



Australian Government
Department of Health



An Australian Government Initiative

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

This Drug and Alcohol Treatment Activity Work Plan template has the following parts:

1. The updated strategic vision of each PHN, specific to drug and alcohol treatment.
2. The updated Drug and Alcohol Treatment Services Annual Plan 2016-17 to 2018-2019 which will provide:
 - a) An updated description of planned activities funded under the Schedule: Drug and Alcohol Treatment Activities, Item B.3 Drug and Alcohol Treatment Services – Operational and Flexible Funding.
 - b) An updated description of planned activities funded under the Schedule: Drug and Alcohol Treatment Activities, Item B.4 Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander people –Flexible Funding.
 - c) A description of planned activities which are no longer planned for implementation under the Schedule – Drug and Alcohol Treatment Activities.

Gold Coast Primary Health Network

When submitting this Activity Work Plan 2016-17 to 2018-19 to the Department of Health, the PHN must ensure that all internal clearances have been obtained and the document has been endorsed by the CEO.

The Activity Work Plan must be lodged via email to Qld_PHN@health.gov.au on or before 17 February 2017.

Overview

This Drug and Alcohol Treatment Activity Work Plan covers the period from 1 July 2016 to 30 June 2019 and is an update to the Activity Work Plan submitted to the Department in May 2016. To assist with PHN planning, each activity nominated in this work plan can be proposed for a period of up to 36 months. Regardless of the proposed duration for each activity, the Department of Health will require PHNs to submit updates to the Activity Work Plan on an annual basis.

Important documents to guide planning

The following documents will assist in the preparation of your Activity Work Plan:

- PHN Grant Programme Guidelines: Annexure A2 – Drug and Alcohol Treatment Services;
- Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services;
- Drug and Alcohol Treatment Services Needs Assessment Toolkit;
- PHN Needs Assessment Guide;
- PHN Performance Framework;
- Primary Health Networks Grant Programme Guidelines;
- Clause 3, Financial Provisions of the Standard Funding Agreement.

Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services

The *Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services* document (available on the PHN Secure Data Portal) has been developed to assist PHNs in understanding the Department's expectations in relation to activities that are in scope for funding, and will assist in translating drug and alcohol treatment evidence into a practical approach.

The high-level activities in scope under Flexible Funding allocations include:

- Early intervention (including Brief Intervention)
- Counselling
- Withdrawal Management (with pathways to post-acute withdrawal support)
- Residential Rehabilitation (with pathways to post-acute withdrawal support)
- Day Stay Rehabilitation (and other intensive non-residential programs)
- Post treatment support and relapse prevention
- Case management, care planning, and coordination
- Supporting the workforce through activities which promote joint up assessment and referral pathways, quality improvement, evidence based treatment, and service integration.

Activities relating to planning and consultation are to be funded under the Operational Funding allocation.

Key principles underpinning activity requirements

Drug and Alcohol Treatment Activity Work Plans are also expected to satisfy the following key principles underpinning drug and alcohol activity requirements:

- i. Proposed activities are evidence-based and in-scope of funding as detailed in *Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services*.

- ii. Proposed activities are clearly aligned with priorities identified in the corresponding Needs Assessment.
- iii. The majority of total Flexible Funding available is allocated to the delivery of specialist drug and alcohol service delivery (i.e. direct treatment activities) as opposed to non-treatment activities (e.g. workforce development, also in scope of this funding).
- iv. Proposed activities for Indigenous-specific and mainstream services are clearly delineated, including evidence of consultation and engagement from local key Indigenous stakeholders.
- v. Governance arrangements are clearly articulated, and include representation from key regional stakeholders such as Local Health Networks (or equivalent), State Government and specialist drug and alcohol service providers.

This funding is intended to complement existing Commonwealth and state and territory funded drug and alcohol treatment activities. Therefore, it is expected that existing state and territory funding, strategies, and frameworks are considered in the development of your Annual Plan to ensure services are complementary and do not duplicate existing efforts.

Formatting requirements

- Ensure all updates are made in tracked changes to facilitate timely approval.
- Submit plans in Microsoft Word format only.
- Ensure all updates are made to the previous version of your Activity Work Plan and submitted for approval. The Department will not accept updates made to a version of the Activity Work Plan (or other document) intended to supplement the original.
- Do not change the orientation of any page in this document.
- Do not add any columns or rows to tables, or insert tables/charts within tables – use attachments if necessary.
- Delete all instructions prior to submission.

