



The City and County of San Francisco  
**San Francisco Drug Abuse Advisory Board**  
1380 Howard Street, 4th Floor  
San Francisco, CA 94103  
Telephone: (415) 255-3521 FAX: (415) 255-3529  
Email: [danita\\_mathis@dph.sf.ca.us](mailto:danita_mathis@dph.sf.ca.us)

## **San Francisco Drug Abuse Advisory Board (DAAB)**

### **DAAB Planning and Evaluation Committee**

#### **APPROVED AND ADOPTED MEETING MINUTES August 29, 2000**

**Present:** Ms. Georgia Bates Creel, Chair; Mr. Robert Elliott, Ms. Gennie Nunley-Thompson, and Mr. Frederick Hobson.

**Absent:** Ms. Matonia Williams (Excused), Ms. Ethel Piper, and Ms. Marylouise Adlo-Robinson (Excused).

**CSAS Representatives:** Ms. Phyllis Harding, Community Substance Abuse Services (CSAS) Director  
Mr. Darryl Burton, CSAS DAAB/CAAB Liaison

**Staff:** Danita L. Mathis, Executive Officer.

**Guest:** Ms. Margery Brooks, Manager, CSAS Contracts Administration

#### **I. Approval of the Minutes**

The minutes for the committee meeting held on July 25, 2000 were approved and adopted. ***A report needs to be generated and distributed for the committee meeting held on April 26, 2000.***

#### **II. Presentation – “Community Substance Abuse Services (CSAS) Program Monitoring Process”**

Ms. Margery Brooks, Manager, CSAS Contracts Administration

The Chair, Ms. Georgia Bates Creel thanked Ms. Brooks for attending the Committee meeting and welcomed Ms. Brooks.

Ms. Brooks began her presentation by stating that it is a policy of the Health Commission to monitor contracted community-based organizations (programs) to conduct annual monitoring reviews. The monitoring review process can take several forms. Over the past few years the number of programs has grown tremendously. Multiple programs exist within single agencies. Today, there are over

150 programs in San Francisco County and there are only six CSAS Program Analyst. Most departments within the Health Department do not conduct actual on-site program monitor reviews due to the large number of programs. A few years ago the Mental Health, CSAS, and AIDS offices decided to conduct actual on-site program reviews once every three years unless there is a program whose demonstrated performance has been less than adequate in two areas or other issues are impacting the program or if the program is “new.” The general rule is to conduct actual on-site program reviews once every three years.

There are two types of monitoring review activities that occur within CSAS Contracts Administration, the actual on-site visit and the protocol review. Every program receives a Protocol Monitor Review questionnaire and is responsible for answering and completing the questionnaire and submitting to CSAS Contracts Administration. The Protocol Monitor Review is broken down by modality (i.e. – residential, outpatient, day outpatient, narcotic treatment, and DUI). Approximately two years ago the issue of data integrity surfaced in the program monitoring review process. The data integrity is an important aspect for the programs and for contract compliance. There appears to be a lack of data integrity between what is reported in the Billing Information System (BIS) and the program’s record of units of services. The client’s chart at a program should reflect all services the client received; this data will translate into units of services. The Program Analysts will review the BIS data, the client’s chart, and program-reported units of service data for a specific period of time. The Program Analysts also review clients’ charts for content and quality.

In July 1999, the State Department of Alcohol and Drug Programs (ADP) issued a “new” set of standards for licensed alcohol and drug programs. The Program Analysts will be using these ADP Standards to conduct program monitor reviews this year. Residential treatment programs must be licensed and certified by ADP. Outpatient treatment programs must be licensed by ADP but do not have to be certified. However, CSAS encourages outpatient treatment programs to obtain certification. ADP conducts actual on-site program visits to residential treatment programs every two years.

Ms. Nunley-Thompson informed Ms. Brooks that Law Enforcement couldn’t refer and place a probationer or parolee in a program that is not licensed and certified by the state. Ms. Brooks stated that she thought that was a good policy. Ms. Nunley-Thompson added that a probationer or parolee might find a program on his or her own that may not be licensed or certified.

Community Care licensing is under the Department of Social Services and narcotic treatment programs (NTP) are regulated by Title-IX Standards defined by the state.

Ms. Bates Creel asked Ms. Brooks “what would be helpful to CSAS in terms of getting information from client’s and in what format would CSAS like to see this information in from this committee?”

Ms. Brooks responded by stating that the system has evolved and gotten very complex. Ms. Brooks suggested that might be the Planning and Evaluation Committee can getting information the clients in the form of a short survey. The survey may ask the client “what services are needed?” and “what referrals for additional services did you receive upon your program completion?”

Ms. Phyllis Harding suggested that she would like the Planning and Evaluation Committee to focus on evaluating the effectiveness of the program’s implementation of Cultural Competency. Ms. Harding also stated that it might helpful to look at cultural competency as part of the system of care.

Ms. Nunley-Thompson suggested that might be CSAS contracted community-based organizations, providers may need to attend a Diversity Training class, which addresses cultural competency. Ms. Nunley-Thompson asked Ms. Harding “how come there are not any detoxification services in the Bayview area?” Ms. Brooks responded by saying there are not enough detoxification slots in the entire system. Ms. Harding informed Ms. Nunley-Thompson that the problem is citing space and working with the Planning Commission as well as notifying community neighbors.

### **III. Review Final Document Program Visits Protocol/Program Letter/Agenda for Program Visits.**

Ms. Georgia Bates Creel asked the committee members to review the proposed Client Questionnaire Form and to submit their comments to the Executive Officer. The committee approved the documentation for Program Visits Protocol and Program Letter. Ms. Bates Creel suggested the removal of Client Sexual Orientation from the Client Questionnaire form. Mr. Hobson expressed his opposition to this suggestion. The committee is still developing the Client Questionnaire Form.

**IV. Adjournment of DAAB Planning and Evaluation Committee Meeting at 1:15p.**

**Next meeting of the Planning and Evaluation Committee is scheduled on:**

**Tuesday, September 26, 2000 at  
1380 Howard Street at 10<sup>th</sup> Street from 11:15a to 12:15p  
In the Fourth Floor CSAS  
Conference Room.**

*Minutes Respectfully Submitted by Danita L. Mathis*