

**SUBSTANCE ABUSE AND CRIME PREVENTION ACT
OF 2000 PROPOSITION 36**

LOS ANGELES COUNTY IMPLEMENTATION PLAN

PURPOSE

The following plan provides an overview of various coordinated strategies to implement Proposition 36, also known as the Substance Abuse and Crime Prevention Act of 2000 (the Act). Developed by a multi-agency task force of the Countywide Justice Coordination Committee (CCJCC), this plan offers an outline of critical steps which must be taken to initially implement Proposition 36 by July 1, 2001, and also provides guidance for further efforts to develop policies, procedures and guidelines for the ongoing integration of Proposition 36 into the case processing and treatment system in Los Angeles County.

BACKGROUND

On November 7, 2000, the voters of the State of California passed Proposition 36, which 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. Proposition 36 also applies to state parolees who are convicted of new non-violent drug offenses or who commit drug related parole violations. To cover local costs for treatment programs and other necessary services, Proposition 36 also appropriated statewide funding of \$120 million per year through FY 2005-2006, with an initial FY 2000-2001 appropriation of \$60 million to allow for additional costs for planning and implementation. All monies appropriated would be placed in a Substance Abuse Treatment Trust Fund for distribution to counties.

Proposition 36 provides for court supervised treatment and probation for offenders to break the cycle of drugs and crime, while still promoting public safety. The Act makes significant changes to the way many drug defendants will be handled by the criminal justice and treatment delivery systems after July 1, 2001. Most non-violent drug offenders who are convicted of possession or under-the-influence offenses will 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 abusing offenders. The lessons learned in Los Angeles County from the traditional Drug Courts show that offenders must be held accountable for their actions, and the lack of incarceration as a sanction under Proposition 36 will require creative innovations to motivate a generally recalcitrant population into and through recovery.

In order to be successful, the implementation of Proposition 36 will require a coordinated and collaborative strategy among the Court, Probation Department, Health Services Alcohol and Drug Program Administration (ADPA) and community-based treatment providers in the county.

To facilitate this coordination, on November 15, 2000, the Countywide Criminal Justice Coordination Committee (CCJCC) voted to establish a Proposition 36 Implementation Task

Force, comprised of representatives from the Superior Court and many County Departments including Probation, ADPA, Chief Administrative Office (CAO), County Counsel, District Attorney, Public Defender and others, as well as other affected agencies in the county such as City Attorneys and Treatment Provider Coalitions. This Task Force is the official advisory group responsible for developing policies and procedures for the coordinated implementation of the Act in Los Angeles County. An initial public meeting of the Task Force was held on

January 18, 2000. At that meeting several working groups were formed: Case Processing and Supervision, Treatment Services Delivery System and Data Systems and Evaluation. These working groups provided input on specific aspects of the Proposition 36 Implementation Plan. A Legislation and Fiscal working group made recommendations that were included in the CAO's Legislative Strategy and into Senate Bill 223 (Burton) for drug testing funding. A Steering Committee of the Proposition 36 Implementation Task Force met numerous times after the CCJCC formed the Task Force and guided the efforts of the working groups.

On February 20, 2001, the Board of Supervisors approved recommendations from the Department of Health Services (DHS) to designate the DHS-ADPA, as the lead agency. The Board further resolved to comply with provisions of the Act, including the establishment of a trust fund, in order to receive the County's share of the statewide allocation. The next action required by the Board of Supervisors is to approve the Los Angeles County Plan for the Implementation of Proposition 36 in accordance with regulations from the State Department of Alcohol and Drug Programs and submit the same to the State by June 1, 2001.

A final meeting of the Task Force was held on April 10, 2001, and the members voted to forward this its Implementation Plan to the CCJCC for transmittal to the Department of Health Services for integration into the formal County Application and Funding Plan. This Plan will be subsequently presented to the Board of Supervisors for approval. The CCJCC modified the plan prior to submitting it to the Board of Supervisors for approval.

MISSION

The mission of the Los Angeles County Proposition 36 Implementation Task Force is to provide coordinated strategies which ensure that the criminal justice and treatment agencies in Los Angeles County work together to effectively implement Proposition 36 and establish a comprehensive system of care, together with accountability and public safety supervision, for drug offenders covered by the provisions of the Act.

REPORTING AND PLAN MODIFICATION

Proposition 36's impact on the Courts, Probation Department and Treatment Providers is subject to a number of variables that can only be estimated at the present time. The number of cases coming within the requirements of Proposition 36, the aggregate cost of treatment, the availability of addition funding, and the success rate of the proposed treatment models cannot be estimated with any degree of accuracy. For that reason, this plan represents a model that is subject to modification.