1. Strategic Vision for Drug and Alcohol Treatment

Local Context

On 1 July 2015, the Primary Care Gold Coast commenced as the Gold Coast PHN, establishing its vision and goals aligned with Commonwealth government expectations.

Strategic Framework

National PHN Goals

- Increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes
- Improving coordination of care to ensure patients receive the right care in the right place at the right time

GCPHN Vision

“Building one world class health system for the Gold Coast”

GCPHN Strategic Goals

Increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes	Improving coordination of care to ensure patients receive the right care in the right place at the right time and by the right person	Engage and support General Practice and other stakeholders to facilitate improvements in our local health system	Be a high performing, efficient and accountable organisation
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GCPHN Strategic Outcomes

<p>People are healthier and take responsibility of own health</p> <p>People with complex illness have improved health outcomes</p>	<p>An integrated health system across the Gold Coast</p> <p>People stay well in their own homes and communities</p>	<p>Strong clinical leadership, capacity and innovation in the Gold Coast primary care sector</p> <p>Strong partnerships facilitate service improvement</p>	<p>Strong and highly effective. governance, leadership and decision making</p> <p>GCPHN has an integrated business model that ensures success</p> <p>GCPHN meets world class commissioning competencies</p>
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Values



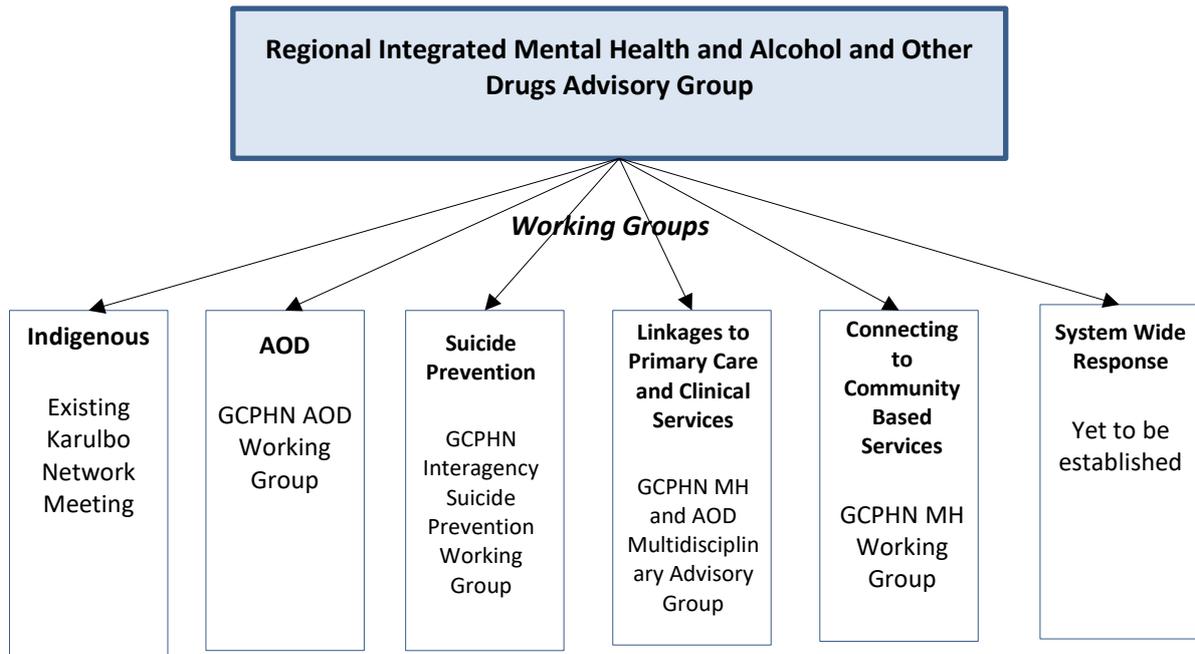
GCPHN has responsibility to commission new treatment services for both the mainstream drug and alcohol sector and services for Aboriginal and Torres Strait Islander people. Our strategic vision for Drug and Alcohol treatment is to ensure that those who are most in need will have timely access to services that are most appropriate for them and are cost effective, specifically ensuring treatment services for Aboriginal and Torres Strait Islander people are available. Commissioned services are informed by local needs and priorities and intend to maximise the benefits of the Commonwealth Government's investment under the National Ice Action Strategy.

