



Australian Government

Department of Health



An Australian Government Initiative

Updated Activity Work Plan 2016-2019: Drug and Alcohol Treatment

Strategic Vision for Drug and Alcohol Treatment Funding

Aligning with the *National Drug Strategy 2017-2026*, the *National Workforce development Strategy 2015-2018*, the *Queensland Mental Health, Drug and Alcohol Strategic Plan 2014-2019 (the Plan)*, and *Connecting Care to Recovery 2016 - 2021*, Central Queensland, Wide Bay, Sunshine Coast PHN's (the PHN) Strategic Vision for the Drug and Alcohol Treatment Activity Work Plan is to reduce the adverse impact of alcohol and other drugs on the population of the catchment.

The PHN has used the Drug and Alcohol Treatment Needs Assessment findings to guide further analysis, service development and implementation to address service gaps, invest in workforce capacity and focus on improved regional and service provider coordination and efficiency. Working within the strong governance structure of the *Regional Mental Health, Alcohol and Other Drug Council (the Council)* (further detailed in the *Mental Health Activity Work Plan*), the PHN will streamline service mapping and detailed assessment processes; with a scope to implement an Interactive Procurement process and minimise duplication of service commissioning in these two very closely-related domains of care.

Recognising the need for clients to access a continuum of services, PHN investment will focus on improving availability, accessibility, and efficiency of drug and alcohol treatment services, with priority given to regional and remote areas, and vulnerable populations including youth, CALD, Aboriginal and Torres Strait Islander and low socioeconomic groups.

The service mix to be commissioned over time will be founded on the existing service profile. Over the long term, we aim to provide locally-configured, needs-based services. Recognition that Aboriginal and Torres Strait Islander peoples experience a disproportionate amount of harm from drug and alcohol use, the PHN seeks to engage Aboriginal and Torres Strait Islander communities in a meaningful way to design culturally safe, competent and respectful service improvements. While we have identified some activities as not 'Indigenous specific', we acknowledge that the increased health needs of Aboriginal and Torres Strait Islander populations mean this group is more likely to be more highly represented in this activity. Ongoing consultation with Aboriginal and Torres Strait Islander communities is a priority in all PHN planning activities.

The PHN acknowledges that a key factor in successful implementation of *the Plan* is the need to work with GPs and health care providers to stimulate the market and explore opportunities to co-design innovative approaches, making the best use of available workforce, particularly in the rural and remote areas. Foundations for our approach include working with such providers to best utilise

electronic data systems (including My Health Record) and other person-centred systems to improve sharing of consumer history within privacy provisions and critically assessing commissioned services to ensure they are appropriate to local needs, safe and effective.

Some of the key activities and milestones achieved to date and in the planned activities include:

Timeline	Key Milestone achieved
June 2016 – July 2017	Recommission existing mental health services to continue services during planning, establishment and transition phases of Stepped Care
June 2016 - August 2016	PHN MHAOD Community & Stakeholder Information Forums held Established governance framework
July 2016 - September 2016	Undertook expression of interest for Strategic Collaborative membership and appointments
June 2016 – November 2016	Undertook comprehensive service mapping including general practices, pharmacies, and other allied health services to identify AOD gaps in the region AOD working groups established across the region Established membership with the Queensland PHNs and Northern Territory Working Group
August 2016 - January 2017	Undertook National Mental Health Service Planning Framework input required for completion of report
June 2016 - November 2016	Hold stakeholder information and co-design sessions on Stepped Care
August 2016 - April 2017	Prepare the PHN's Stepped Care approach for commissioned services
August 2016 - April 2017	Prepare our PHN IT, data, evaluation and monitoring requirements for Stepped Care
February 2017 - February 2018	Prepare communications campaign and implement phased approach for 'Change is coming', 'Change is here' and 'Access and quality services'
Apr-17	Launch 'Change is coming' phase of communications campaign
21 April 2017 - 25 June 2017	Prequalifying Questionnaire opens for Mental Health Stepped Care Services
1 July 2017 - 28 February 2017	Recommission existing providers of mental health services to provide continuity of care during the transition phase of Stepped Care
2 June 2017 - 3 July 2017	Invite shortlisted providers from Prequalifying Questionnaire to participate in Stage 2 Tender for Mental Health Stepped Care
Jul-17	Ratify Regional MHAOD Council Strategic Roadmap
July 2017 - October 2017	Draft Operational Guidelines for Stepped Care approach
August 2017 - September 2017	Consumer and Care Journey mapping forums to inform joint regional plan and Operational Guidelines
Sep-17	Commission successful Stepped Care services
Oct-17	Announce new commissioned Stepped Care Services and commence 'Change is here' communications campaign.

