

San Francisco Drug Treatment on Demand

**Institute for Health Policy Studies, University of California, San Francisco
San Francisco Dept. of Public Health, Community Substance Abuse Services**

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Substance Abuse Treatment Capacity

- In San Francisco 1996, an estimated:
 - 45,000 needed treatment
 - 12,000 received treatment
 - 10,000 awaiting treatment
- Untreated substance abuse cost San Francisco \$1.7 billion annually

Treatment on Demand

November, 1996: Board of Supervisors resolution supporting “Treatment on Demand” (TOD)

February 1997: Community based Planning Council convened to develop implementation plan

July 1997: Treatment on Demand funding begins



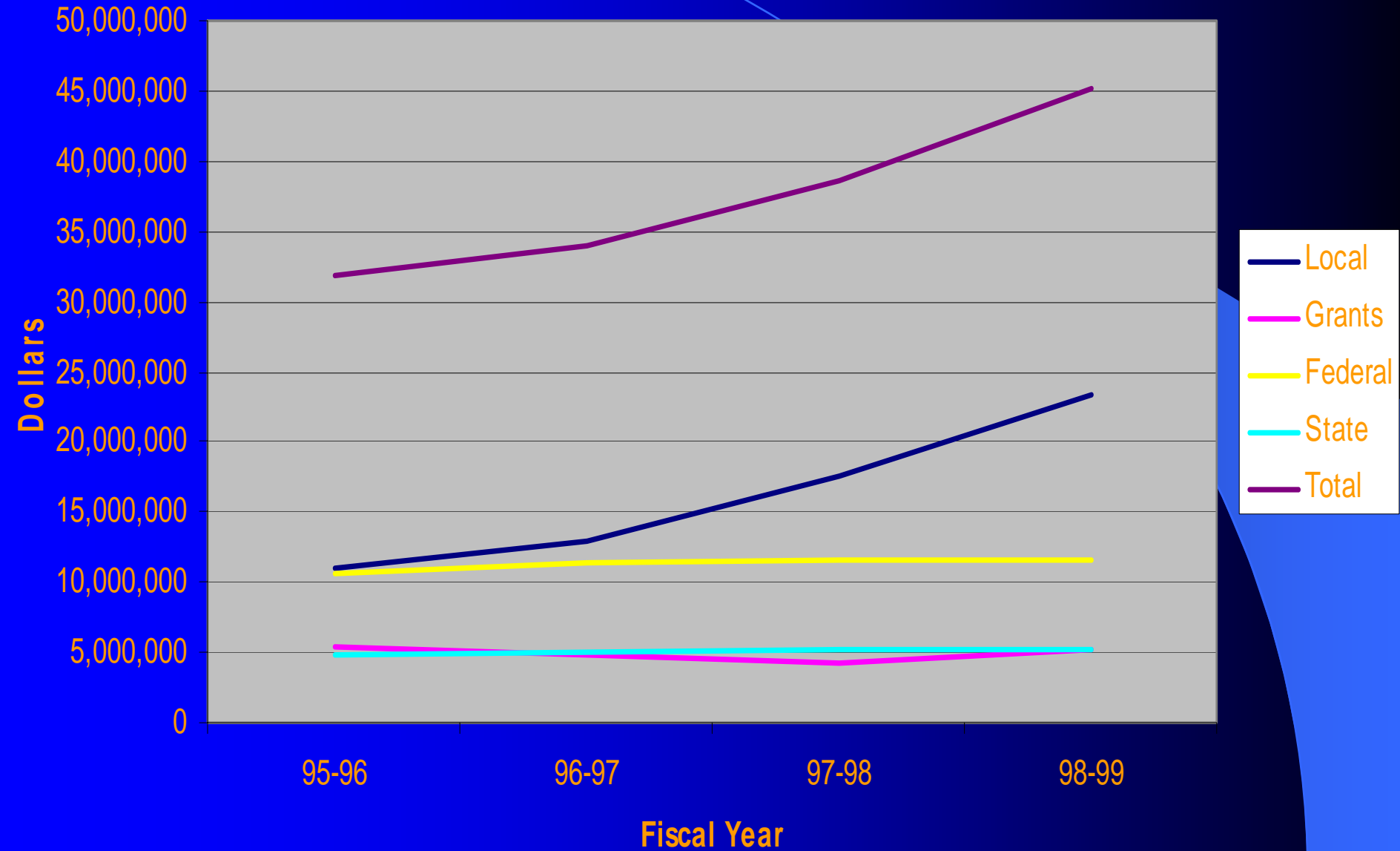
Research Questions

- Impact on treatment funding?
- Impact on resource allocation?
- Impact on waiting lists?
- Impact on treatment admissions?