Investment into the treatment sector at the local level by GCPHN supports the two aims set by Department of Health:

- Increasing the service delivery capacity of the drug and alcohol treatment sector through the commissioning of additional drug and alcohol treatment services, targeting areas of need; and
- Improving the effectiveness of drug and alcohol treatment services for individuals requiring support and treatment by increasing coordination between various sectors, and improving sector efficiency.

Governance arrangements

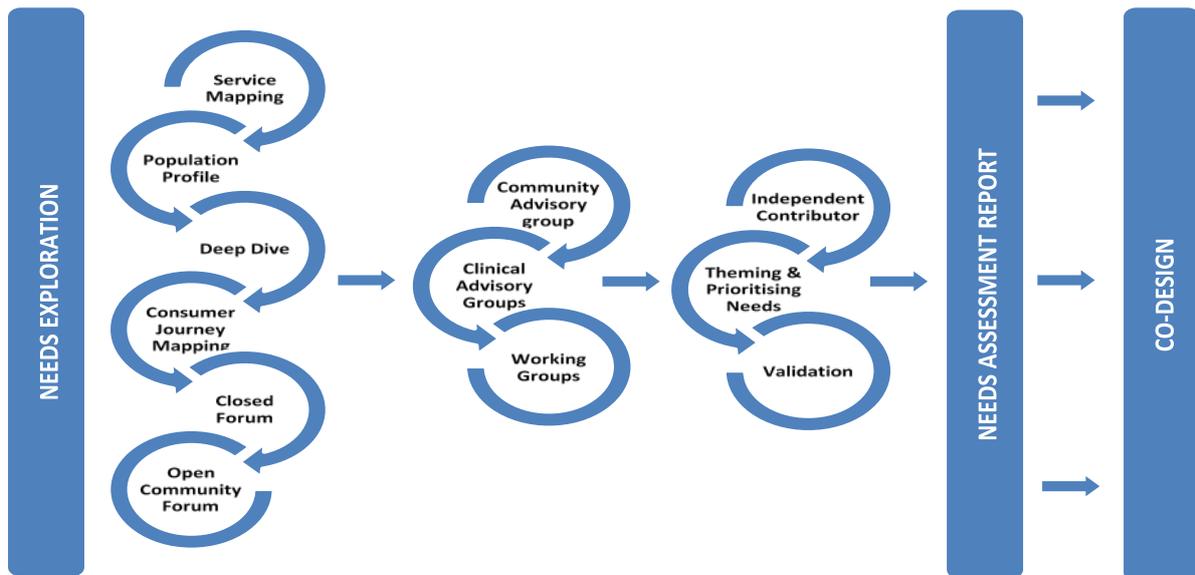
The following table outlines the Governance structure established in partnership with Gold Coast Health to ensure all stakeholders are consulted in mental health planning on the Gold Coast.



Consultation and joint planning processes

A collaborative approach was used throughout the needs assessment and commissioning process and incorporated a range of specific committees and groups that were established to ensure advice and input from all key stakeholders including consumers, partners, service providers and specialist experts in evidence based practice in mental health clinical service delivery (psychological and nursing) and drug and alcohol specialist treatment.

The diagram below sets out the consultation process that was undertaken in 2016 across mental health and alcohol and other drugs.



GCPHN is committed to working with the local drug and alcohol sector to effectively respond to the local health needs of the population, and increase the service capacity and coordination of treatment services on the Gold Coast.

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

PHNs must use the table below to outline the activities proposed to be undertaken within the period 2016-17 to 2018-19. These activities will be funded under the Schedule: Drug and Alcohol Treatment Activities, Item B.3 Drug and Alcohol Treatment Services – Operational and Flexible Funding.

- Refer to PHN Grant Programme Guidelines: Annexure A2 – Drug and Alcohol Treatment Services and Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services for the list of in-scope activities.
- It is emphasised that PHNs are to consider strategies to support the workforce in delivering the proposed activities through promoting joined up assessment processes and referral pathways, and supporting continuous quality improvement, evidence based treatment and service integration.

