Department of Health Care Services

Women and Children's Residential Treatment Services Program

Annual Report to the Legislature

January 2018

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Executive Summary

Health and Safety Code (HSC) Section 11757.65 was added by Senate Bill (SB) 1014 (Committee on Budget and Fiscal Review, Chapter 36, Statutes of 2012) for Fiscal Year (FY) 2012-13, requiring the Department of Health Care Services (DHCS) to provide an annual report to the Legislature on the fiscal and programmatic status of the Women and Children's Residential Treatment Services (WCRTS) program.

Pursuant to HSC Section 11757.65, the WCRTS programs must pursue four primary goals and achieve a number of desired outcomes for pregnant women and women with children in residential substance use disorder (SUD) treatment settings.

An analysis of client data reported by the WCRTS programs to DHCS during FY 2013-14 confirms that the WCRTS programs achieved the required goals and needed outcomes. These goals and outcomes include, but are not limited to, the following:

- Demonstrate that SUD treatment services improve outcomes for women, children, and the family unit as a whole;
- Provide services to promote safe and healthy pregnancies and perinatal outcomes; and
- Free women and their families from substance abuse.

The WCRTS program consists of a network of residential perinatal SUD treatment programs in the following six counties: Alameda, Los Angeles, Marin, San Diego, San Francisco, and San Joaquin.

Background

The WCRTS program was originally funded in 1993 through a national competitive bid process resulting in a five-year grant from the Center for Substance Abuse Treatment (CSAT), a division of the U.S. Department of Health and Human Services, and allocated directly to the individual programs.

The FY 1998-99 budget for the former Department of Alcohol and Drug Programs included $3.1 million of State General Fund (SGF) to fund WCRTS programs previously funded by CSAT grants. In FY 1999-00, SGF for the WCRTS programs increased to $3.6 million to offset a decrease in federal support.

FY 2000-01 funding from SGF then increased to $6.1 million as the federal grant award expired for all programs. Since FY 2011-12, under the 2011 Realignment, funds are now allocated to the counties by the State Controller's Office from the WCRTS Special Account within the Behavioral Health Subaccount of the Local Revenue Fund 2011. With the passage of SB 1020 (Committee on Budget and Fiscal Review, Chapter 40, Statutes of 2012), language was added to Section 30029.6(b) of the Government Code, for FY 2012-13 and every FY thereafter, that specifies funds in the WCRTS Special Account would total approximately $5.1 million.

Current Fiscal and Programmatic Status

Expenditures

One-twelfth of the annual WCRTS allocation is distributed to each of the participating counties on a monthly basis. Table 1 below displays each county's annual WCRTS allocation and their FY 2013-14 expenditures, as this is the most current fiscal data available. Note that WCRTS funding does not expire and funds can be retained for use in subsequent FYs; therefore, counties may expend under or over their WCRTS allocation in a single fiscal year.

In FY 2013-14, WCRTS expenditures varied across counties as follows:

- San Francisco County did not report their annual WCRTS expenditure because they did not expend their allocation;
- Los Angeles County did not expend their entire annual WCRTS allocation;
- Marin County did not expend their entire annual WCRTS allocation; and
- San Joaquin County incorrectly reported WCRTS expenditures for FY 2013-14 because of a county-level auditor error. The county is currently working with DHCS to revise the information through the cost reporting system. The expenditures shown in Table 1 reflect the correct amount.

WCRTS expenditures are directly allocated from the State Controller's Office to the Behavioral Health Subaccount (BHS), and the counties are responsible for monitoring the WCRTS programs. However, according to HSC 11757.65 (c), DHCS is responsible for collaborating with the counties to complete the annual WCRTS report to the Legislature. DHCS plans to implement a tool effective July 2018 that will collect the required information needed to complete the annual WCRTS report. This protocol will include technical assistance to help counties meet program goals as outlined in HSC Section 11757.65 (c).

Table 1: FY 2013-14 Annual WCRTS Program Allocation and Expenditures, by County

County	FY 2013 14 Allocation	FY 2013 14 Expenditures
Alameda	687,665.00	687,665.00
Los Angeles	2,132,488.00	2,118,455.00
Marin	728,485.00	705,400.00
San Diego	553,940.00	553,940.00
San Francisco	182,286.00	0.00
San Joaquin	819,136.00	819,136.00
Total	**5,104,000.00**	**4,971,796.21**

Note: San Francisco County did not report expending their WCRTS allocation for FY 2013-14. See the methodology section for more information.

