with program requirements.

D. Data Collection and Reporting

The increasing number of participants in treatment being monitored by the Court and Probation, as well as the addition of regular progress reports and violation procedures, necessitates the need for a very rapid flow of information among all parties involved. The Proposition 36 Monitoring Courts require detailed information about each participant, such as progress in treatment and compliance with treatment program requirements, as well as drug testing results. Overall data are also needed for statistical and reporting purposes and program analysis.

A sophisticated information collection, sharing and transmission system, the Treatment Court and Probation eXchange (TCPX) information system, was developed in July 2001. The system was specifically designed to support the reporting and statistical needs for the Superior Court, Probation Department, and ADPA for the implementation of Proposition 36. The system was developed to provide a mechanism for:

- Recording defendant treatment assessment information;
- Assigning treatment provider(s) based on participants needs;
- Standardizing progress reports and treatment plans;
- Electronically submitting reports to the courts; and
- Providing statistical information.

On-going development of the system is continuing to expand statistical reporting capabilities and improve its efficiency. Funding for the system is supported through the County's Proposition 36 allocation.

II. PROGRAM OVERSIGHT

The implementation of Proposition 36 requires a coordinated and collaborative strategy between the Court, Probation, ADPA, other County agencies, the Board of Prison Terms, the Department of Corrections/Parole, community-based treatment providers and other key stakeholders. As noted earlier, the County Board of Supervisors established the CCJCC Proposition 36 Implementation Task Force as the official advisory group for the coordinated implementation of the program. Several work groups were established to implement Proposition 36 and to ensure that the program met its legal and operational requirements. These work groups included: Case Processing and Supervision; Treatment Services Delivery; Data Evaluation; and, Legislation and Fiscal.

The Proposition 36 Executive Steering Committee was established by the Implementation Task Force as a smaller working group to guide the daily implementation and on-going operations of Proposition 36 in Los Angeles County. Membership of the Steering Committee includes representatives from the Court, the Public Defender, the District Attorney, the Probation Department, the Sheriff's Department, CCJCC, the Board of Prison Terms, State Parole, the ADPA, and treatment provider associations. (Attachment 5)

Community input and involvement were also critical pieces of the implementation of Proposition 36. Public meetings were conducted in January and April of 2001 to obtain input and final approval of the Los Angeles County Implementation Plan prior to submission to the Board of Supervisors. Suggestions included increasing local and community involvement. As a result, four Regional Coordinating Councils were established to identify and address issues of local concern and to ensure communication between the community members and the Executive Steering Committee.

CHAPTER TWO

ACCOMPLISHMENTS

I. TREATMENT SERVICES

Since implementation began on July 1, 2001, ADPA has provided an array of comprehensive treatment services for Proposition 36 participants.

A. Community Assessment Service Centers (CASCs)

ADPA utilized the services of CASCs to provide individual assessments for all Proposition 36 participants and to place the participants in appropriate treatment services. ADPA contracted with eleven CASCs to specifically provide Proposition 36 assessments. These CASCs were located in the neighboring areas of those courts with the highest drug-related cases.

Service Planning Area (SPA)[1]	CASC	Location
SPA 1 (Antelope Valley)	Tarzana Treatment Center	Lancaster
SPA 2 (San Fernando)	Tarzana Treatment Center	Tarzana
SPA 3 (San Gabriel)	Prototypes	El Monte
SPA 3 (San Gabriel)	Prototypes	Pasadena
SPA 3 (San Gabriel)	Prototypes	Pomona
SPA 4 (Metro)	Homeless Health Care	Los Angeles
SPA 5 (West)	Didi Hirsch	Culver City
SPA 6 (South)	Integrated Care System	Los Angeles
SPA 7 (East)	California Hispanic Commission	Pico Rivera
SPA 8 (South Bay/Harbor)	Behavioral Health Services	Gardena
SPA 8 (South Bay/Harbor)	Behavioral Health Services	Long Beach

[1] Service Planning Areas, developed by the Children=s Planning Council and approved by the Board of Supervisors in 1993, serve as the basic geographic structure for integrated planning, service coordination, data collection, and information sharing.

A Deputy Probation Officer (DPO) was co-located on site at each CASC to conduct probation risk assessments and orientation. Due to the high volume of Proposition 36 assessment activities, the number was increased to two DPOs at the CASCs with the highest volume of clients. These include Homeless Health Care (Los Angeles), Behavioral Health Services (Long Beach), Integrated Care Systems (South Central Los Angeles), Prototypes (El Monte), and California Hispanic Commission (Pico Rivera).

B. Treatment Recovery Programs

For FY 2001-02, ADPA provided an array of comprehensive services to Proposition 36 participants through its network of treatment and recovery program providers. ADPA contracted with approximately 80 certified and/or licensed treatment agencies that provided services at approximately 200 sites throughout Los Angeles County. These services include outpatient counseling services, narcotic treatment therapy, daycare habilitative treatment, and residential treatment services. Considerations in selecting treatment facilities for delivering Proposition 36 services included proximity, as well as cultural and linguistic capabilities. (Attachment 6)

C. Drug Testing

Required random drug testing for Proposition 36 participants range from 1-2 times per week and is included in all levels of treatment. While urinalysis is the primary type of drug testing, alternative testing (dip sticks) is also acceptable. County guidelines specifically require that testing is random and observed; all treatment staff must be trained in appropriate protocols and procedures for collection, and maintaining the chain of custody for urine samples.

Proposition 36 regulations prohibit funds to be used for the purpose of drug testing. Initially, treatment providers had to either absorb the expenses and/or charge participants for the costs based on their ability to pay. Senate Bill 223, signed by Governor Davis on October 10, 2001, allocated $8.4 million for drug testing, of which Los Angeles County received $2.2 million.

ADPA issued a Request For Proposals (RFP) for Proposition 36 drug testing services in November 2001. The purpose of the RFP was to select one laboratory with the demonstrated capacity to transport, analyze, and report drug-testing results to all Proposition 36 treatment providers within a specified time frame. A contract for services with the Laboratory Corporation of America (LabCorp) was approved by the Board of Supervisors on June 18, 2002.

D. Evaluation

Proposition 36 specifically requires that the State Department of Alcohol and Drug Programs (ADP) contract with a public university to conduct a long-term study aimed at evaluating the effectiveness and financial impact of the programs that are funded. The Integrated Substance Abuse Program (ISAP) of the University of California, Los Angeles (UCLA) was selected to conduct this evaluation. From the data collected by the counties, the ADP will issue comprehensive reports evaluating the effectiveness and fiscal impact of the program, including the implementation process, review of incarceration costs and changes in the crime rate, prison and jail construction, and welfare costs. The study will cover the period from the implementation of operation on July 1, 2001 through its sunset on June 30, 2006.

Los Angeles County was also selected as one of the ten AFocus Counties@ for the statewide evaluation project. The selection of the Focus Counties was based on the following criteria:

- Mix of urban and rural counties,
- Broad geographic coverage of the state,
- Capabilities for collecting Proposition 36-relevant data, and
- Diversity of implementation strategies.

The scope and terms of collaboration between the Focus Counties and ISAP was tailored to each County and designed to serve both the evaluation needs and county-specific purposes. As a Focus County, Los Angeles is responsible for facilitating contact with Proposition 36 participants, assisting ISAP in accessing program data, and participating in stakeholder surveys and focus groups.

II. FIRST YEAR PARTICIPANTS

Since the beginning of operation on July 1, 2001 through June 30, 2002, a total of 8,329 defendants (6,428 male and 1,901 female) were convicted by the Court, and sentenced to participate in Proposition 36 treatment services. For the most part, the defendants entering the program were felons (69 percent), and the primary conviction charge was possession of a controlled substance. The proportion of male to female participants (77 percent to 23 percent) was similar to the overall criminal justice population. The breakout of first year participants is as follows:

- Clients sentenced to Proposition 36 in L.A. County 8,329
- Clients involved in treatment assessment 6,920

***Difference (1,409) reflects: 803 - Clients on bench warrant status**
606 - Clients detained/in custody

- Clients placed in treatment (L.A. County referrals) 5,901

***Difference (1,019) reflects: 628 - Clients yet to make appointment**
391 - Appointment made/to be assessed

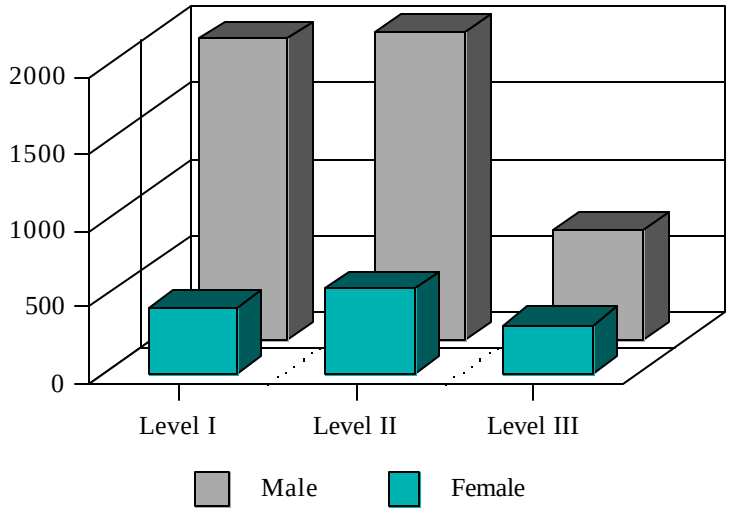
- Clients referred to L.A. County for treatment (Out of County referrals) 96
- Total clients placed in treatment 5,997
- Clients currently in treatment as of June 30, 2002 4,051

***Difference (1,946) reflects: 141 - Non-L.A. County clients referred to County of residence for treatment services**
86 - Third Party payer/private insurance treatment
524 - Treatment appointment made/client to begin services
248 - Satisfactorily discharged by treatment provider
60 - Successful completions/case dismissed by Court
887 - Terminated by Court or unsatisfactorily Discharged by treatment provider

The primary drug of choice was methamphetamine, followed closely by cocaine. As of June 30, 2002, sixty of the discharged participants have had their cases dismissed by the Court following successful completion of their treatment program.