October 2017 - February 2018	Transition period for incoming and outgoing mental health services
October 2017 - June 2019	Contract management of Stepped Care Services
Oct-17	Large regional stakeholder forum to finalise joint Regional Mental Health, Suicide Prevention, Alcohol and Other Drugs Regional Plan.
Nov-17	Ratify Joint Regional Mental Health, Suicide Prevention, Alcohol and Other Drugs Regional Plan.
December 2017 - July 2018	Resource stakeholder and community listening posts for Stepped Care implementation and quality improvement.
July 2018 - June 2019	Explore interactive procurement approach for Alcohol and Other Drugs funding to ensure that priorities and services are targeted to need and complement State Government services.

2. (a) Planned activities: Drug and Alcohol Treatment Services – Operational and Flexible Funding

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	AOD-P1 Sector Engagement and Strategy Development
Existing, Modified, or New Activity	Modified activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Alcohol and Other Drug Indigenous Health Access Mental Health and Suicide Prevention
Description of Drug and Alcohol Treatment Activity	<p>As part of our commissioning approach, the PHN has defined where we procure health services, partner with other agencies to implement health system solutions, and where our staff provide health system support services (e.g. general practice support, allied health engagement, education, digital health leadership). This approach allows us to provide clarity and transparency to our stakeholders. This activity work plan uses this method.</p> <p>PHN will undertake the following activities in the category of sector engagement and strategy development.</p> <p>Partner:</p> <ol style="list-style-type: none"> 1) Partner with AIHW and other data custodians to secure the required service data with the aim of improving data quality and timeliness for commissioning (AOD-P1.1). 2) Continue to partner and engage with Strategic Collaborative representation, including QNADA (AOD-P1.2).

	<p>3) Explore costing models for procurement that were developed in partnership with National Drug and Alcohol Research Centre, to get access to the Drug and Alcohol Planning Manual for Australia, to support more efficient and effective commissioning of mainstream AOD treatment services from 2019/20 (AOD-P1.3).</p> <p>4) Partner to work towards implementation of the joint regional plan (AOD-P1.4).</p> <p>5) Partner with key organisations to specifically inform the commissioning process on best practice in AOD treatment services (AOD-P1.5).</p> <p>6) Partner with other Regional and Remote Queensland PHNs to maximise investment opportunities and economies of scale (AOD-P1.6).</p> <p>Provide:</p> <p>1) Media and communication regarding the launch of the workforce development procured service (AOD-P1.7).</p> <p>Procure:</p> <p>1) Workforce Development (AOD-P1.8):</p> <p style="padding-left: 40px;">1a) Implement workforce development framework 2018-2020</p> <p style="padding-left: 40px;">50% Implementation NCETA report</p> <p style="padding-left: 40px;">*Not sure on procurement method at this point.</p> <p>2) Engage experts to facilitate an Interactive Procurement approach for whole of PHN commissioning of mainstream AOD services, ready for commencement by July 2019 (AOD-P1.9).</p>
Target population cohort	Mental health, alcohol and other drug, and suicide prevention service planners, funders, providers and consumers.
Consultation	The Regional MHAOD Council is led by the PHN and includes representatives from Queensland Health and PHN Strategic Collaboratives

	<p>The three Strategic Collaboratives are facilitated by the PHN (as the Lead Agency) in collaboration with the respective Hospital and Health Services across the region. Strategic Collaboratives include representation from people with lived experience, Aboriginal and Torres Strait Islander groups, experts and clinicians.</p> <p>The Regional Aboriginal and Torres Strait Islander Advisory Group was established to engage with communities, community leaders and local Aboriginal Community Controlled Health Services.</p>
Collaboration	<ul style="list-style-type: none"> • Local Hospital and Health Services <ul style="list-style-type: none"> ○ planning, integration, coordination • Mental health care providers, drug and alcohol treatment service providers <ul style="list-style-type: none"> ○ assessment, intervention, and referral; planning and advisory • Tertiary education and research sectors <ul style="list-style-type: none"> ○ evaluation and implementation • State government <ul style="list-style-type: none"> ○ education and health sectors, planning and alignment • Peak bodies and ACCHOs <ul style="list-style-type: none"> ○ planning, advice, implementation and referral as appropriate • PHN regional councils, networks, and advisory groups <ul style="list-style-type: none"> ○ advisory • Community and social services <ul style="list-style-type: none"> ○ consultation and advisory; implementation
Indigenous Specific	No
Duration	2018-19
Coverage	PHN region