Note: San Joaquin County incorrectly reported WCRTS expenditures for FY 2013-14 and is currently working with DHCS to officially revise the information. The expenditures shown in Table 1 reflect the correct amount.

Program Outcomes

WCRTS program outcomes described in this report are based on client data submitted to DHCS' California Outcomes Measurement System - Treatment (CalOMS Tx) for FY 2013-14, ranging from July 1, 2013 through June 30, 2014. Per state and federal reporting requirements, all publicly funded and/or monitored SUD treatment service providers in California (including narcotic replacement treatment programs) are required to report data to CalOMS Tx on the clients they serve.

WCRTS program-wide client outcomes described in this report are derived from several CalOMS Tx data reports. Client outcomes were measured using two distinct methods: (1) percent change from admission to discharge in those with desired criteria (e.g., no arrests) and (2) percent at discharge meeting desired criteria (e.g., no primary drug use). In order to assess client outcomes, discharge data is necessary and clients must answer the outcomes questions at discharge.

Programmatic data for this report was obtained from a list of providers who reported expending WCRTS funding in FY 2013-14. Based on expenditure information obtained for FY 2013-14, the programmatic data for FY 2013-14 shows that there were approximately 1,000 clients served by five out of the six counties participating in the

WCRTS program. San Francisco County was not included in the program-wide analysis because they did not report expending their WCRTS allocation for FY 2013-14. Clients served represent the total clients that received treatment during FY 2013-14, including any open admissions from the previous FY. If a client has multiple admissions during the year, each admission is counted.

Table 2, displayed on the next page, depicts client outcomes using the percent change method. Outcomes are measured by comparing the clients' responses to the same question at two points in time: once at admission to treatment and again at discharge from treatment services. These outcomes include the group of 714 matching admission and discharge client records for treatment services during FY 2013-14. This programmatic data was obtained for the providers who reported expending WCRTS funding in FY 2013-14.

The outcome statistics presented in Table 2 exclude the 38% of CalOMS Tx records that are missing outcome data at admission and/or discharge. A more detailed explanation regarding these limitations can be found in the Data Limitations section.

Table 2: FY 13-14 WCRTS Program-wide Client Outcomes by Percent Change
(Admission to Discharge)*

HSC Section 11757.65	CalOMS Tx Domain	Outcome Measure	Admission	Discharge	Percent Change
(b)(1) Preserving Family Unity	Legal/Criminal Justice	No Arrests	458	485	6%
(b)(2) Promoting Healthy Pregnancies	AOD Use	No Needle Use	469	487	4%
(b)(3) Enabling Children to Thrive	Social/Family	No Family Conflict	403	443	10%
(b)(4) Freeing Women and their Families from Substance Abuse	Employment/ Education	Employed	37	97	162%
(b)(4) Freeing Women and their Families from Substance Abuse	Employment/ Education	Job Training	14	38	171%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Medical/Physical Health	No Health Problems	392	426	9%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Medical/Physical Health	Tested for HIV	325	355	9%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Mental Health	Take Prescribed MH Medications	111	155	40%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Social/Family	Stable Housing	81	83	3%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Social/Family	No Children Living Elsewhere (Child Protection Order)	213	272	28%
(a)(2)(A) Demonstrate AOD Services Improve Treatment Outcomes	Social/Family	No Parental Rights Terminated	436	428	-2%

Notes: Percent change (P), the difference from admission to discharge, is calculated using the following equation: $P = [(D-A)/A]*100$. (A) = aggregated number of admissions and (D) = the aggregated number of discharges.

*San Francisco County was not included because they did not report expending their WCRTS allocation for FY 2013-14.

The following are highlights from Table 2, measured by percent change:

- The number of clients employed full or part-time increased by 162 percent, from admission to discharge;
- The number of clients enrolled in job training increased by 171 percent, from admission to discharge;
- The number of clients living in a stable environment increased by 3 percent, from admission to discharge;
- The number of clients without a child protection court order and who had one or more of their children living with them increased by 28 percent, from admission to discharge; and
- The number of clients whose parental rights have not been terminated decreased by 2 percent, from admission to discharge.

Table 3 below displays the outcomes measured only at discharge. Programmatic data for FY 2013-14 was obtained from a list of providers who reported expending WCRTS funding in FY 2013-14. Based on this information for FY 2013-14, there were 1,149 discharges from the WCRTS programs during this period. Similar to admission counts, if a client has multiple discharges during the year, each discharge is counted. This percent was calculated using the number of discharges meeting the desired criteria, divided by the total number of discharges for all WCRTS programs. The total number of discharges are a sum of the following:

- Discharges meeting desired criteria;
- Discharges not meeting the desired criteria; and
- Discharge records missing data.