Proposition 36 Participants in Treatment

By Levels of Treatment



5,997 participants were placed in the following treatment levels:

Level I had a total of **2,392** participants,
1,966 males (82 percent)
426 females (18 percent)

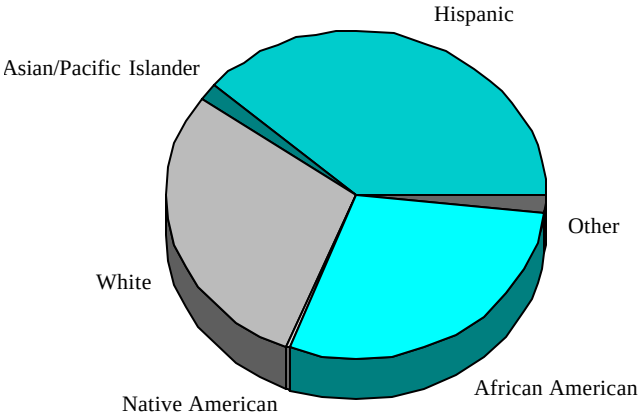
Level II had a total of **2,566** participants,
2,000 males (78 percent)
566 females (22 percent)

Level III had a total of **1,039** participants,
715 males (69 percent)
324 females (31 percent)

* * *

Proposition 36 Participants in Treatment

By Ethnicity/Race



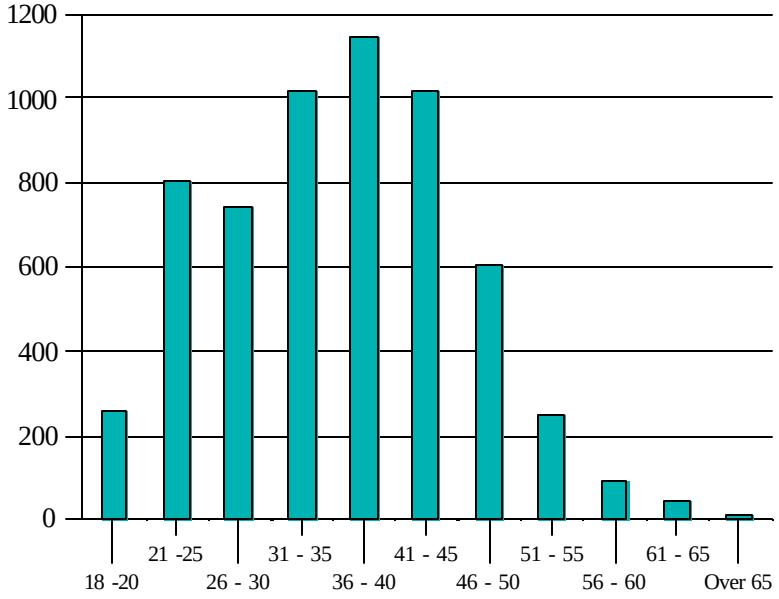
Treatment participants ethnicity/racial backgrounds were:

African American:	1,731	(28.9 percent)
Asian/Pacific Islander:	101	(1.7 percent)
Hispanic:	2,306	(38.5 percent)
Native American:	38	(0.6 percent)
White:	1,731	(28.9 percent)
Other:	90	(1.4 percent)

* * *

Proposition 36 Participants in Treatment

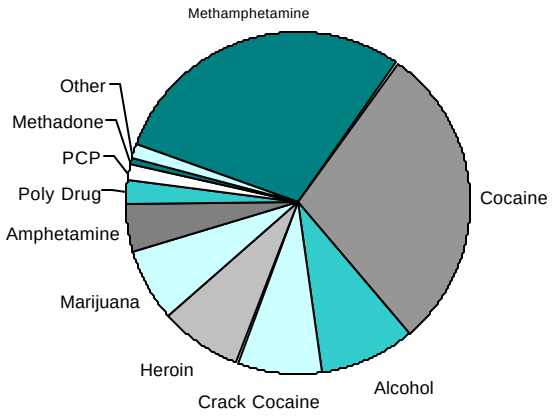
By Age Groups



Treatment participant by ages:

x18-20:	261	(4.4 percent)
x21-25:	804	(13.4 percent)
x26-30:	742	(12.4 percent)
x31-35:	1020	(17.0 percent)
x36-40:	1145	(19.1 percent)
x41-45:	1021	(17.0 percent)
x46-50:	609	(10.2 percent)
x51-55:	247	(4.1 percent)
x56-60:	90	(1.5 percent)
x61-65:	44	(0.7 percent)
xOver 65:	14	(0.2 percent)

Proposition 36 Participants in Treatment
Primary Drug of Choice

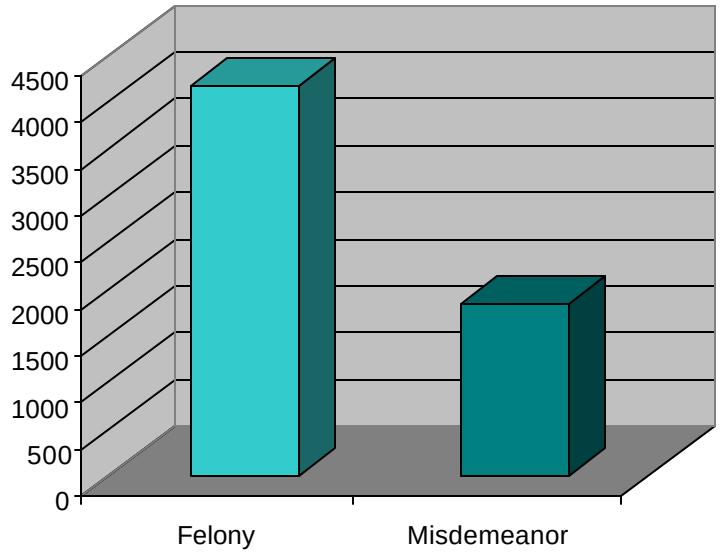


Treatment participants primary drug of choice were:

Methamphetamine	1,757	(29.3 percent)
Cocaine	1,739	(29.0 percent)
Alcohol	536	(8.94 percent)
Crack Cocaine	485	(8.09 percent)
Heroin	460	(7.67 percent)
Marijuana	424	(7.07 percent)
Amphetamine	271	(4.52 percent)
Poly Drug	132	(2.20 percent)
PCP	82	(1.37 percent)
Methadone	36	(0.60 percent)
Other	75	(1.25 percent)

* * *

Proposition 36 Participants in Treatment
Felony Versus Misdemeanor



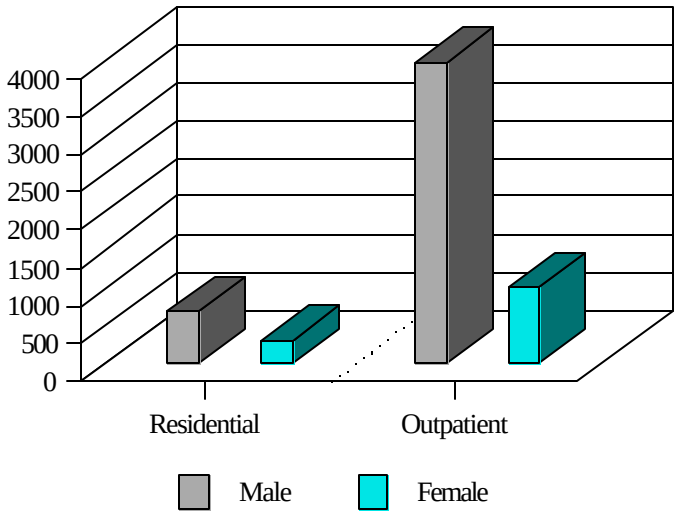
Treatment participants conviction levels were:

Felony	4,156	(69.3 percent)
Misdemeanor	1,841	(30.7 percent)

The overall participation rate in Proposition 36 outpatient treatment services was 3,993 males (80 percent) and 1,013 females (20 percent). However, residential programs reflected a higher female participation rate in this modality. Residential treatment services participation was 688 males (70 percent) and 303 females (30 percent).

Proposition 36 Participants in Treatment

By Modalities



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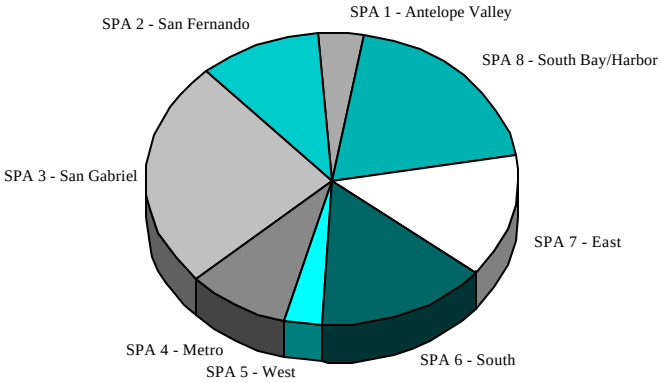
Proposition 36 Participants in Treatment

By Service Planning Areas (SPAs)



Proposition 36 participants by Service Planning Areas (SPAs) were:

SPA 1:	248	(4.1 percent)
SPA 2:	644	(10.7 percent)
SPA 3:	1,503	(25.1 percent)
SPA 4:	533	(8.9 percent)
SPA 5:	198	(3.3 percent)
SPA 6:	903	(15.1 percent)
SPA 7:	797	(13.3 percent)
SPA 8:	1,171	(19.5 percent)

* * *

III. COMMUNITY OUTREACH

A. Roundtable Meetings

In the fall of 2001, four Proposition 36 Regional Roundtable meetings were conducted for representatives of community-based substance abuse treatment programs, CASCs, the Court, Probation, District Attorney, Public Defender, ADPA, and other key Proposition 36 stakeholders. The roundtable meetings provided a venue to review and discuss the first 100 days of Proposition 36 operation. The meetings sought to ensure a high level of information sharing among all the involved agencies. It was determined that on-going communication was a key element for effective implementation and operation, and that local regionalized meetings should be conducted to continue this process.

