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October 12, 2011

TO:

Each Health Deputy

FROM:

John Viernes, Jr., Director

Substance Abuse Prevention and Control

SUBJECT:

ASSEMBLY BILL 109 - PUBLIC SAFETY REALIGNMENT ACT, POST-RELEASE COMMUNITY

SUPERVISION TREATMENT PROGRAMS FOR SUBSTANCE USE DISORDER

On September 20, 2011, the Board approved the Department of Public Health's recommendation to prepare and execute sole-source agreements with certified and/or licensed alcohol and drug providers for Assembly Bill 109, Post-Release Community Supervision Treatment Program for Substance Abuse Disorder (AB 109, Post-Release -SUD Program). This is to provide you with a list of the agencies that will be funded under AB 109, Post-Release SUD Program, with an overall funding of \$1 million for FY 2011-12. Funding for FYs 2012-13 and 2013-14 is subject to availability of funding from the State.

On August 30, 2011, the Community Corrections Partnership (CCP) presented to the Board a plan to implement Public Safety Realignment as a result of AB 109. This bill transfers certain State responsibilities within the criminal justice system to counties, effective October 1, 2011. As part of the CCP plan, the Department of Public Health (DPH) Substance Abuse Prevention and Control (SAPC) will perform a key role in the post-release community supervision required under AB 109. AB 109 transfers to the County responsibility for supervising inmates who are released from prison after serving a sentence for a non-violent, non-serious, non-sex offense.

Attachment 1 includes the geographic areas to be served by the SUD programs and breaks down the \$1 million in available funding by agency. Attachment 2 is the methodology used to select the programs. All of the programs identified in Attachment 1 are specifically designed for, and/or currently serve clients who have previously been incarcerated.

If you have any questions or need additional information, please let me know.

JV:dhd

#### Attachments

c: Jonathan E. Fielding, M.D., M.P.H. Jonathan E. Freedman Richard Mason Tami Omoto-Frias Maxanne Hatch Patricia Gibson



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

List of AB109 Post-Release Community Supervision Treatment Programs for Substance Use Disorder

					The state of the s	
					SUBJECT TO AVAILABILITY	
					OF FUNDING	
AGENCY NAME	SPA	SD	MODALITIES	FY 2011-12	FY 2012-13	FY 2013-14
1000						
Alcoholism Council of Antelope Valley/NCA	1	5	OC/ADFLC	70,000	70,000	70,000
Asian American Drug Abuse Programs, Inc.	4	2	RS/OC/ADFLC	68,800	68,800	68,800
Asian American Drug Abuse Programs, Inc.	6	2	RS/OC/ADFLC	68,333	68,333	68,333
Behavioral Health Services, Inc.	3	1	RS/OC/ADFLC	35,700	35,700	35,700
Behavioral Health Services, Inc.	8	4	RS/OC/ADFLC	89,000	89,000	89,000
California Hispanic Commission on Alcohol and Drug						
Abuse, Inc.	4	1	RS/OC/ADFLC	103,200	103,200	103,200
Cri-Help, Inc.	2	3	RS/OC/ADFLC	127,000	127,000	127,000
His Sheltering Arms, Inc.	6	2	RS/OC/ADFLC	68,334	68,334	68,334
Phoenix House of Los Angeles, Inc.	5	3	RS/OC/ADFLC	65,000	65,000	65,000
Principles, Inc.	3	5	RS/OC/ADFLC	83,300	83,300	83,300
Shields for Families Project, Inc.	6	2	OC/ADFLC	68,333	68,333	68,333
Southern California Alcohol and Drug Programs, Inc.	7	1, 4	RS/OC/ADFLC	64,000	64,000	64,000
Substance Abuse Foundation of Long Beach, Inc.	8	4	RS/OC/ADFLC	89,000	89,000	89,000
				1,000,000	1,000,000	1,000,000

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

# PUBLIC SAFETY REALIGNMENT ACT ASSEMBLY BILL 109/117 FUNDING DISTRIBUTION APPROACH

#### **METHODOLOGY:**

- 1) Ensure that services under Assembly Bill 109/117 (AB 109) are provided in each Supervisorial District and Service Planning Area (SPA).
- 2) Base distribution of funding on jail population percentage per SPA1.
- 3) Determine treatment providers with existing contracts with Substance Abuse Prevention and Control (SAPC) and the Los Angeles County Department of Mental Health (DMH) who serve this population.
- Review all contracted providers who hold SAPC offender-related contracts i.e.: 1) Parolee Services Network, 2) Proposition 36/Offender Treatment Program, 3) Female Offender Treatment Program, 4) Second Chance Women's Re-entry, and 5) Adult Drug Court.
- 5) Based on methodology steps 1 4, determine providers with existing contracts who hold the full continuum of treatment services<sup>2</sup>.
- 6) Rank providers as follows in funding order:
  - a. 1 = SAPC providers with full continuum of services
  - b. 2 = SAPC providers without full continuum of services
  - c. 3 = SAPC providers who DMH proposes to fund

### RECOMMENDED ACTIONS - Refer to Table 1:

- Assign at least one provider for each Supervisorial District and SPA to ensure services are provided under AB 109 in all respective areas.
- 2) Based on an estimated budget of \$6 million, allocate \$1.4 million for Substance Use Disorders Treatment Services.
- 3) Allocate \$400K to the Antelope Valley Rehabilitation Center for the provision of SPA 1 and countywide residential treatment services.
- Contract with providers who hold the full continuum of treatment services based on ranking order methodology step 6.
- 5) For SPA's with the highest concentration of offenders, assign multiple providers to serve the geographical and/or dense population areas.

### **NEXT STEPS:**

Obtain review and approval from Executive Office for submission to the Director of the Department of Public Health.

Rationale used by DMH for funding allocation

<sup>2</sup> A full continuum of treatment services is defined as providing residential, outpatient treatment services and alcohol and drug free living centers.