Data Sources

- Budget, cost settlement and admissions data from SFDPH
- California's Drug and Alcohol Treatment Access Reporting ("DATAR") system
- 4-year window (FY 95-96 to FY 98-99)

Funding FY 95-96 to FY 98-99



Direct Treatment Resources: FY 95-96 to 98-99

	FY 95-96	FY 98-99	Increase
Direct treatment ¹	\$22.32 million	\$30.25 million	\$7.93 million ² (36%)

1. Excludes prevention, ancillary and supportive services

2. All figures converted to 98-99 dollars

Resource Allocation: Questions

- Resources allocated to:
 - treatment of unduplicated clients
 - treatment of readmitted clients
 - cost per day
 - length of stay
 - shift to more expensive modalities

Resource Allocation Model

Initial Admission
(Cost: \$6.95m)

Increased cost
per treatment
day
(Cost: \$2.65)

Repeat admission
(Cost: \$1.89m)

\$7.93 million

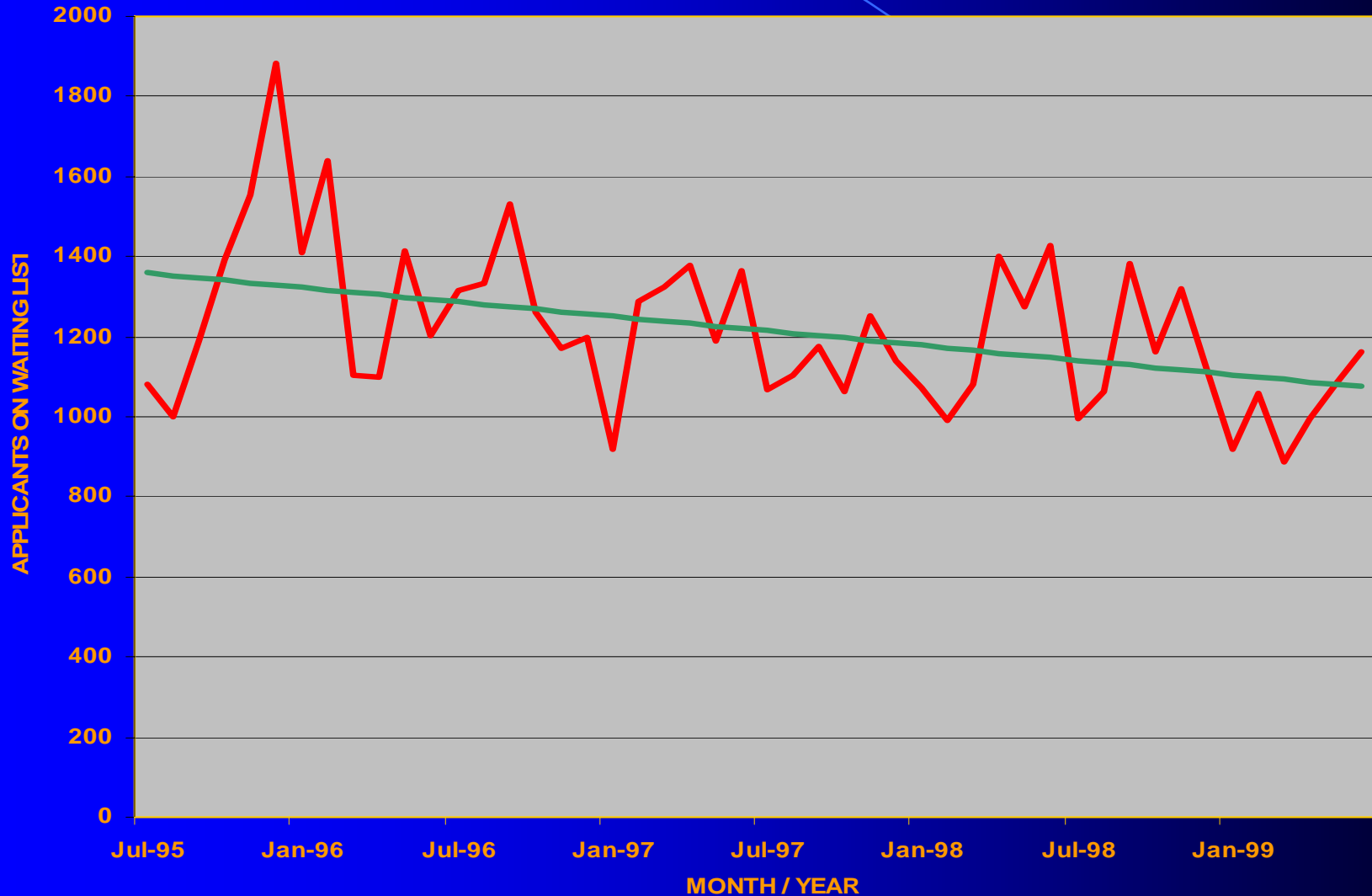
Shorter length of
stay in
treatment
(Savings: \$2.13m)