B. Regional Coordinating Councils

As a result of the initial Regional Roundtable meetings, four Regional Coordinating Councils combining SPAs 1 and 2, SPAs 3 and 7, SPAs 4 and 6, and SPAs 5 and 8 were developed. The Councils were convened by ADPA in collaboration with Regional Court Coordinators. The purpose of the Regional Coordinating Councils is to:

- Coordinate collaboration and information-sharing among all the involved agencies;
- Enhance community involvement with the agencies;
- Provide a forum for sharing information and requesting direction from the Proposition 36 Executive Steering Committee; and,
- Provide information and support to the various agencies as appropriate.

The Councils are comprised of representatives from the local branches of the Court, Public Defender, District Attorney, Probation, Parole, CASCs, community-based treatment providers, and community representatives.

The Regional meetings continue to be conducted on a quarterly basis. The average attendance is approximately 75-100 persons per meeting. All meetings are open to the public and input is welcome.

C. Proposition 36 Help Line

ADPA established a toll-free Proposition 36 Help Line (1-888-742-7900) to provide assistance and information to treatment providers, criminal justice agencies, and the Court, as well as participants and the public regarding Proposition 36 services.

The Help Line is staffed Monday through Friday by the Proposition 36 Unit of the ADPA Contracts and Services Division between the hours of 8:00 a.m. - 5:00 p.m. The Help Line staff members:

- Answer and investigate inquiries and complaints regarding Proposition 36 services; and
- Provide technical assistance regarding programmatic, clinical, administrative and budgetary issues.

IV. COMMUNICATIONS

A. Public Education

ADPA staff members and Task Force representatives have participated in numerous statewide and local conferences and meetings to increase understanding of Proposition 36 and its implementation in Los Angeles County. During FY 2001-02, presentations were made to numerous organizations including: National Association of Blacks in Criminal Justice; Prototypes 12th Annual Skills Building Conference; AB 2034 Providers; the Providers' Collaborative of the San Fernando Valley; the Academy of Criminal Justice Sciences; and the California Society of Addiction Medicine.

B. Media

Proposition 36 ADPA staff, treatment providers and bench officers have worked diligently with the media (through radio interviews and newspaper articles) to educate the public about Proposition 36 and its implementation in Los Angeles County. Since the inception of Proposition 36 programs, major newspapers such as the Los Angeles Times, and the Los Angeles Daily Journal have covered the progress of Proposition 36 on a regular basis.

C. A Focus on Proposition 36"

ADPA developed and produced the first Proposition 36 newsletter, *A Focus on Proposition 36,"* in the State of California. The first issue was published in December 2001. This four-page, quarterly publication provides timely information on the progress of Proposition 36 implementation for all Proposition 36 partners, which include court staff, treatment providers, CASCs, Proposition 36 participants, the public and the media. Two subsequent issues were published in February and June 2002. The circulation averages 4,000 copies per issue.

D. Website

Following the passage of Proposition 36, ADPA created a Proposition 36 page on its Website (www.lapublichealth.org/adpa). This Webpage includes the text of the Proposition, a Fact Sheet, the Los Angeles County Implementation Plan, a Service Provider Manual, general information on drug treatment services, State licensing and certification information, Request-For-Proposals, and other related Web links for additional information on Proposition 36-related government and non-governmental agencies.

This Webpage provides the latest, first-hand Proposition 36-related information to all Proposition 36 stakeholders, which include County personnel, ADPA providers, and consumers, as well as non-ADPA affiliated organizations and individuals seeking a better understanding of Proposition 36 and its implementation and operation.

V. TREATMENT COURTS AND PROBATION EXCHANGE (TCPX)

ADPA, in collaboration with the Internal Services Department, developed the Treatment Courts and Probation eXchange (TCPX) system specifically for ongoing data collection of Proposition 36. TCPX links the Monitoring Courts, Probation Department, CASCs, treatment providers and ADPA through a web-enabled database application designed to support the operational and administrative requirements of Proposition 36. To maintain security and confidentiality, only authorized personnel may log on to the system.

The immediate benefits of the system are to eliminate errors that are commonly caused by multiple data entries and to save time. In the long run, TCPX will allow ADPA to conduct on-line program monitoring and evaluation. When fully implemented, TCPX will provide the Court and County agencies with all required reports for processing Proposition 36 cases/defendants, as well as generate data that will be needed to evaluate countywide trends, costs, and program outcomes.

VI. TRAINING

ADPA conducted numerous trainings for Proposition 36 treatment providers, CASC staff, Bench Officers, Court personnel, Deputy Probation Officers, and its own staff members. These sessions are on going and updated as new issues are addressed and services are implemented. A Provider's Manual was initially developed to assist treatment programs with implementation, operation, contract issues and billing. This is currently being updated into a Proposition 36 Standards and Practices document.

CHAPTER THREE

LESSONS LEARNED AND THE CHALLENGES AHEAD

I. CHALLENGES IN IMPLEMENTATION

The period of time from the passage of Proposition 36 to its required implementation date was approximately seven months – an incredibly short time to develop and implement a new program that has been described as a new way of "doing business."

All 58 Counties in California scrambled to develop plans to implement the program by the start-up date of July 1, 2001. Los Angeles County, due to its large size and diverse population, was faced with an incredibly big challenge, quite likely the biggest challenge in the state.

Fortunately, Los Angeles County had two major assets which would play a critical role in implementing this new program:

√ A comprehensive system of treatment services was already in place.

Los Angeles County contracts with approximately 250 community-based treatment agencies to provide a comprehensive system of prevention, education, treatment, and recovery services. While procedures and training had to be developed and conducted, current contracts for services were augmented in anticipation of the need for increased services for Proposition 36 participants.

√ A system of communication and collaboration between the criminal justice and treatment delivery systems had already been established.

In 1994, the criminal justice and treatment delivery systems developed a partnership to establish the County's first Drug Court in downtown Los Angeles. Over the past eight years, this number has increased to 14 local Drug Court programs, including adult, juvenile and specialized programs, as a result of this on-going collaboration.

The challenge of Proposition 36 was to enhance the current collaboration and increase the availability of treatment services with minimal new funds. These funds were also earmarked to assist with the costs of implementation by the Probation Department and the Court. Procedures were drafted, standardized forms were developed, and trainings conducted for all involved. Meetings both small and large were held to receive input, make changes (and more changes) to the implementation plan, and to expand and increase the communication between all involved parties and stakeholders.

II. LESSONS LEARNED

As with any new program, the first year was not the standard for reliable information or for determining the success or failure of a program. Data is still being collected and reviewed (on the first year of implementation and operation).

Overall, the program has been a success. The goal of Proposition 36, to provide treatment for non-violent drug offenders rather than incarceration, has been realized. While the preliminary numbers are short of the 15,000 participants estimated to enter the program within the first year, the impact on available services has been immense. The level of addiction has been more serious than initially anticipated, and the number of persons receiving services at Levels II and III is also higher than initially considered. The majority of participants are felons, not misdemeanants as initially projected.

Service gaps are being identified. Based on information from the CASCs, the hardest-to-place populations include those with co-occurring problems (substance abuse and mental illness), monolingual participants (non-English/non-Spanish speaking), and women with school age children. Availability of treatment for these populations was in high demand and was very limited throughout the County prior to the implementation of the program.

The most heavily impacted areas of the County are also being identified. CASCs and treatment providers serving the largest populations include those located in the San Gabriel Valley, South Central Los Angeles, and the Long Beach/South Bay areas. Resources have been stretched to meet the demand in these areas.

The system established for processing Proposition 36 participants has been effective, but there is careful review being conducted of the first year data to determine when and where participants are "dropping out" of the system. Removing barriers to ensure that participants are able to get from the Court to assessment (CASC), and most importantly, from assessment into treatment, is a priority.

III. ACTIVITIES FOR THE COMING YEAR

A close review of the lessons learned and the data collected during this first year of operation is being conducted to determine needed modifications or changes to current procedures. In addition, the following is planned:

A. Expanding Treatment Services

ADPA is releasing a Request for Proposals (RFP) to expand countywide treatment services. Final reviews are being conducted and it is the goal to release the RFP in September 2002. Special consideration will be given to proposals that address services for underserved populations such as dually-diagnosed (co-occurring), monolingual, and women with children, as well as underserved areas of the County.

B. Ensuring it is Done Right

On-going training for the implementation and smooth operation is critical to the program. An initial "Proposition 36 Provider Manual" was developed in June 2001 and trainings were conducted to address the changes and procedures required by treatment agencies providing Proposition 36 services. The manual will be replaced shortly with the Proposition 36 Standards and Practices document. Similar in principle to the Drug Court Standards and Practices document, this will be a work-in-progress and will be updated periodically to reflect programmatic and operational changes. Modifications and approval to the document will be made by the Proposition 36 Executive Steering Committee.