The method used to determine percent change in Table 2, measured from admission to discharge, is not appropriate for the outcomes measures noted in Table 3 because clients often enter treatment from a controlled environment where substance use is not permitted (e.g., jail, prison). As such, there may be no alcohol or other drug (AOD) use at admission.

Moreover, participation in social support activities is not expected prior to treatment admission because such activities are intended to aid clients during and after treatment to maintain abstinence. It is important to note that numbers meeting the desired criteria at discharge are lower, in part, due to the missing discharge data, which are necessary to determine outcomes.

Table 3: FY 13-14 WCRTS Program-wide Client Outcomes at Discharge*

HSC Section 11757.65	CalOMS Tx Domain	Outcome Measure	Discharges Meeting Desired Criteria	Discharges Not Meeting Desired Criteria	Discharge Records Missing Data	Total # of Discharges	Percent Meeting Desired Criteria at Discharge
(b)(2) Promoting Healthy Pregnancies	AOD Use	No Primary AOD Use	624	100	425	1,149	54%
(b)(3) Enabling Children to Thrive	Social/ Family	Social Support Activities ≥ 8 Days	417	308	424	1,149	36%

Notes: Outcomes at Discharge show the percentage of clients, program-wide, who meet the desired criteria at discharge for the two outcomes measured only at discharge. These numbers are lower due to missing data, as shown in the column, Discharge Records Missing Data. Records may have missing data when an individual is unable to complete the questions at discharge; therefore, outcomes cannot be measured. *San Francisco County was not included because they did not report expending their WCRTS allocation for FY 2013-14.

The following are highlights measured at discharge from Table 3:

- 54% percent of clients reported abstinence of the primary alcohol or other drug use at discharge
- 36% percent of clients reported participation in social support activities (e.g., interactions with family members in support of recovery, self-help meetings, and 12-step meetings) for eight or more days at discharge

Note: The number of discharges that meet the desired criteria may be much higher; however, the data to substantiate these outcomes is missing.

Methodology

Fiscal Status

The fiscal status, or expenditures, of the WCRTS programs are determined through a query submitted to the DHCS SUD cost report. SUD providers are required to report expenses accurately on their annual cost reports.

Programmatic Status

DHCS conducted CalOMS Tx data analyses to develop program-wide client outcomes. This report includes data from five of the six counties participating in the WCRTS program. San Francisco County was not included in the program-wide analysis because they did not report spending FY 2013-14 funds.

Data submitted to CalOMS Tx includes client characteristics (e.g., sex, race, and age), as well as information about clients' experiences prior to admission and at discharge in the following domains:

- AOD use;
- Employment/education;
- Legal/criminal justice;
- Physical health;
- Mental health; and
- Family/social.

Program-wide client outcomes were determined using one of two methods:

1. Percent Change (Table 2)

    - Outcomes are measured by comparing the clients' responses to the same question at two points in time: once at admission to treatment and again at discharge from treatment services.
    - Percent change (P) is calculated using the formula $P = [(D-A)/A]*100$.
        - Aggregated admissions data (A) is categorized into two groups: positive actions (e.g., enrolled in job training) and negative actions (e.g., not enrolled in job training).
        - Discharge data (D) is categorized the same as aggregated admissions data.

2. Percent at Discharge (Table 3)
    - Outcomes are measured by examining the clients' responses to the desired criteria in the 30 days prior to discharge from treatment services. This method is specifically used to calculate two outcome measures: primary AOD use and social support.

Data Limitations

Federal and state privacy laws regulate the data that can be shared for public release and publication. This report does not include the number of admissions or discharges by program or county due to privacy regulations and the potential risk of individuals being identified.

Furthermore, outcomes for individual WCRTS programs are not provided because the outcomes are not comparable across programs. Outcomes can only be calculated from clients that have a standard discharge from treatment. A standard discharge occurs when a client is available to answer the outcome questions at discharge. Generally, clients with standard discharges have better outcomes than those who leave treatment early. The percentage of clients with standard discharges varies considerably by program.

The number of admissions/discharges within a single provider may be too small to make the outcome measure meaningful. Outcome measures that are calculated based only on a very small number of clients are not generalizable to any other population groups. Similarly, if the number of clients with a particular client functioning measure is small at admission, and the number of clients with that measure is large at discharge, the resulting percent change for that outcome measure will be very large and not meaningful.