Shift to less
expensive
modalities
(Savings: \$1.43m)

Impact on Waiting List: Questions

- Number of applicants on waiting lists
- Mean number of days waited by those admitted
- Compare TOD and non-TOD funded programs

Number On Waiting List At End Of Month



Number on Waiting List: FY 95-96 to 98-99

- Significant decrease in number of applicants on waiting list at end of month
- This decrease did not differ between TOD and non-TOD funded programs

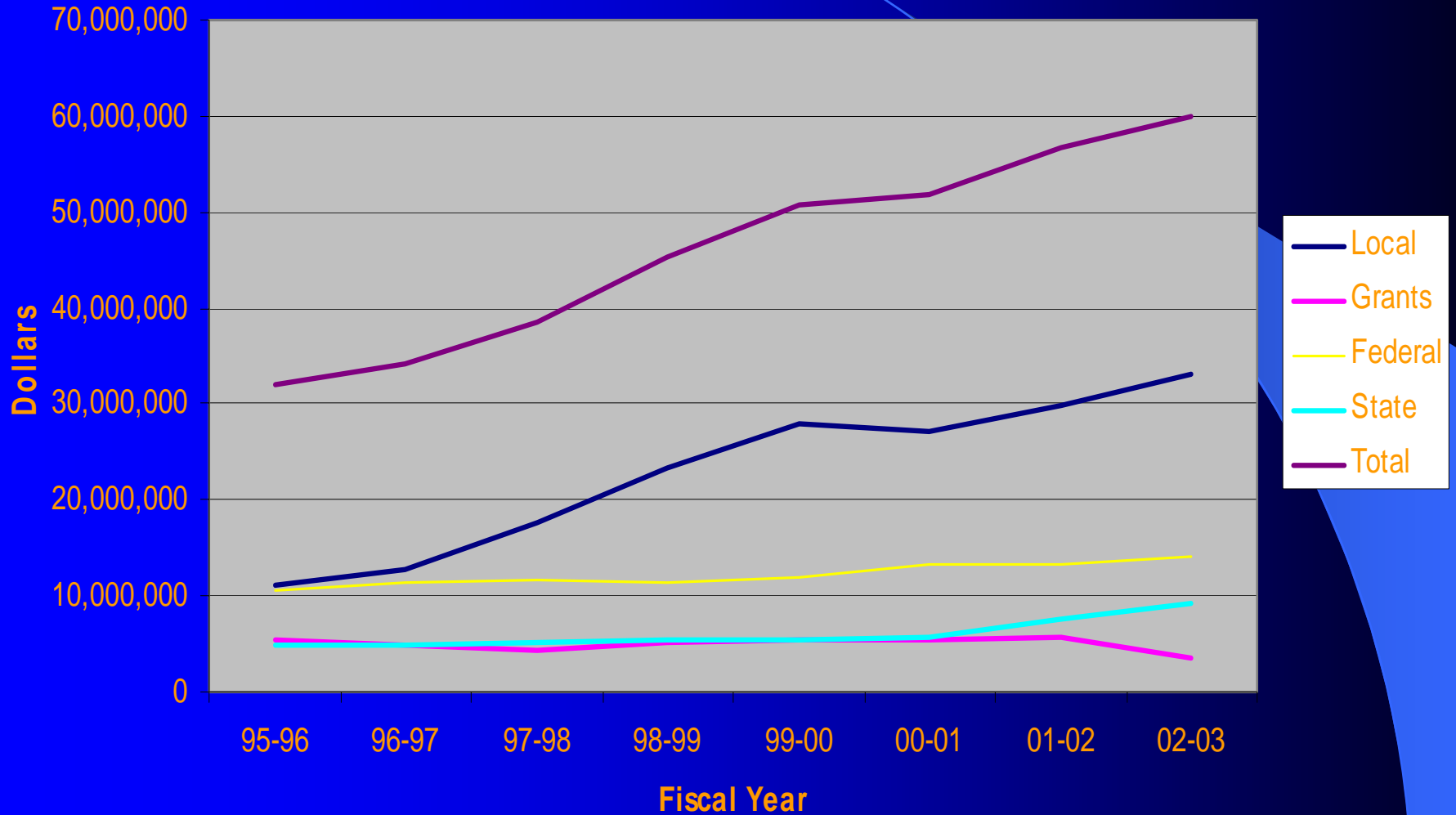
Number of Days Waited: FY 95-96 to 98-99

- No change in mean number of days waited for those admitted (all programs)
- No change in mean number of days waited by those admitted (non-TOD programs)
- Increase in mean number of days waited by those admitted to TOD programs

Impact on Admissions: Question

- Effects of TOD Funding, independent of time, on number of new admissions for 8 years (FY 95-96 to FY 02-03)