Proposed Activities

Activity Title (<i>e.g. Activity 1, 2, 3 etc.</i>)	AOD-P2 Drug and alcohol treatment service
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Existing, Modified, or New Activity	Modified activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Alcohol and Other Drug Access Mental Health and Suicide Prevention
Description of Drug and Alcohol Treatment Activity	<p>As part of our commissioning approach, the PHN has defined where we procure health services, partner with other agencies to implement health system solutions, and where our staff provide health system support services (e.g. general practice support, allied health engagement, education, digital health leadership). This approach allows us to provide clarity and transparency to our stakeholders. This activity work plan uses this method.</p> <p>Central Queensland, Wide Bay, Sunshine Coast PHN will continue to enhance access to drug and alcohol services via the following activities:</p> <p>Partner:</p> <p>1) Partner with HHS to better define referral pathways (AOD-P2.1).</p> <p>Provide:</p> <ul style="list-style-type: none"> • Work with Clinical Councils (3) to identify GPs who may be early adopters in AOD withdrawal services and possible solutions to GP based withdrawal. The aim of this activity is to increase willingness and capacity of GPs to provide/initiate withdrawal services (AOD-P2.2). <p>Procure:</p> <p>The PHN has a robust procurement process to ensure the most appropriate providers are commissioned to deliver PHN-funded activities.</p>
Target population cohort	People using methamphetamine, alcohol and other drugs; and their families / carers.
Consultation	The development of service models and clinical arrangements will be jointly undertaken with key stakeholders including (but not limited to) the HHSs, GPs, non-government organisation service providers,

	peak bodies, Aboriginal and Torres Strait Islander health services, social welfare services and consumer organisations.
Collaboration	<ul style="list-style-type: none"> • Local Hospital and Health Services <ul style="list-style-type: none"> ○ planning, integration, coordination • Mental health care providers, drug and alcohol treatment service providers <ul style="list-style-type: none"> ○ assessment, intervention, and referral; planning and advisory • Primary care providers <ul style="list-style-type: none"> ○ referral and treatment • Tertiary education and research sectors <ul style="list-style-type: none"> ○ evaluation and implementation • State government <ul style="list-style-type: none"> ○ education and health sectors, planning and alignment • Peak bodies and ACCHOs <ul style="list-style-type: none"> ○ planning, advice, implementation and referral as appropriate • PHN regional councils, networks, and advisory groups <ul style="list-style-type: none"> ○ advisory • Community and social services <ul style="list-style-type: none"> ○ consultation and advisory; implementation
Indigenous Specific	No
Duration	2018-19
Coverage	The entire PHN region. Considering the different regional patterns of drug and alcohol use, it is expected that the service mix will differ across areas.

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	AOD-P3 Drug and Alcohol After Hours Care and Referral
Existing, Modified, or New Activity	Modified activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Alcohol and Other Drug Indigenous Health Access Mental Health and Suicide Prevention
Description of Drug and Alcohol Treatment Activity	<p>As part of our commissioning approach, the PHN has defined where we procure health services, partner with other agencies to implement health system solutions, and where our staff provide health system support services (e.g. general practice support, allied health engagement, education, digital health leadership). This approach allows us to provide clarity and transparency to our stakeholders. This activity work plan uses this method.</p> <p>Information from the updated needs assessment indicates that further work is required to improve referral pathways and awareness of after hours drug and alcohol services:</p> <p>Partner:</p> <p>1) Partner with WQPHN, WMDDPHN, and NQPHN to achieve service coverage in rural and remote Queensland as part of the QNADA System Navigation, Early Intervention and Telephone Counselling Support Program strategy (AOD-P3.1).</p> <p>1a) Implement a rural and remote social media campaign to improve service access and system navigation in Queensland;</p> <p>1b) Work with the Queensland Government to improve the capacity of the Alcohol and Drug Information Service (ADIS) to deliver telephone counselling and facilitate warm referrals in rural and remote regions of Queensland;</p>