The Proposition 36 Executive Steering Committee will also continue to monitor the implementation and on-going operation of Proposition 36 services to ensure overall compliance and quality assurance with the requirements and services established by the program.

C. Meetings and Feed-Back

The establishment of the Regional Coordinating Councils has been one of the strengths of the program. These meetings have provided the opportunity for local agencies, stakeholders and the community to review issues of local concern, as well as to open up communication and to get to know each other. The attendance at the meetings has continued to increase and the dialogue has been a valuable learning tool.

The Proposition 36 Implementation Task Force will also be conducting annual meetings. These meetings will be open to the public as well and are intended to allow all involved with an opportunity to review the implementation and operation, and provide feedback for modifications and improvement.

In addition to the above, on-going meetings of the CASC Directors, treatment providers, community agencies and other stakeholders will be conducted and monitored. Information will be shared with the appropriate parties.

D. Public Awareness

The ADPA Proposition 36 Webpage has been used as a tool to post reports, announcements, meeting information, and provide linkages to other involved agencies and sources. The site will continue to be monitored, updated and revised as appropriate.

E. Initial Evaluation Findings

During the coming year, it is anticipated that UCLA-ISAP will be developing preliminary findings about the implementation of Proposition 36 in Los Angeles County, as well as Statewide. The initial research focus has been on four domains: cost-offset, client outcomes, implementation, and lessons learned. Analysis of this data will assist Los Angeles County in directing its monitoring and compliance practices, as well as maintaining the highest level of quality assurance. These findings can help guide current implementation and provide recommendations for future operations.

IV. CHALLENGES AHEAD

The long-term issues of Proposition 36 must also be addressed. While funding availability will likely be the factor with the greatest impact on expansion/enhancement of services, a review of current practices, populations, and needs must also be considered to determine the best way to "do business" and to address the need for continued funding. Issues to be considered include:

A. Assuring Quality Services

Quality treatment services is a top priority of ADPA and community-based treatment providers. Recruitment of qualified, experienced counselors to meet the needs of a growing population has been an on-going need. Los Angeles County presents additional challenges due to its diversity. The goal is to provide services that are culturally and linguistically appropriate.

B. Sunset of Proposition 36

While Proposition 36 itself does not actually sunset in FY 2005-06, specific funding appropriated for services ends on June 30, 2006 unless the State includes this in the budget, or the citizens vote again to provide funds to continue this program. It is critical that the legislature and the California citizens are made aware of the impact of treatment services on an on-going basis, and funds to continue this program are identified as quickly as possible.

C. Sustaining Drug Testing Funds

The initial drug testing funds allocated for Proposition 36 testing were appropriated from the Federal Substance Abuse Prevention and Treatment Block Grant funds. While Governor Davis has indicated his willingness to continue funding through FY 2002-03, the availability of future drug testing monies beyond that date remains in question. Prior to receipt of these funds, testing

costs were paid for by treatment providers through their own resources or the participant's ability to pay. Loss of state funds could jeopardize the continued use of testing as a treatment tool.

The challenges for Los Angeles County, as well as the State of California, have been identified. Los Angeles County has seen a first year of implementation that, while still being reviewed, speaks to the effectiveness of treatment, and the importance of communication and collaboration between the public agencies and community stakeholders.

ATTACHMENT 1

PROPOSITION 36 SUBCOMMITTEE
Countywide Criminal Justice Coordination Committee
Roster of Members
March 30, 2001

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Santa Monica, CA 90401

PROPOSITION 36 COURTROOMS

Court District	Location	Dept.	Div.	Judicial Officer	Clerk	Telephone #	Fax #
North	Lancaster	C		Comm'r. DeVoe	Kim Seyler	661-949-6533	661-729-3205
North Valley	San Fernando		130	Comm'r. Gladstein	Walter McKenzie	818-898-2412	818-898-2599
Northwest	Van Nuys		111	Comm'r. Godfrey	Cynthia Rice	818-374-2704	818-902-4444
East	Citrus		6	Comm'r. Mulville	Angela Andarza	626-813-3230	626-813-0217
	Rio Hondo		2	Comm'r. Rodriguez	Cecila Morales	626-575-4134	626-279-2271
	Pomona		5	Comm'r. Peters	Maria Baltierra	909-620-3238	909-622-7902
Northeast	Pasadena: 1	G		Comm'r. Serio	Stephanie Jones	626-356-5665	626-397-9173
	Pasadena: 2	D		Hon. Terry Smerling	Sharon Rosemont	626-356-5647	626-397-9187
Southeast	Downey		2	Comm'r. Klein	Tracy Morgan	562-803-7012	562-803-4816
	Huntington Park		3	Comm'r. Baird	Chris Deyen	323-586-6374	323-584-1508
	Los Cerritos		3	Hon. Leland Tipton	Vicki Ayers	562-804-8041	562-461-1392
	South Gate		2	Comm'r. DiFrank	Carol Quillen	323-563-4003	323-357-3991
	Whittier		1	Comm'r. Mansfield	Bridget Otterman	562-907-3140	562-693-6042
Central	CCB: 1		42	Hon. Marcelita Haynes	Cheri Grant	213-974-6037	213-617-0682
	CCB: 2		31	Comm'r. Widdifield	Renee Wenzel	213-974-7272	213-217-4936
	CCB: 3	113		Hon. Michael Tynan	Rochelle Young	213-974-5737	213-229-9926
	ELA		3	Comm'r. Sotelo	Nelson Contreras	323-780-2005	323-415-8525
South Central	Compton		5	Hon. Ellen DeShazer	Kristy Salcedo	310-603-7137	310-763-0911
South	Long Beach: 1	J		Hon. Gary Ferrari	Marlene Trogler	562-590-3647	562-590-0507
	Long Beach: 2		7	Comm'r. Kalinski Comm'r Ing Comm'r Olson	Shirley Meyers Valerie Taylor John Wright	562-491-6255	562-432-2615
	San Pedro		87	Hon. William Weisman	Sharon Fistonich	310-519-6006	310-514-0314
Southwest	Inglewood		6	Comm'r. Christian	Vicky Johnson	310-419-5115	310-330-8677
	Torrance		6	Hon. Dudley Gray	Darrin Oura	310-222-8841	310-783-5114
West	Airport		146	Hon.Paula Adele Mabrey	Melody Ramirez	310-727-6063	310-727-0697
	Santa Monica	P		Hon. Bernard Kamins	Toni Randall	310-260-3729	310-394-7906

ATTACHMENT 2

LA COUNTY DEPARTMENT OF HEALTH SERVICES – ALCOHOL AND DRUG PROGRAM ADMINISTRATION

COMMUNITY ASSESSMENT SERVICES CENTERS (CASC)

PROPOSITION 36 ASSESSMENT CONTACTS LISTING 09/10/02

ASSESSMENT LOCATIONS	(SITE #)	SERVICE PLANNING AREA (SPA)	CASC DIRECTOR-CONTACT
Tarzana Treatment Center 44447 North 10th Street West Lancaster, CA 93534	(1)	1	Terry Nico – Brenna Grass Phone # (661) 726-2630 ext. 113 (160) Fax (661) 726-2635
Tarzana Treatment Center 18646 Oxnard Street Tarzana, CA 91356	(2)	2	Monica Weil Psy.D. – Cindy Bouey Phone # (818) 996-1051 X 1115 – X3853 Fax (818) 345-3778
Prototypes – San Gabriel Valley 11100 E. Valley Blvd. Suite 116 El Monte, CA 91731	(4)	3	Eva Ramirez Fogg (CASC Director) Phone # (626) 444-0705 Fax (626) 444-0710
Prototypes – Tri City CMHC 790 E. Bonita Ave. Pomona, CA 91767	(5)		Lilia Saucedo (Contact) Phone # (909) 447-3400 Fax (909) 447-3599
Prototypes – Pasadena 2555 Colorado Blvd., Suite 101 Pasadena, CA 91101	(6)		Diego Gonzalez (Contact) Phone # (626) 449-2433 Fax (626) 449-2665
Homeless Health Care 2330 Beverly Blvd. Los Angeles, CA 90057	(7)	4	Sandy Song – David Murillo Phone (213) 342-3114 Fax (213) 342-3124
Didi Hirsch CMHC 11133 Washington Blvd. Culver City, CA 90230	(10)	5	Holly McCravey – Lucille Scott Phone # (310) 895-2339 Fax (310) 895-2395
ICS – LA 8836 S. Vermont Ave. Los Angeles, CA 90044	(12)	6	Iris Leary – Della Garrett Phone # (213) 895-7700 Fax (323) 778-2599
California Hispanic 9033 Washington Blvd. Pico Rivera, CA 90660	(19)	7	Malala Elston – Josie Grisby Phone #(562) 942-9625 Fax (562) 942-9695
BHS – Gardena 15519 Crenshaw Blvd. Gardena, Ca 90249	(15)	8	Celia Aragon - Lisa Sandoval Phone # (310) 973-2272 Fax (310) 973-7813
BHS - Long Beach 1775 N. Chestnut Ave. Long Beach, CA 90813	(18)		Celia Aragon - Lisa Sandoval Phone # (310) 973-2272 Fax (310) 973-7813 or (562) 599-8444 (ask for the CASC staff)
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Board of Prison Terms Liaison			Rebecca Spencer Phone # (909) 594-9847 Fax # (909) 598-2418 rspencer@bpt.ca.gov