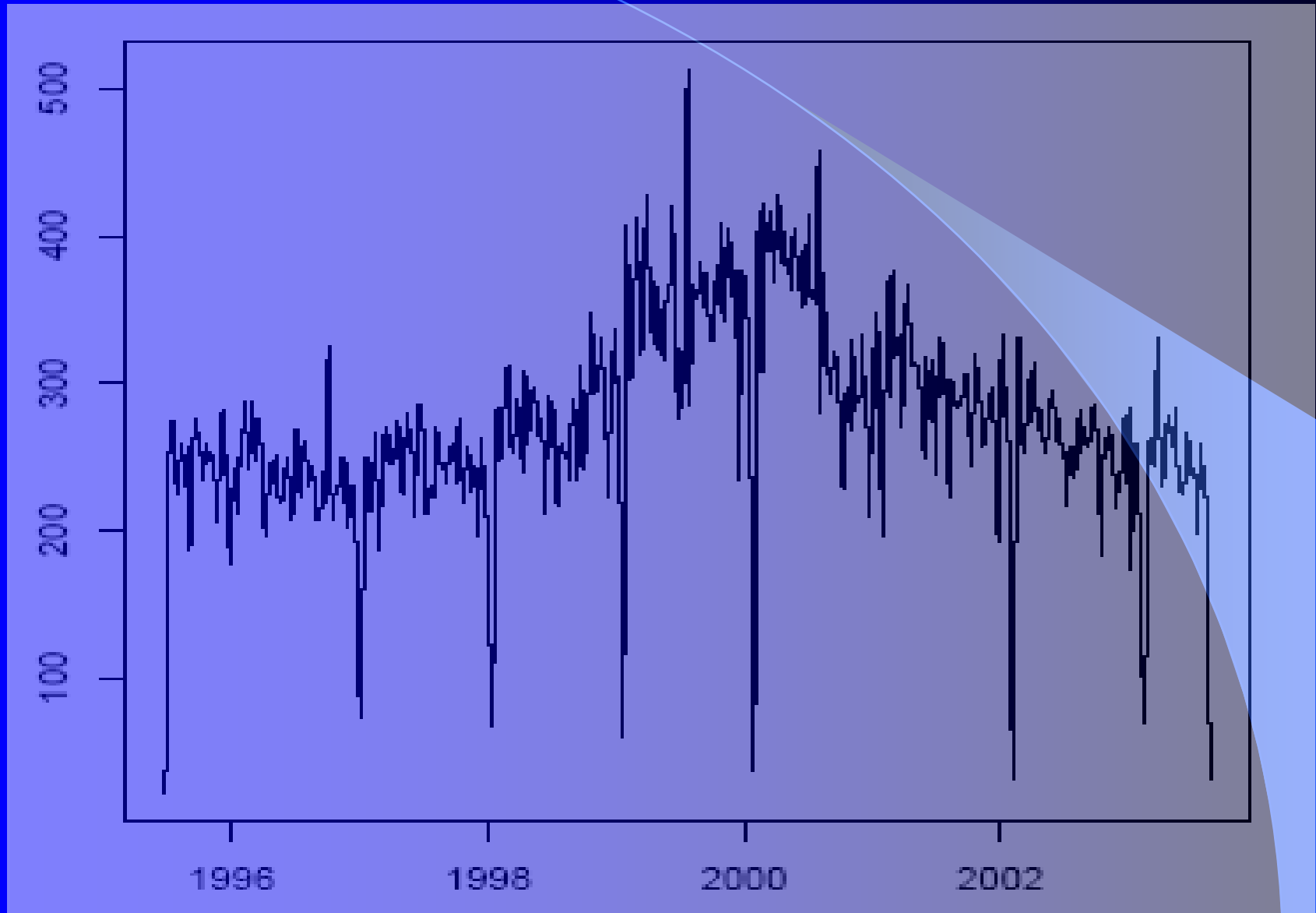
Funding FY 95-96 to FY 02-03



Funding FY 95-96 and FY 02-03

Source/Year	FY 95-96	FY 02-03
<i>Local</i>	11,070,472	33,101,368
<i>Grants</i>	5,424,824	3,504,037
<i>Federal</i>	10,577,008	14,103,570
<i>State</i>	4,835,269	9,194,274
<i>Total</i>	31,907,573	59,903,249

New Admissions FY 95-96 to FY 02-03



Time Series Results: New Admissions

- TOD Funding significantly associated with an increase in weekly number of new admissions
- Time significantly associated with a decrease in weekly number of new admissions

Conclusions

- Treatment funding increased
- Resources to increased admissions and cost of treatment day; savings from shorter length of stay, lower cost modalities
- Decrease wait list, but not TOD specific
- Initial increase in admissions but decrease post-2000