In addition, CalOMS Tx was not designed to collect data in all the areas outlined in HSC Section 11757.65. Specifically, CalOMS Tx does not collect information on the children accompanying their mothers to treatment. Therefore, outcomes are limited to the clients' experiences in treatment. The CalOMS Tx system does not provide information on whether or not outcomes improve when coupling residential treatment services with primary health, mental health, and social services for women and children as outlined in HSC Section 11757.65.

Conclusion

DHCS will continue to monitor program goals and client outcomes as described in statute and regulation for those counties participating in the WCRTS program. In addition, DHCS will work to improve data collection and reporting, as well as improve program integrity, through close fiscal oversight and through the development of a monitoring protocol to track expenditures. DHCS plans to implement the protocol in FY 2018-19, which will include technical assistance to help counties meet program goals as outlined in HSC Section 11757.65. These efforts remain a high priority for DHCS as the

department constantly seeks to enhance services for pregnant and parenting women with substance use disorders and their families in residential treatment.

Attachments

Attachment A – CalOMS Tx Data Elements

CalOMS Tx Data Elements

CalOMS Tx Data Elements	Explanation of Data Elements	Question asked at admission and discharge	Values
AOD Use Life Domains			
Primary Drug Frequency	This field is used to record the frequency of use for the primary drug.	*How many days in the past 30 days has the client used the primary drug?*	Numeric value from 0-30; None or not applicable
Needle Use Last 30 days	This field is used to record the number of days the client has used a needle for drug injection in the last 30 days.	*How many days has the client used needles to inject drugs in the past 30 days?*	Numeric value from 0-30; client declined to state; client unable to answer.
Employment/Education Life Domain			
Employment Status	This field is used to record the client's current employment status	*What is the client's current employment status?*	Employed Full Time (35 hrs or more); Employed Part Time (less than 35 hrs); Unemployed, looking for work; Unemployed, not in the labor force (not seeking); Not in the labor force (not seeking)
Enrolled in Job Training	This field is used to record whether the client is currently enrolled in job training.	*Is the client currently enrolled in a job training program?*	Yes; No; client declined to state; client unable to answer.
Legal/Criminal Justice Life Domain			
Number of Arrests Last 30 Days	This field is used to record the number of arrests for the client in the last 30 days.	*How many times has the client been arrested in the past 30 days?*	Numeric value from 0-30; Client unable to answer

CalOMS Tx Data Elements	Explanation of Data Elements	Question asked at admission and discharge	Values
Medical/Physical Health Life Domain			
Medical Problems Last 30 Days	This field is used to record the number of days in the past 30 days the client has experienced physical health problems.	*How many days in the past 30 days has the client experienced physical health problems?*	Numeric value from 0-30; Client unable to answer
HIV Tested	This field indicates if the client has been tested for HIV/AIDS.	*Has the client been tested for HIV/AIDS?*	Yes; No; Client declined to state; Client unable to answer
Mental Health Life Domain			
Mental Health Medication	This field indicates whether the client has taken prescribed medication for mental health needs in the last 30 days.	*In the past 30 days, has the client taken prescribed medication for mental health needs?*	Yes; No; Client unable to answer
Social/Family Life Domain			
Social Support	This is the number of days in the last 30 days the client has participated in any social support recovery activities.	*How many days in the last 30 days has the client participated in any social support recovery activities such as: 12-step meetings, Other self-help meetings, religious/faith recovery or self-help meetings, meetings of organizations other than those listed above, interactions with family member and/or friend support of recovery?*	Numeric value from 0-30
Current Living Arrangements	This field identifies the client's current living arrangements.	*What is the client's current living arrangement?*	Homeless; Dependent; Independent

CalOMS Tx Data Elements	Explanation of Data Elements	Question asked at admission and discharge	Values
Family Conflict Last 30 Days	This field indicates the number of days in the last 30 days the client had serious conflicts with their family.	*How many days in the past 30 days has the client had serious conflicts with members of their family?*	Numeric value from 0-30; client declined to state; client unable to answer.
Number of Children Living with Someone Else	This field indicates the number of the client's children (birth or adopted) living with someone else because of a child protection court order.	*How many of the client's children age 17 and under are living with someone else because of a child protection court order?*	Numeric value from 0-30; Client unable to answer
Number of Children Living with Someone Else and Parental Rights Terminated	This field indicates the number of the client's children (birth or adopted) living with someone else because of a child protection court order and for whom their parental rights have been terminated.	*If the client has children living with someone else because of a child protection court order, for how many of these children aged 17 or under have the client's parental rights been terminated?*	Numeric value from 0-30; Client unable to answer