LA County Proposition 36 Toll Free Help line 1 - 888 - 742-7900

SUMMARY OF TREATMENT, SUPERVISION, and CONTINUING CARE SERVICES MATRIX

Revised JULY 2, 2002

LEVEL I

ADMISSION CRITERIA	Probation Risk Level:	0-14 * No prior violent felony or misdemeanor violent convictions
	Clinical ASI:	Low Range * No Special Needs
MIMIMUM PROGRAM REQUIREMENTS	Participation in Treatment:	At least 120 days (18 weeks) Actual length of time depends upon completion of Treatment Plan goals and objectives. Active participation in continuing care (aftercare) for 6 mo.
	Tx Drug Tests:	(18 wks @ 1/week) Random, observed All positive Drug Tests must be reported to the Court upon receipt of results
	Treatment:	Outpatient: 18 weeks @ 3 hrs/week = 54 hours (min. 2 sessions per wk.) Combination of individual, group, education sessions
	NA/AA meetings:	36 mtgs @ 2/wk
	Probation Supervision:	36 months (Optional early termination at court's discretion)
TREATMENT LEVEL ESCALATION MODIFICATION CRITERIA (Non-judicial)	(3) positive Tx drug tests OR (3) missed Tx, sessions, OR (3) missed NA/AA meetings OR any combination of (3) positive test or missed sessions/meetings WITHIN A 30-DAY PERIOD Any positive tests, along with other considerations, can trigger escalation to the next treatment level	
TREATMENT LEVEL MODIFICATION PROCEDURES	IF probationer fails (3) Tx test OR (3) sessions/meetings OR combination within a 30-day period PROVIDER: - Contacts DPO w/in 48 hours of latest incident - Conducts mandatory individual session w/probationer w/in 72 hrs. of incident to develop Level II Tx plan - Notify DPO and Court of immediate up – phasing to Level II	
PROBATION ROLE	- Work with Provider in monitoring drug testing and Tx compliance - Respond to non-compliance and dirty Tx test reports - Administer minimum quarterly/random PB drug test, increase frequency as necessary - Document and report to court all violations, and/or non-compliance, and/or changes in treatment level	
COURT ROLE	- Document non-compliance - Monitor hearings as needed or requested by DPO - Review participant contests of movement to higher phase - Review/approve probation recommendation to retain in Level I treatment in lieu of automatic movement to Level II - Retain jurisdiction for 18 months - Review/approve probation recommendation for early termination/expungement - Conduct hearing if positive drug tests or treatment failures occur w/in (2) weeks of program completion	
PROVIDER ROLE	- Provide Tx & admin. Tx tests - Monitor compliance and submit all mandatory reports to Probation/Court - Collaborate w/DPO re. Tx & Supervisory needs	

SUMMARY OF TREATMENT, SUPERVISION, and CONTINUING CARE SERVICES MATRIX

Revised JULY 2, 2002

LEVEL II

ADMISSION CRITERIA	Probation Risk Level:	15-29 * No prior violent felony convictions
	Clinical ASI:	Mid Range
MINIMUM PROGRAM REQUIREMENTS	Participation in Treatment:	At least 224 days (32 weeks) Actual length of time depends upon completion of Treatment Plan goals and objectives. Active participation in continuing care (aftercare) for 6 mo.
	Tx Drug Test:	(32 @ 1/week = 32) Random, observed All positive Drug Tests must be reported to the Court upon receipt of results
	Treatment:	Intensive Outpatient: 32 weeks @ 6 hours/week = 192 hours (Min. 3 sessions per wk.) Intensive Day Care: 24 weeks @ 3 hrs/3 days per wk. = 216 hrs. Combination of individual, group, education sessions
	NA/AA meetings:	128 meetings (32 wks @ 4/wk)
	Probation Supervision	36 months (Optional Early termination of Probation at court's discretion)
VIOLATION CRITERIA	(1) positive Probation drug test, OR (3) or more positive Tx drug test, OR (3) or more missed Tx sessions or (3) missed NA/AA meetings OR Combination of (3) positive test or missed sessions/meetings WITHIN A 30-DAY PERIOD Any arrests, absconding, or willful violations of program requirements	
	PROVIDER: - Submits violation/non-compliance report w/DPO w/in 48 hours of latest incident DPO: - Files court report and request for violation hearing w/in 72 hrs. COURT - Review/rule on Probation violation recommendation	
PROBATION ROLE	- Work with Provider in monitoring drug testing and Tx compliance - Respond to non-compliance and dirty Tx test repts - Random drug test during program - Administer minimum quarterly/random PB drug test, increase frequency as necessary - Document and report to court all violations and/or non-compliance	
COURT ROLE	- Document non-compliance - Conduct status hearings as needed or requested by DPO - Review/approve probation recommendation for violation or determine Tx program modifications - Retain jurisdiction for 24 months - Review/approve probation recommendation for early termination/expungement - Conduct hearing if positive drug test or treatment failures occur w/in (2) weeks or program completion	
PROVIDER ROLE	- Provide Tx & administer Tx test - Monitor compliance and submit all mandatory reports to Probation/Court - Collaborate w/DPO re. Tx & Supervisory needs	

SUMMARY OF TREATMENT, SUPERVISION, and CONTINUING CARE SERVICES MATRIX

Revised JULY 2, 2002

LEVEL III

ADMISSION CRITERIA	Probation Risk Level:	30 +
	Clinical ASI:	High Range
MINIMUM PROGRAM REQUIREMNTES	Participation in Treatment:	At least 280 days (40 weeks) Actual length of time depends upon completion of Treatment Plan goals and objectives. Active participation in continuing care (aftercare) for 6 mo.
	Tx Drug Test:	(8 weeks @ 2/weeks = 16) & (32 weeks @ 1/week = 32) Total tests 48 Random, Observed All positive Drug Tests must be reported to the Court upon receipt of results
	Treatment:	Intensive Outpatient: 40 weeks @ 9 hours/week = 360 (min 5 sessions per wk) Intensive Day Care: 24 week @ 3 hrs/3 days per week = 216 hrs. Residential: no less than 30 or more than 180 days Combination of individual, group, education sessions
	NA/AA meetings:	Outpatient: 200 meetings (40 wks @ 5/wks) Day Care: 120 meetings (24 weeks @ 5/wks) Residential: 104 meetings (26 weeks @ 4 wks)
	Probation Supervision:	36 months (Optional Early termination at court's discretion)
VIOLATION CRITERIA	(1) Positive Probation drug test, OR (3) or more positive Tx drug test, OR (3) or more missed Tx sessions OR (3) missed sessions/meetings OR Combination of (3) positive test or missed sessions/meetings WITHIN A 30-DAY PERIOD Any arrest, absconding, or willful violations of program requirements	
VIOLATION PROCEDURES	PROVIDER: - Submits violation/non-compliance report with DPO w/in 48 hours of latest incident DPO: - Files court report and request for violation hearing w/in 72 hrs. COURT: - Review/rule on Probation violation recommendation	
PROBATION ROLE	- Work with Provider in monitoring drug testing and Tx compliance - Respond to non-compliance and dirty Tx test reports - Random drug test during program - Administer minimum quarterly/random PB drug tests, increase frequency as necessary - Document and report to court all violations and/or non-compliance	
COURT ROLE	- Document non-compliance - Conduct status hearing as needed or requested by DPO - Review/approve probation recommendation for violation or determine Tx program modifications - Retain jurisdiction for 24 months - Review /approve probation recommendation for early termination/expungement - Conduct hearing if positive drug test or treatment failures occur within (2) weeks of program completion	
PROVIDER ROLE	- Provide Tx & administer Tx test - Monitor compliance and submit all mandatory reports to Probation/courts - Collaborate w/DPO re. Tx & Supervisory needs	

SUMMARY OF TREATMENT, SUPERVISION, and CONTINUING CARE SERVICES MATRIX
Revised JULY 2, 2002

CONTINUING CARE
July 2002

Continuing care or aftercare, is the last stage of treatment, when the client no longer requires the intensive services offered during primary treatment. Continuing care can occur in a variety of settings, such as periodic outpatient meetings, relapse/recovery groups, self-help groups and halfway houses. Services may include relapse prevention, alumni activities and mentorship programs. Continuing care services shall be supervised follow-up.

In concurrence with the recommendation of the treatment provider, the Court may order participation in continuing care upon the successful completion of primary treatment services. Movement of the client into the continuing care stage shall only be made with the approval of the Court.

Continuing care services for Proposition 36 clients should include the following:

- Documented continuation of ancillary services in a continuing care plan that includes monthly progress reports to the Court (copy to Probation) for six months;
- Mandatory attendance at no less than three (3) 12-step/self-help meetings or support groups per week;
- Voluntary attendance at treatment provider alumni group meetings; and
- One face-to-face group contact per month with treatment provider to verify client participation.

If a Proposition 36 participant is in danger of relapse, the treatment provider shall make a recommendation to the Court to allow the participant to return to primary treatment services.

Upon successful completion of primary treatment and continuing care, the Court in concurrence with the treatment provider's recommendation, may order the treatment phase of Proposition 36 completed.