Note: *Please copy and complete the table as many times as necessary to report on each activity.*

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	DA2017 1.1 Northern Gold Coast alcohol and other drug treatment services
Existing, Modified, or New Activity	Existing activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	<p>Line 11 pages 18 – 19</p> <p>Needs (mainstream)</p> <ul style="list-style-type: none"> • Increase capacity of detoxification, residential rehabilitation and aftercare services to provide flexible support and follow up for clients as well as <i>enabling people still using substances to access services.</i> <p>Section 4 page 55</p> <p>As per Drug and Alcohol Treatment Activity Work Plan 2016-2019</p>

<p>Description of Drug and Alcohol Treatment Activity</p>	<p>Aim - to ensure timely access to services to capture clients wanting to address their drug use, and maximize the effectiveness of the intervention.</p> <p>Addresses needs - The 2016 Mental Health and Alcohol and Other Drugs Needs Assessment and co-design process informed a Request for Proposal (RFP) process that sought innovative responses to increase existing treatment sector capacity in the following areas:</p> <ul style="list-style-type: none"> • Early Treatment Support • Post Treatment Support <p>Treatment service components will include psychosocial interventions such as brief intervention, motivational interviewing, individual counselling and group work. Case management and client information and education will also be included as part of the model of service. These services will be in addition to, and build on, existing services provided for alcohol and other drugs, including ICE. They will ensure timely access to services to capture clients wanting to address their drug use, and maximize the effectiveness of the intervention.</p> <p>Two organisations were successful through the RFP process: Lives Lived Well and the Queensland Injectors Health Network (QuiHN). Through these providers, treatment services have commenced, will be delivered as an outreach model however does include a service hub in Nerang, in-reach to other AOD services, primary health, mental health and community services.</p> <p>Results are expected to include improved engagement and more effective treatment options.</p>
<p>Target population cohort</p>	<p>People residing in the northern Gold Coast area with alcohol and drug issues including ICE.</p>
<p>Consultation</p>	<p>A collaborative approach was used throughout the needs assessment and commissioning process across mental health and alcohol and other drugs and incorporated a range of specific committees and groups that were established to ensure advice and input from all key stakeholders. These included consumers, carers and family members, partners, service providers, Queensland peak body, Gold Coast Health and specialist experts in evidence based practice in mental health clinical service delivery (psychological and nursing) and drug and alcohol specialist treatment. The diagram outlined in the Vision above describes the consultation process ending in the co-design process that involved all of the above key stakeholders.</p> <p>Stakeholder engagement has been extensive with over 500 individuals involved in consultations in addition to the regular working groups and committees.</p>

	<p>GCPHN will continue to convene the AOD Working Group to guide the implementation of the newly commissioned services, identify workforce and sector development opportunities and continue to advise the PHN regarding the treatment sector. Representatives include the following:</p> <ul style="list-style-type: none"> • Consumers • Gold Coast Health • Queensland Network of Alcohol and Other Drug Agencies (QNADA) • Residential drug and alcohol rehabilitation services • Community based AOD counselling services • Youth mental health and AOD services • Aboriginal and Torres Strait Islander community organisation • Private AOD treatment providers • Queensland Police • Queensland Pharmacy Guild
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Collaboration	Stakeholder		Role	
	QuIHN and Lives Lived Well		jointly implementing the new services to ensure the treatment delivery methods and locations complement both services as well as the existing services in the region. There will be particular effort to ensure collaboration between Krurungal (refer to Activity 1.3) and the two mainstream services to support individual access and choice.	
	Gold Coast Health, General Practice, Aboriginal and Torres Strait Islander services, and mental health services and programs such as Partners in Recovery.		ensure efficient referral pathways are established and continuity of care is achieved.	
	The AOD Working Group		ongoing role in providing feedback and advice in relation to the implementation of the new services, impact on demand and capacity and helping to	

		communicate the new services to their clients and stakeholders.
	Gold Coast Health Ice Steering Committee and Ice Working Group.	GCPHN will maintain active membership to enable insight to reduce any potential duplication to facilitate connections between Gold Coast Health, community based services, General Practice and the new services.
Indigenous Specific	No	
Duration	January 2017 to June 2019	
Coverage	Although coverage of services is the GCPHN region (Gold Coast SA3), funded services will have a particular focus on the Northern Growth Corridor and northern suburbs (Nerang and north) of the Gold Coast as was identified in the Needs Assessment.	
Commissioning method	Existing contract (the two mainstream services identified in this plan were commissioned in whole with GCPHN funding the entire activity.	
Approach to market	GCPHN conducted a Request for Proposal process to procure these services.	
Decommissioning (if applicable)	N/A	