The CCJCC Executive Steering Committee of the Implementation Task Force will continue to meet and will recommend changes in the Plan to DHS-ADPA, CCJCC, and the Board of Supervisors. As lead agency, DHS-ADPA will submit a report to the Board of Supervisors and CAO every 60 days advising the Board of the incurred costs to date, the projected costs of the program for the remainder of the fiscal year, and recommended changes in the Plan.

COURT PROCESSING OVERVIEW

The handling of Proposition 36 cases will significantly impact the court system. The Superior Court, Planning and Research Unit, anticipates handling an additional 7,000 felony cases and an additional 9,000 misdemeanor cases each year under Proposition 36. In addition, the number of appearances per case will increase and the nature of these appearances will change due to the potentially adversarial nature of probation violation hearings and the need for the court to monitor participants' compliance with probation conditions and progress in their individualized treatment plans. Bench officers who are well-versed in the principles of treating addicts and who understand the recovery process will be more effective at providing

consistency in handling progress reports and probation violation hearings. Further, data collection and evaluation will be more reliable and cost effective if retrievable from dedicated court calendars. Again, based on the history of success in case management demonstrated by the Los Angeles County Drug Courts, treatment outcomes are enhanced where there is a strong partnership between the court, probation and the treatment community.

Los Angeles County currently has approximately 300 bench officers hearing criminal cases. These judges will hear Proposition 36 cases until sentencing, after which the cases will be referred to one of approximately 18 dedicated Monitoring Courts for the purposes of sentencing, progress reports and probation violation hearings (see Attachments A and B for diagrams illustrating case flow for custody and non-custody defendants). Offenders will be placed in one of three levels of treatment and supervision based on addiction severity and risk assessment (see Attachment C, Summary of Treatment and Supervision Matrix). Experience in the different levels of treatment, the need to intensify treatment, the use of drug testing and the provision of incentives to facilitate recovery under Proposition 36 are all best handled by a small group of bench officers. Many of these bench officers will be experienced drug court judges and there is general consensus throughout the drug court community that active, consistent court supervision is essential to the success of the drug treatment required by the Proposition.

PROBATION SUPERVISION OVERVIEW

The Probation Department anticipates that roughly 14,000 new offenders per year will be added to the Department's case supervision workload. This includes misdemeanor offenders who have not traditionally been placed on a Probation caseload, probationers who become eligible for treatment under Proposition 36 after a violation and parolees who are convicted of an eligible offense while on parole and who are not returned to prison.

The Probation Department will provide assessment for Proposition 36 eligibility after defendants have been screened by the prosecuting agency and defense counsel (see Attachment C-1). This assessment will consist of a criminal history review to determine whether a defendant must be excluded from the benefits of Proposition 36 based on prior criminal behavior or concurrent charges. If a defendant is deemed eligible and chooses not to go to trial, a conditional plea will be taken at arraignment. Alternatively, a defendant may elect to have a trial and, if convicted, be sentenced pursuant to Proposition 36. In either situation, the offender will then be ordered to report to one of 19 Community Assessment Service Centers (CASCs) throughout the county for an assessment of addiction severity and referral to an appropriate treatment provider. Probation Officers will be co-located at the CASCs and will assess offenders for community supervision risk level and prepare a caseload recommendation. Once an offender has been seen by both treatment and probation staff at the CASC, he or she will immediately be placed into a community-based treatment program and will return to court within thirty days for monitoring as to compliance with all conditions of probation. Progress report dates will be set by the Prop. 36 monitoring courts according to risk assessment and ongoing compliance or non-compliance with probation requirements.

The Probation Officer will receive information from the treatment provider on the progress of the offender in treatment, including drug testing results, attendance at required sessions, and other necessary information. The Probation Officer will forward information to the court on a monthly basis for the highest risk offenders and less often for offenders at less severe criminal and substance abuse levels. All violations and other problems will be reported to the court within 72 hours. In addition to therapeutic drug testing conducted by the treatment providers, Probation Officers will conduct random compliance drug tests of all offenders on at least a quarterly basis. Minimum length of supervision will be 36 months, unless the offender's progress in treatment merits early termination and dismissal of the case.

TREATMENT DELIVERY SYSTEM OVERVIEW

The Department of Health Services Alcohol and Drug Program Administration (DHS-ADPA) contracts with approximately 250 community-based substance treatment and recovery programs to provide a comprehensive array of services. This existing system of treatment and recovery services will serve as the foundation for providing the treatment services for Proposition 36 program participants.