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June 3, 2002

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County of Los Angeles
Alcohol and Drug Program Administration
Proposition 36 Treatment Agencies
As of 10/01/2002

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Alcoholism Center for Women, Inc.	RS	1135 South Alvarado Street	Los Angeles	90006	(213) 381-8500	(213) 381-8529	4
Alta Med	ONTMS	1701 Zonal Avenue	Los Angeles	90033	(323) 223-6146	(323) 223-6399	4
Alta Med	ONTPDTX	1701 Zonal Avenue	Los Angeles	90033	(323) 223-6146	(323) 223-6399	4
American Asian Pacific Ministries, Inc.	OC	4022 North Rosemead Boulevard	Rosemead	91770	(626) 287-3475	(626) 287-3475	3
American Asian Pacific Ministries, Inc.	DCH	4022 North Rosemead Boulevard	Rosemead	91770	(626) 287-3475	(626) 287-3485	3
American Indian Changing Spirits	RS	2120 Williams Street, Building 1	Long Beach	90810	(562) 388-8118	(562) 388-8117	8
Antelope Valley Rehabilitation Center/High Desert Recovery Services	OC	44900 North 60tn Street West	Lancaster	93536	(661) 945-8458	(661) 945-8471	1
Asian American Drug Abuse Program	OC	3838 Martin Luther King Boulevard	Los Angeles	90008	(323) 294-4932	(323) 294-2533	6
Asian American Drug Abuse Program	DCH	3838 Martin Luther King Boulevard	Los Angeles	90008	(323) 294-4932	(323) 294-2533	6
Asian American Drug Abuse Program	RS	5318 South Crenshaw Boulevard	Los Angeles	90043	(323) 293-6284	(323) 295-4075	6
Atlantic Recovery Services	OC	944 Pacific Avenue	Long Beach	90813	(562) 436-3533	(562) 436-0982	8
Atlantic Recovery Services	OC	1100 West Manchester Boulevard	Los Angeles	90044	(323) 789-3365	(323) 789-4741	6
Atlantic Recovery Services	OC	9722 San Antonio Street	South Gate	90280	(323) 564-6925	(323) 563-7497	7
Avalon Carver Community Center	OC	4920 South Avalon Boulevard	Los Angeles	90011	(323) 232-4391	(323) 232-0481	6
Beacon House Association San Pedro	RS	1003 South Beacon Street	San Pedro	90731	(310) 514-4940	(310) 831-0070	8
Beacon House Association San Pedro	RS	1012 South Palos Verdes Street	San Pedro	90731	(310) 514-4940	(310) 831-0070	8
Beacon House Association San Pedro	RS	124 West Eleventh Street	San Pedro	90731	(310) 514-4940	(310) 831-0070	8
Beacon House Association San Pedro	RS	132 West 10tn Street	San Pedro	90731	(310) 514-4940	(310) 831-0070	8
Behavioral Health Services, Inc.	DCH	6838 Sunset Boulevard	Hollywood	90028	(323) 461-3161	(323) 461-5633	4
Behavioral Health Services, Inc.	OC	6838 Sunset Boulevard	Hollywood	90028	(323) 461-3161	(323) 461-5633	4
Behavioral Health Services, Inc.	OC	3421 East Olympic Boulevard	Los Angeles	90023	(323) 262-1786	(323) 262-2659	7
Behavioral Health Services, Inc.	DCH	3421 East Olympic Boulevard	Los Angeles	90023	(323) 262-1786	(323) 262-2659	7
Behavioral Health Services, Inc.	OC	1318 North Avalon Boulevard, Suite A	Wilmington	90744	(310) 549-2710	(310) 549-2715	8
Behavioral Health Services, Inc.	DCH	1318 North Avalon Boulevard, Suite A	Wilmington	90744	(310) 549-2710	(310) 549-2715	8
Behavioral Health Services, Inc.	OC	279 West Beach Avenue	Inglewood	90302	(310) 673-5750	(310) 673-1236	8
Behavioral Health Services, Inc.	DCH	279 West Beach Avenue	Inglewood	90302	(310) 673-5750	(310) 673-1236	8
Behavioral Health Services, Inc.	OC	15519 South Crenshaw Blvd, Suite A	Gardena	90249	(310) 679-9031	(310) 679-9034	8
Behavioral Health Services, Inc.	DCH	15519 South Crenshaw Blvd, Suite A	Gardena	90249	(310) 679-9031	(310) 679-9034	8
Behavioral Health Services, Inc.	ONTPDTX	15519 South Crenshaw Blvd, Suite A	Gardena	90249	(310) 679-9688	(310) 679-9034	8
Behavioral Health Services, Inc.	RDTX	2180 West Valley Boulevard	Pomona	91768	(909) 865-2336	(909) 865-1831	3
Behavioral Health Services, Inc.	OC	2180 West Valley Boulevard	Pomona	91768	(909) 865-2336	(909) 865-1831	3
Behavioral Health Services, Inc.	RDTX	1775 North Chestnut Avenue	Long Beach	90813	(562) 599-8444	(562) 591-6134	8

ATTACHMENT 6

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Behavioral Health Services, Inc.	RS	2180 West Valley Boulevard	Pomona	91768	(909) 865-2336	(909) 865-1831	3
Behavioral Health Services, Inc.	RS	12917 Cerise Avenue	Hawthorne	90250	(310) 675-4431	(310) 675-4434	8
Behavioral Health Services, Inc.	RS	2501 West El Segundo Boulevard	Hawthorne	90250	(323) 754-2816	(323) 754-2828	8
Behavioral Health Services, Inc.	ONTMS	15519 South Crenshaw Blvd, Suite A	Gardena	90249	(310) 679-9688	(310) 679-9034	8
Behavioral Health Services, Inc.	RS	1775 North Chestnut Avenue	Long Beach	90813	(562) 599-8444	(562) 591-6134	8
California Drug Consultants, Inc.	DCH	659 East Walnut Street	Pasadena	91101	(626) 844-0410	(626) 844-3135	3
California Drug Consultants, Inc.	OC	659 East Walnut Street	Pasadena	91101	(626) 844-0410	(626) 844-3135	3
California Drug Consultants, Inc.	DCH	679 East Walnut Street	Pasadena	91101	(626) 844-0410	(626) 844-3135	3
California Drug Consultants, Inc.	OC	671 East Walnut Street	Pasadena	91101	(626) 844-0410	(626) 844-3135	3
California Hispanic Commission on Alcohol and Drug Abuse, Inc.	RS	2436 Wabash Avenue	Los Angeles	90033	(213) 780-8756	(323) 780-0151	4
California Hispanic Commission on Alcohol and Drug Abuse, Inc.	RS	327 North Saint Louis Street	Los Angeles	90033	(323) 261-7810	(323) 261-8555	4
California Hispanic Commission on Alcohol and Drug Abuse, Inc.	RS	530 North Avenue 54	Los Angeles	90042	(323) 254-2433	(323) 256-9258	4
California Hispanic Commission on Alcohol and Drug Abuse, Inc.	OC	13020 Francisquito Avenue	Baldwin Park	91706	(626) 813-0288	(626) 813-0928	3
California Hispanic Commission on Alcohol and Drug Abuse, Inc.	OC	5801 East Beverly Boulevard	Los Angeles	90022	(323) 722-4529	(323) 722-4450	7
Cambodian Association of America	OC	2501 Atlantic Avenue	Long Beach	90806	(562) 988-1863	(562) 988-1475	8
Canon Human Services, Inc.	OC	9705 South Holmes Avenue	Los Angeles	90002	(323) 249-9097	(323) 249-9121	6
Canon Human Services, Inc.	RS	9705 South Holmes Avenue	Los Angeles	90002	(323) 249-9097	(323) 240-9121	6
Casa de las Amigas	RS	160 North El Molino Avenue	Pasadena	91101	(626) 792-2770	(626) 792-5826	3
Casa de las Amigas	RS	161 North Oak Knoll Avenue	Pasadena	91101	(626) 792-2770	(626) 792-5826	3
Chabad of California, Inc.	RS	5675 West Olympic Boulevard	Los Angeles	90036	(323) 965-1365	(323) 965-0444	4
Charles R. Drew University of Medicine and Science	OC	9307 South Central Avenue	Los Angeles	90002	(323) 564-6982	(323) 564-5970	6
Children's Institute International	OC	711 South New Hampshire Avenue	Los Angeles	90005	(213) 385-5100	(213) 383-1820	4
City of Compton	OC	404 North Alameda Street	Compton	90221	(310) 605-5693	(310) 639-5260	6
City of Long Beach, A Municipal Corp.	OC	6335 Myrtle Avenue	Long Beach	90805	(562) 570-4500	(562) 570-4529	8
City of Long Beach, A Municipal Corp.	OC	2525 Grand Avenue, Suite 210	Long Beach	90815	(562) 570-4100	(562) 570-4049	8
CLARE Foundation, Inc.	OC	844 Pico Boulevard	Santa Monica	90404	(310) 314-6208	(310) 396-6974	5
CLARE Foundation, Inc.	RS	901 - 907 Pico Boulevard	Santa Monica	90404	(310) 314-6215	(310) 396-6974	5
CLARE Foundation, Inc.	RS	1865 - 1871 9tn Street	Santa Monica	90404	(310) 314-6238	(310) 396-6774	5
Cri-Help, Inc.	RS	11027 Burbank Boulevard	N. Hollywood	91601	(818) 985-8323	(818) 985-4297	2
Cri-Help, Inc.	OC	11027 Burbank Boulevard	N. Hollywood	91601	(818) 985-8323	(818) 985-4297	2
Cri-Help, Inc.	OC	2010 Lincoln Park Avenue	Los Angeles	90031	(323) 222-1440	(323) 222-1317	4
Cri-Help, Inc.	RS	2010 Lincoln Park Avenue	Los Angeles	90031	(323) 222-1440	(323) 222-1317	4
Didi Hirsch Psychiatric Service	OC	1600 Main Street, Suite B	Venice	90291	(310) 306-2944	(310) 578-5230	5