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	DA2017 1.2 Demand Management, General Practice, Capacity Building and General Practice Referral Pathways Approved by DOH
Existing, Modified, or New Activity	New activity (rollover of funds from 2016/17)
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Training and education as part of workforce and sector support was identified under most of the needs identified in the Mental Health and Alcohol and Other Drug needs assessment as detailed in GCPHN Needs Assessment Line 11 Pages 18-19. Additionally, the challenge service providers faced to predict client demand and manage service wait lists was identified as an ongoing issue and one that impacted on meeting the needs of the local community.
Description of Drug and Alcohol Treatment Activity	<p>Aim - enhance the capacity and effectiveness of the funded organisations, General Practice and the broader alcohol and other drugs (AOD) treatment sector and their ability to meet the needs of their client group.</p> <p>Address needs – by enhancing the capacity and effectiveness of providers regarding evidence based training, referral options, and capacity to manage demand.</p> <p>Elements of the model include</p> <p>1) Demand Management</p> <ul style="list-style-type: none"> • Work with the two mainstream AOD organisations contracted by GCPHN to monitor and evaluate the demand for services over the initial six-month period from January to June 2017. Following this an allocation of funding would be made to support the organisations to increase service provision according to the level of demand, for the period of July 2017 to June 2018. <p>2) General Practice</p> <ul style="list-style-type: none"> • Commission existing training and education providers to develop and implement an evidence based program for General Practice staff. This would include core skills and competencies for AOD interventions including brief intervention and motivational interviewing.

	<p>3) Capacity Building</p> <ul style="list-style-type: none"> • A program of education, training and skills development for workers in community based organisations. It is envisaged that this program of education would ensure workers respond to clients not only for their alcohol and other drugs or mental health needs but also the more complex response in relation to dual diagnosis. <p>4) General Practice Referral Pathways</p> <ul style="list-style-type: none"> • The development of appropriate templates and documentation to support the effective and appropriate referrals from General Practitioners to AOD specialist treatment services. This would build on the already extensive suite of referral template documents developed by GCPHN and Gold Coast Health to assist GPs. • A referral matrix would also be developed to provide guidance for GPs to determine the most appropriate treatment organisation/s for referral of their patients, based on patient need and level of substance use. This would support the proposed investment in education and training for General Practice and early intervention and continuity of care for the patient. <p>Results will include enhanced knowledge and confidence of service providers to support clients with drug and or alcohol issues.</p>
Target population cohort	<ul style="list-style-type: none"> • People residing in the northern Gold Coast area (from Nerang to Southport north) • General Practitioners • Community organisation based workers • PHN funded services
Consultation	<p>Consultation has commenced and continues during the developmental stages of the proposed work and includes:</p> <ul style="list-style-type: none"> • Training providers • General Practice staff • Gold Coast Health • AOD and mental health services • GCPHN AOD Working Group

	<ul style="list-style-type: none"> GCPHN Governance and advisory groups
Collaboration	Details of collaboration in service delivery will be finalised during the service development activities.
Indigenous Specific	No
Duration	From date of approval from DoH through to June 2018
Coverage	Gold Coast PHN region (Gold Coast SA4)
Commissioning method	Where applicable, service agreements will be developed for the successful provider/s to deliver the services.
Approach to market	<p>A combination of direct engagement and open tender will be used to procure these services due to the particular areas of specialty required for some activities.</p> <p>Contracted services will be monitored and evaluated as per the GCPHN performance monitoring framework.</p>
Decommissioning (if applicable)	N/A

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

PHNs must use the table below to outline the activities proposed to be undertaken within the period 2016-17 to 2018-19. These activities will be funded under the Schedule: Drug and Alcohol Treatment Activities, Item B.4 Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander people – Flexible Funding.

- Refer to PHN Grant Programme Guidelines: Annexure A2 – Drug and Alcohol Treatment Services and Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services for the list of in-scope activities.
- It is emphasised that PHNs are to consider strategies to support the workforce in delivering the proposed activities through promoting joined up assessment processes and referral pathways, and supporting continuous quality improvement, evidence based treatment and service integration.

Note: *Please copy and complete the table as many times as necessary to report on each activity.*

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	DA 2017 1.3 Aboriginal and Torres Strait Islander Alcohol and Other Drugs Gold Coast Service
Existing, Modified, or New Activity	Existing activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	<p>Line 11 page 19 Needs (Indigenous)</p> <ul style="list-style-type: none"> • Increase capacity through existing Aboriginal and Torres Strait Islander service providers in relation to early intervention and care coordination for clients.
Description of Drug and Alcohol Treatment Activity	Aim – provide a holistic service response for Indigenous clients across mental health, suicide prevention and alcohol and drug services