	<p>1c) Work with general practitioners in rural and remote areas of Queensland to build capacity to respond to alcohol and other drug issues.</p> <p>Provide:</p> <p>1) Provide AOD pathways via Health Pathways tool (AOD-P3.2).</p> <p>Procure:</p> <p>The PHN has a robust procurement process to ensure the most appropriate providers are commissioned to deliver PHN-funded activities.</p>
Target population cohort	GPs, rural and remote service providers, service system users.
Consultation	Identification of opportunities and co-design of counselling services will be jointly undertaken with key stakeholders including (but not limited to) the HHSs, GPs, non-government organisation service providers, peak bodies, Aboriginal and Torres Strait Islander health services, social welfare services and consumer organisations.
Collaboration	<ul style="list-style-type: none"> • Local Hospital and Health Services <ul style="list-style-type: none"> ○ planning, integration, coordination • Mental health care providers, drug and alcohol treatment service providers (including after hours) <ul style="list-style-type: none"> ○ assessment, intervention, and referral; planning and advisory • Tertiary education and research sectors <ul style="list-style-type: none"> ○ evaluation and implementation • State government <ul style="list-style-type: none"> ○ education and health sectors, planning and alignment • Peak bodies and ACCHOs <ul style="list-style-type: none"> ○ planning, advice, implementation and referral as appropriate • PHN and regional councils, networks and advisory groups <ul style="list-style-type: none"> ○ advisory • Community and social services

	○ consultation and advisory; implementation
Indigenous Specific	No
Duration	2018-19
Coverage	The entire PHN region, taking into account differences in the availability of existing services and level of need.

2. (b) Planned activities: Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander people – Flexible Funding

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	AOD-P4 Increase availability of specific services for Aboriginal and Torres Strait Islander people
Existing, Modified, or New Activity	Modified
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Alcohol and Other Drug Indigenous Health Access Mental Health and Suicide Prevention
Description of Drug and Alcohol Treatment Activity	<p>As part of our commissioning approach, the PHN has defined where we procure health services, partner with other agencies to implement health system solutions, and where our staff provide health system support services (e.g. general practice support, allied health engagement, education, digital health leadership). This approach allows us to provide clarity and transparency to our stakeholders. This activity work plan uses this method.</p> <p>Partner:</p> <ul style="list-style-type: none"> 1) Indigenous sponsorship/engagement (AOD-P4.1). 1a) RAP 2) Regional AMS / ACHHO forums (AOD-P4.2). <p>Provide:</p>

	<p>1) Provide stakeholders with information on available services for Aboriginal and Torres Strait Islander people (AOD-P4.3).</p> <p>2) Provide education to GPs on Cultural Competence, AOD pharmacotherapy, community-based withdrawal, and co-morbidity guidelines: CPD points (AOD-P4.4).</p> <p>Procure:</p> <p>The PHN has a robust procurement process to ensure the most appropriate providers are commissioned to deliver PHN-funded activities.</p>
Target population cohort	<p>Mainstream and Indigenous mental health and drug and alcohol service providers</p> <p>Indigenous and non-Indigenous mental health, alcohol and another drug workforce</p>
Consultation	<p>The approach will maximise existing community strengths and will focus on fostering community ownership, following community cultural protocols and cultural acceptance.</p> <p>Identification of opportunities and co-design of services will be jointly undertaken by Aboriginal and Torres Strait Islander organisations, HHSs, GPs, alcohol and other drug service providers, social welfare services, and consumer organisations.</p> <p>Commissioning activities will be undertaken by the PHN (unless in the development of <i>the Plan</i> it is agreed with other stakeholders that joint commissioning approaches would be warranted).</p> <p>The design and implementation of workforce strategies will be undertaken with appropriate peak bodies, service providers, Aboriginal and Torres Strait Islander organisations, universities and professional colleges and vocational training organisations.</p>
Collaboration	<ul style="list-style-type: none"> • Aboriginal and Torres Strait Islander Elders, leaders, communities, and individuals • Local Hospital and Health Services <ul style="list-style-type: none"> ○ planning, integration, coordination

	<ul style="list-style-type: none"> • Mainstream and Indigenous mental health care providers, drug and alcohol treatment service providers <ul style="list-style-type: none"> ○ assessment, intervention and referral; planning and advisory • Tertiary education and research sectors <ul style="list-style-type: none"> ○ evaluation and implementation • State government <ul style="list-style-type: none"> ○ education and health sectors, planning and alignment • Peak bodies and ACCHOs <ul style="list-style-type: none"> ○ planning, advice, implementation and referral as appropriate • PHN and regional councils, networks and advisory groups <ul style="list-style-type: none"> ○ advisory • Community and social services <ul style="list-style-type: none"> ○ consultation and advisory; implementation
Indigenous Specific	Yes
Duration	2018-19
Coverage	<p>Services will be provided across the entire PHN, LGAs with a large number of Indigenous populations will be given priority.</p> <ul style="list-style-type: none"> • Woorabinda • Rockhampton • Sunshine Coast • Fraser Coast • Bundaberg • Gladstone