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Didi Hirsch Psychiatric Service	RS	11643 Glenoaks Boulevard	Pacoima	91331	(818) 897-2609	(818) 890-7159	2
Didi Hirsch Psychiatric Service	OC	672 S. Lafayette Park Place, Suite 6	Los Angeles	90057	(213) 385-3752	(213) 380-8923	4
Didi Hirsch Psychiatric Service	DCH	672 S. Lafayette Park Place, Suite 6	Los Angeles	90057	(213) 385-3752	(213) 380-8923	4
Do It Now Foundation	OC	7060 Hollywood Boulevard, Suite 201	Hollywood	90028	(323) 465-3784	(323) 465-3899	4
East Los Angeles Health Task Force	RS	630 South Saint Louis Street	E. Los Angeles	90023	(323) 261-2171	(323) 261-0135	7
El Proyecto del Barrio	OC	20800 Sherman Way	Winnetka	91306	(818) 710-5225	(818) 710-5220	2
El Proyecto del Barrio	OC	9140 Van Nuys Boulevard, Suite 211	Panorama City	91402	(818) 895-2206	(818) 894-0824	2
El Proyecto del Barrio	DCH	9140 Van Nuys Boulevard, Suite 211	Panorama City	91402	(818) 895-2206	(818) 895-0824	2
El Proyecto del Barrio	DCH	20800 Sherman Way	Winnetka	91306	(818) 710-5225	(818) 710-5220	2
Family Counseling Services of West San Gabriel Valley	OC	314 East Mission Drive	San Gabriel	91776	(626) 285-2139	(626) 285-2180	3
Family Services of Long Beach	OC	16704 Clark Avenue	Bellflower	90706	(562) 867-1737	(562) 867-6717	7
Family Services of Long Beach	OC	1043 Pine Avenue	Long Beach	90813	(562) 436-3358	(562) 436-9893	8
FOUND, Inc.	OC	1730 South Vermont Avenue	Los Angeles	90006	(323) 730-9497	(323) 730-9499	4
Grandview Foundation, Inc.	RS	225 Grandview Street	Pasadena	91103	(626) 797-1124	(626) 398-5984	3
His Sheltering Arms, Inc.	RS	11101 South Main Street	Los Angeles	90061	(323) 755-6646	(323) 755-0275	6
House of Hope Foundation, Inc.	RS	235 West 9th Street	San Pedro	90731	(310) 831-9411	(310) 521-9241	8
Jewish Family Service of Los Angeles	OC	8846 West Pico Boulevard	Los Angeles	90035	(310) 247-1180	(310) 858-8582	5
Joint Efforts	OC	505 South Pacific Avenue, Suite 205	San Pedro	90731	(310) 831-2358	(310) 831-2356	8
La Clinica Del Pueblo, Inc.	OC	1547 North Avalon Boulevard	Wilmington	90744	(310) 830-0100	(310) 830-0187	8
Little House	RS	9718 Harvard Street	Bellflower	90706	(562) 925-2777	(562) 925-6888	7
Live Again Recovery Home, Inc.	RS	38215 N. San Francisquito Canyon Rd	Saugus	91390	(661) 270-0020	(661) 270-1341	2
Los Angeles Centers for Alcohol and Drug Abuse	OC	333 South Central Avenue	Los Angeles	90013	(213) 626-6411	(213) 621-4119	4
Los Angeles Centers for Alcohol and Drug Abuse	OC	11015 Bloomfield Avenue	Santa Fe Springs	90670	(562) 906-2676	(562) 906-2681	7
Los Angeles Centers for Alcohol and Drug Abuse	RS	10425 Painter Avenue	Santa Fe Springs	90670	(562) 906-2685	(562) 944-6713	7
Mary-Lind Foundation	RS	360 South Westlake Avenue	Los Angeles	90057	(213) 483-9207	(213) 207-2733	4
Mary-Lind Foundation	RS	4445 Burns Avenue	Los Angeles	90057	(323) 664-8940	(323) 664-1786	4
Matrix Institute on Addictions	ONTMS	5220 West Washington Blvd, Suite 101	Los Angeles	90016	(323) 933-9186	(323) 933-7146	6
Matrix Institute on Addictions	ONTPDTX	5220 West Washington Blvd, Suite 101	Los Angeles	90016	(323) 933-9186	(323) 933-7146	6
Matrix Institute on Addictions	OC	12304 Santa Monica Blvd, Suite 200	West Los Angeles	90025	(310) 207-4322	(310) 207-6511	5
Matrix Institute on Addictions	OC	19100 Ventura Boulevard, Suite 5	Tarzana	91356	(818) 654-2577	(818) 654-2580	2
MELA Counseling Services Center	OC	5240 East Beverly Boulevard	Los Angeles	90022	(323) 728-0100	(323) 728-9218	7
Mid Valley Recovery Services, Inc.	RS	3430 Cogswell Road	El Monte	91732	(626) 453-3400	(626) 453-3410	3
Mid Valley Recovery Services, Inc.	RS	453 South Indiana Street	Los Angeles	90063	(323) 266-7725	(323) 266-4402	7
Mini Twelve Step House, Inc.	OC	200 North Long Beach Boulevard	Compton	90220	(310) 608-1505	(323) 295-6642	6

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Mini Twelve Step House, Inc.	RS	303 East 52nd Street	Los Angeles	90011	(323) 232-6228	(323) 295-6642	6
Mini Twelve Step House, Inc.	RS	1145 West 37th Place	Los Angeles	90007	(323) 731-3045	(323) 295-6642	6
MJB Transitional Recovery, Inc.	OC	11152 South Main Street	Los Angeles	90061	(213) 777-2491	(213) 777-0426	6
NCADD-E. San Gabriel/Pomona Valley	OC	401 South Main Street, Suite 110	Pomona	91766	(909) 629-4084	(909) 629-4086	3
NCADD-E. San Gabriel/Pomona Valley	OC	4626 North Grand Avenue	Covina	91724	(626) 331-5316	(626) 332-2219	3
NCADD - Long Beach Area	OC	3750 Long Beach Boulevard	Long Beach	90807	(562) 426-8262	(562) 426-5283	8
NCADD - Long Beach Area	DCH	3750 Long Beach Boulevard	Long Beach	90807	(562) 426-8262	(562) 426-5283	8
NCADD - Long Beach Area	OC	830 Atlantic Avenue	Long Beach	90813	(562) 624-9724	(562) 624-8857	8
NCADD - Long Beach Area	DCH	830 Atlantic Avenue	Long Beach	90813	(562) 624-9757	(562) 624-8857	8
NCADD - Long Beach Area	RS	836 Atlantic Avenue	Long Beach	90813	(562) 432-6807	(562) 435-9253	8
NCADD - Long Beach Area	RS	3750 Long Beach Boulevard	Long Beach	90807	(562) 426-8262	(562) 426-5283	8
NCADD - San Fernando Valley, Inc.	OC	14557 Friar Street, #107	Van Nuys	91411	(818) 997-0414	(818) 997-0851	2
NCADD - San Fernando Valley, Inc.	OC	20655 Soledad Canyon Road, #16	Canyon Country	91321	(661) 299-2888	(661) 299-2887	2
NCADD - South Bay	RS	341 East 6th Street	Long Beach	90802	(562) 435-7350	(562) 432-4532	8
NCADD - South Bay	RS	351 East 6th Street	Long Beach	90802	(562) 435-7350	(562) 432-4532	8
NCADD - South Bay	OC	1334 Post Avenue	Torrance	90501	(310) 328-1460	(310) 328-1964	8
Ness Counseling Center, Inc. (The)	OC	8512 Whitworth Drive	Los Angeles	90035	(310) 360-8512	(310) 360-2510	5
New Hope Health Service, Inc.	DCH	13325 Hawthorne Boulevard	Hawthorne	90250	(310) 676-8030	(310) 676-8113	8
New Hope Health Service, Inc.	OC	13325 Hawthorne Boulevard	Hawthorne	90250	(310) 676-8030	(310) 676-8113	8
New Way Foundation, Inc.	RS	207 North Victory Boulevard	Burbank	91502	(818) 842-2700	(818) 842-9416	2
Options - A Child Care and Human Services Agency	OC	560 South San Jose Avenue	Covina	91723	(626) 967-5103	(626) 351-5501	3
Pajo Corporation, The	ONTMS	2080 Century Park East, Suite 1802	Century City	90067	(310) 553-9500	(310) 553-7247	5
Pajo Corporation, The	ONTPDTX	2080 Century Park East, Suite 1802	Century City	90067	(310) 553-9500	(310) 553-7247	5
Palm House, Inc.	RS	2515 East Jefferson Street	Carson	90810	(310) 830-7803	(310) 830-6606	8
Pasadena Council of Alcoholism and Drug Dependency	OC	1245 East Walnut Street, #117	Pasadena	91106	(626) 795-9127	(626) 795-0979	3
People Coordinated Services of Southern California	OC	3021 South Vermont Avenue	Los Angeles	90007	(323) 732-9124	(323) 735-7059	6
People Coordinated Services of Southern California	RS	1319 South Manhattan Place	Los Angeles	90019	(323) 734-1143	(323) 735-7059	4
People Coordinated Services of Southern California	RS	4771 South Main Street	Los Angeles	90037	(323) 233-3342	(323) 735-7059	6
People in Progress, Inc.	RS	8140 Sunland Boulevard	Sun Valley	91352	(818) 768-7494	(818) 768-0687	2
Phoenix Houses of Los Angeles, Inc.	OC	503 Ocean Front Walk	Venice	90291	(310) 392-3070	(310) 392-9068	5
Phoenix Houses of Los Angeles, Inc.	RS	503 Ocean Front Walk	Venice	90291	(310) 392-3070	(310) 392-9068	5
Phoenix Houses of Los Angeles, Inc.	RS	11015 Bloomfield Avenue	Santa Fe Springs	90670	(562) 941-8042	(562) 941-6592	7
Plaza Community Center	OC	541 South Indiana Street	Los Angeles	90023	(323) 269-0925	(323) 269-6248	7