Contracted Community Assessment and Service Centers (CASCs) will conduct individual assessments for each eligible offender through 19 sites located throughout the County. The Addiction Severity Index, a nationally recognized substance abuse assessment instrument, will be used by all CASCs and treatment providers to initially assess each participant and to monitor participant treatment outcomes. The assessment results help determine placement in an initial level of treatment intensity.

Treatment services consist of a three-level system increasing in duration and intensity depending on the assessed severity of the offender. Minimum duration is three months for lowest levels of severity, six months for mid-level severity, and nine months for the most severe level.

The level of treatment services for an individual is dependent on the severity of addiction coupled with his or her criminal history risk assessment. Those who have a low level of severity will receive outpatient services (including a combination of individual, family and group counseling sessions), self-help group meetings, and assistance with ancillary needs such as literacy training, vocational guidance, mental health services, health services and transitional housing. Those participants who are assessed at mid- and high-severity levels will 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 the low level addicts. Random drug testing is conducted at least two times per week for all participants through the entire duration of the treatment program. Aftercare services are provided as needed for six months following program completion, regardless of severity level. The monitoring judge, in consultation with the treatment provider and assigned probation officer, maintains flexibility to adjust an individual's treatment plan based on compliance or non-compliance with his or her conditions of probation.

It is anticipated that many first time narcotics offenders will opt to participate in the education-based drug diversion programs (Penal Code 1000) rather than the Proposition 36 treatment-based program. Highly addicted offenders are anticipated to quickly fall out of compliance with the Proposition 36 treatment program and accept the stricter requirements of Drug Court (assuming they are eligible under current Drug Court admission criteria), rather than incarceration.

DHS-ADPA intends to provide treatment services during the initial program implementation period by augmenting existing contracted program services. As the demand for services increases, DHS-ADPA will supplement the number and types of contracted programs through a Request for Proposals process beginning in August, 2001. A more detailed description of the treatment delivery system plan is contained in Attachment D. In addition, DHS-ADPA, in collaboration with the Court and Probation Department, will provide on-going monitoring of the quality of treatment delivery services by all contracted providers.

DATA COLLECTION AND EVALUATION OVERVIEW

The increased number of offenders in treatment being monitored by the court and probation, as well as the addition of new progress reporting and probation violation procedures, will necessitate a very rapid flow of quality information among all agencies involved in the implementation of Proposition 36 (see Attachment E). Specialized monitoring courts will be following offenders' progress and will require a greater level of detailed information about

each probationer, such as behavior in treatment, drug testing results and attendance at self-help meetings, than traditionally has been collected and reported to the court, except in Drug Court. A sophisticated information collection, sharing and transmission system must be developed to remove the need for duplicate data entry, and to permit the court and probation to prepare and receive detailed reports quickly and make changes in the offender's treatment plan or hold a probation violation hearing.

Statistical information, such as the number of offenders in the system, the number of offenders who do not show up at a Community Assessment Service Center after being referred for treatment, the number of participants successfully completing the program, and the number of offenders dropping out before program completion, will be tracked for reporting on the implementation of Proposition 36 in LA County. Funding under Proposition 36 lasts until FY2005-2006. After 2006 the State or the voters must appropriate additional funding for treatment or the mandate for treatment will continue without the funding. Los Angeles County must collect data throughout the life of Proposition 36 in order to show how effectively Proposition 36 is implemented in the county, what the treatment outcomes are and what changes, if any, are felt in the criminal justice system.

CONCLUSION

The Los Angeles County Proposition 36 Implementation Task Force is committed to successfully implementing Proposition 36 while preserving accountability, flexibility, quality treatment, appropriate supervision and public safety in the county. Proposition 36 represents a major restructuring of the treatment delivery and criminal justice systems and it must be recognized that the above plan is an initial implementation plan based on the collaborative efforts of the affected criminal justice agencies and the treatment community. The actual behavior of the system will be determined by many variables and we must remain poised to adapt to the reality of what happens after July 1, 2001. This implementation plan must will evolve to meet the changing treatment and supervision needs in the county, within the framework of a balanced and reasoned approach to the allocation of scarce resources. The Task Force will remain active to assess the actual implementation of the initiative and provide feedback to the CCJCC as needed or requested.

Revised and approved by the Countywide Criminal Justice Coordination Committee (CCJCC) on April 18, 2001.