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Pomona Alcohol & Drug Recovery Ctr.	OC	636 South Garey Avenue	Pomona	91766	(909) 622-2273	(909) 622-6334	3
Pomona Community Crisis Center, Inc.	OC	221 North Palomares Street	Pomona	91767	(909) 623-1588	(909) 629-2470	3
Pride Health Services, Inc.	OC	8904 South Vermont Avenue	Los Angeles	90044	(323) 753-5950	(323) 753-6020	6
Pride Health Services, Inc.	OC	8619 South Crenshaw Boulevard	Inglewood	90305	(310) 677-9019	(310) 677-9401	8
Pride Health Services, Inc.	DCH	8904 South Vermont Avenue	Los Angeles	90044	(323) 753-5950	(323) 753-6020	6
Pride Health Services, Inc.	DCH	8619 South Crenshaw Boulevard	Inglewood	90305	(310) 677-9019	(310) 677-9401	8
Principles, Inc.	OC	2623 Foothill Avenue	Pasadena	91107	(626) 564-4240	(626) 577-4250	3
Principles, Inc.	RS	1680 North Fair Oaks Avenue	Pasadena	91109	(626) 798-0884	(626) 798-6970	3
Prototypes	OC	2740 North Garey Avenue	Pomona	91767	(909) 392-7646	(909) 392-8872	3
Prototypes	RS	845 East Arrow Highway	Pomona	91767	(909) 624-1233	(909) 621-5999	3
Prototypes	DCH	831 East Arrow Highway	Pomona	91767	(909) 624-1233	(909) 621-5999	3
Salvation Army	RS	809 East 5tn Street	Los Angeles	90013	(213) 626-4786	(213) 626-0717	4
Salvation Army	RS	721 East 5tn Street	Los Angeles	90013	(213) 622-5253	(213) 626-0717	4
Santa Anita Family Services	OC	605 South Myrtle Avenue	Monrovia	91016	(626) 359-9358	(626) 358-7647	3
Shields for Families Project, Inc. (The)	OC	12714 South Avalon, Suite 100	Los Angeles	90061	(323) 777-0130	(323) 777-1659	6
Shields for Families Project, Inc. (The)	DCH	1500 Kay Street, Suite 1746	Compton	90221	(310) 898-2450	(310) 898-2452	6
Shields for Families Project, Inc. (The)	DCH	12021 South Wilmington, Lot C	Los Angeles	90059	(310) 668-8260	(310) 668-8309	6
Social Model Recovery Systems	OC	510 South Second Avenue	Covina	91723	(626) 974-8122	(626) 974-8198	3
South Bay Human Services Coalition	OC	2370 West Carson Street, #136	Torrance	90501	(310) 328-0780	(310) 328-0175	8
So. Calif. Alcohol and Drug Programs	OC	11500 Paramount Boulevard	Downey	90241	(562) 923-4545	(562) 862-0918	7
So. Calif. Alcohol and Drug Programs	RS	757 - 759 Loma Vista Drive	Long Beach	90813	(562) 435-4771	(562) 435-9290	8
So. Calif. Alcohol and Drug Programs	RS	10511 Mills Avenue	Whittier	90604	(562) 944-7953	(562) 946-4413	7
So. Calif. Alcohol and Drug Programs	RS	12322 Clearglen Avenue	Whittier	90604	(562) 947-3835	(562) 947-9895	7
So. Calif. Alcohol and Drug Programs	RS	1755 Freeman Avenue	Long Beach	90804	(562) 986-5525	(562) 494-4268	8
So. Calif. Alcohol and Drug Programs	OC	11455 Paramount Boulevard	Downey	90241	(562) 622-3979	(562) 562-0918	7
So. Calif. Alcohol and Drug Programs	DCH	11500 Paramount Boulevard	Paramount	90723	(562) 923-4545	(562) 862-0918	6
So. Calif. Alcohol and Drug Programs	RS	11401 Bloomfield Ave., Ste 209 & 211	Norwalk	90650	(562) 864-7724	(562) 868-5374	7
So. Calif. Alcohol and Drug Programs	RS	11401 Bloomfield Avenue, Suite 313	Norwalk	90650	(562) 864-0559	(562) 868-5374	7
Special Service for Groups	OC	532 South Vermont Avenue	Los Angeles	90020	(213) 738-3361	(213) 389-4512	4
SPIRITT Family Services, Inc.	OC	11046 East Valley Mall	El Monte	91731	(626) 442-4788	(626) 448-3425	3
SPIRITT Family Services, Inc.	OC	9920 Pioneer Boulevard, Unit 103	Santa Fe Springs	90670	(562) 948-2886	(562) 948-1838	7
SPIRITT Family Services, Inc.	OC	13907 Amar Road, Suite C	La Puente	91746	(626) 338-0821	(626) 338-7172	3
SPIRITT Family Services, Inc.	OC	147 South 6tn Avenue	La Puente	91746	(626) 968-0041	(626) 968-0091	3
SPIRITT Family Services, Inc	OC	1393 Grand Avenue, Suite A	Glendora	91740	(626) 852-2314	(626) 857-1043	3
Stepping Stones Home	RS	17727 Cypress Street	Covina	91722	(626) 967-2677	(626) 858-4923	3
Stepping Stones Home	RS	823 Cypress Street	Covina	91723	(626) 967-2677	(626) 858-4923	3

Provider Name	Modality	Address	City	Zip	Phone	Fax	SPA
Substance Abuse Found. Long Beach	OC	3125 East 7th Street	Long Beach	90804	(562) 987-5722	(562) 987-4586	8
Substance Abuse Found. Long Beach	RS	3125 East 7th Street	Long Beach	90804	(562) 987-5722	(562) 987-4586	8
Substance Abuse Found. Long Beach	OC	3131-3139 East 7th Street	Long Beach	90804	(562) 987-5722	(562) 987-4586	8
Substance Abuse Found. Long Beach	RS	727-729 Obispo Avenue	Long Beach	90804	(562) 987-5722	(562) 987-4586	8
Sunrise Community Counseling Center	OC	537 South Alvarado Street, 2nd Floor	Los Angeles	90057	(213) 207-2770	(213) 207-2773	4
Tarzana Treatment Center	DCH	44447 North 10th Street West	Lancaster	93534	(661) 726-2630	(661) 726-2635	1
Tarzana Treatment Center	OC	18646 Oxnard Street	Tarzana	91356	(818) 996-1051	(818) 345-3827	2
Tarzana Treatment Center	OC	18549 Roscoe Boulevard	Northridge	91234	(818) 654-3950	(818) 709-6435	2
Tarzana Treatment Center	OC	7101 Baird Avenue	Reseda	91335	(818) 342-5897	(818) 345-6256	2
Tarzana Treatment Center	OC	44447 North 10th Street West	Lancaster	93534	(661) 726-2630	(661) 726-2635	1
Tarzana Treatment Center	RDTX	18646 Oxnard Street	Tarzana	91356	(818) 996-1051	(818) 654-3827	2
Tarzana Treatment Center	RS	44447 North 10th Street West	Lancaster	93534	(661) 726-2630	(661) 726-2635	1
Tarzana Treatment Center	RS	18646 Oxnard Street	Tarzana	91356	(818) 996-1051	(818) 654-3827	2
Tarzana Treatment Center	RS	2101 Magnolia Avenue	Long Beach	90806	(562) 218-1868	(562) 591-0346	8
Tarzana Treatment Center	OC	2101 Magnolia Avenue	Long Beach	90806	(562) 218-1868	(562) 591-0346	8
Tarzana Treatment Center	DCH	18646 Oxnard Street	Tarzana	91356	(818) 996-1051	(818) 654-3827	2
Tarzana Treatment Center	DCH	2101 Magnolia Avenue	Long Beach	90806	(562) 218-1868	(562) 591-0346	8
Tri-City Mental Health Center	OC	790 East Bonita Avenue	Pomona	91767	(909) 447-3400	(909) 447-3401	3
Tri-City Mental Health Center	OC	2008 North Garey Avenue	Pomona	91767	(909) 623-6131	(909) 623-3932	3
URDC Human Services Corporation	OC	1460 North Lake Avenue, Suite 107	Pasadena	91104	(626) 398-3796	(626) 398-3895	3
URDC Human Services Corporation	DCH	1460 North Lake Avenue, Suite 107	Pasadena	91104	(626) 398-3796	(626) 398-3895	3
Van Ness Recovery House	RS	1919 North Beachwood Drive	Los Angeles	90068	(323) 463-4266	(323) 962-6721	4
Verdugo Mental Health Center	OC	225-D North Maryland Avenue	Glendale	91801	(818) 247-8180	(818) 247-6649	2
Volunteers of America of Los Angeles	RS	4969 Sunset Boulevard	Los Angeles	90027	(323) 660-8042	(323) 660-9265	4
Volunteers of America of Los Angeles	RS	515 East 6th Street, 9th Floor	Los Angeles	90021	(213) 627-8002	(213) 622-6831	4
Watts Health Foundation, Inc.	OC	8005 South Figueroa Street	Los Angeles	90003	(323) 778-5290	(323) 752-8031	6
Watts Health Foundation, Inc.	RS	8005 South Figueroa Street	Los Angeles	90003	(323) 778-5290	(323) 752-8031	6

Modality Legend

Modality	Modality Description
DCH	Day Care Habilitative Services
DCH (DD)	Day Care Habilitative Services (Dual Diagnosed Services)
OC	Outpatient Counseling
ONTMS	Outpatient Narcotic Treatment Maintenance Services
ONTPDTX	Outpatient Narcotic Treatment Program Detoxification Services
RDTX	Residential Medical Detoxification Services
RS	Residential Services

ADPA

Alcohol & Drug Program Administration

COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES

PUBLIC HEALTH