	<p>Address needs - The 2016 Mental Health and Alcohol and Other Drugs Needs Assessment informed a collaborative co-design process in relation to treatment needs for Aboriginal and Torres Strait Islanders. Through this process and in consultation with key Indigenous service providers and the Karulbo network, it has been identified that a holistic service response is essential for Indigenous clients, and it would be detrimental to separate the service responses for mental health, suicide prevention and AOD. GCPHN has therefore commissioned a combined service response.</p> <p>The model being implemented has Krurungal Aboriginal & Torres Strait Islander Corporation for Welfare, Resource and Housing identified as the most appropriate service provider to provide AOD services. The service components include early identification, brief intervention, group work, case management and information and education.</p> <p>The results will include higher rates of successful engagement with Indigenous clients and more effective treatment</p>
Target population cohort	Aboriginal and Torres Strait Islander people across the Gold Coast.
Consultation	<p>A collaborative approach was used throughout the needs assessment and commissioning process and incorporated a range of specific committees and groups that were established to ensure advice and input from all key stakeholders. These included consumers, carers and family members, partners, Queensland peak body, Gold Coast Health, service providers and specialist experts in evidence based practice in mental health clinical service delivery (psychological and nursing) and drug and alcohol specialist treatment. The diagram in the vision above outlines the consultation process ending in the co-design process that involved the key stakeholders from Gold Coast Health, primary health, allied health and community.</p> <p>Stakeholder engagement has been extensive with over 500 individuals involved in consultations in addition to the regular working groups and committees.</p> <p>Throughout this consultation, specific Aboriginal and Torres Strait Islander health needs and service responses were sought to inform both the mainstream and Indigenous service design processes. The Karulbo network was central to the consultation processes, as was the two Indigenous service providers in relation to service model development.</p>
Collaboration	

	Stakeholder	Role
	Aboriginal and Torres Strait Islander services and consultation with the Karulbo network, as well as the advisory and working groups identified in the governance table in Section 1.	co-design a service response to meet local needs and an ongoing capacity to build on existing sector capability.
	Aboriginal and Torres Strait Islander services and consultation with the Karulbo network, as well as the advisory and working groups identified in the governance table in Section 1.	Advice and feedback throughout implementation phase
Indigenous Specific	Yes	
Duration	January 2017 – June 2019	
Coverage	GCPHN Region (Gold Coast SA4)	
Commissioning method	Existing contract - The provider has been commissioned in whole through a service agreement.	
Approach to market	Direct engagement - As there are only two Aboriginal and Torres Strait Islander service providers on the Gold Coast, a direct engagement approach was used to commission Krurungal for the community component of the Indigenous response.	
Decommissioning (if applicable)	N/A	

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	DA2017 1.4 Demand Management and Workforce Development Approved by DoH
Existing, Modified, or New Activity	New Activity
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Training and education as part of workforce and sector support was identified under most of the needs identified in Mental Health and Alcohol and Other Drug needs assessment as detailed in GCPHN Needs Assessment Line 11 Pages 18-19 Workforce and sector support. Additionally, demand management and ensuring client access when wait lists were prevalent was a common issue faced by service providers.
Description of Drug and Alcohol Treatment Activity	<p>Aim – to ensure service capacity meets demand and that appropriately skilled workforce available to support clients.</p> <p>Addresses need - by enhancing the capacity and effectiveness of providers regarding evidence based training and referral options.</p> <p>The model includes the following activities which will support increased capacity and effectiveness of the funded organisation:</p> <p>1) Demand Management</p> <ul style="list-style-type: none"> • Work with the Indigenous organisation contracted by GCPHN to monitor and evaluate the demand for services over the initial six month period from January to June 2017. The service will then be funded to support any increase in service provision to meet demand for the new service over the period July 2017 to June 2018. <p>2) Workforce Development</p> <ul style="list-style-type: none"> • Support for the Indigenous staff to undertake higher education, AOD specific education, training and skills development. <p>Results will include appropriate level of service delivery and increased capacity of Indigenous staff to provide AOD services to Indigenous clients</p>
Target population cohort	Aboriginal and Torres Strait Islander people.

Consultation	Consultation has commenced and will continue with the two Indigenous service providers, Krurungal and Kalwun Health Service (funded for mental health services) to support the development and implementation of this work.					
Collaboration	<table border="1"> <thead> <tr> <th>Stakeholder</th> <th>Role</th> </tr> </thead> <tbody> <tr> <td>Indigenous AOD practitioners from Gold Coast Health</td> <td>Assist to identify the most appropriate training available for staff</td> </tr> </tbody> </table>		Stakeholder	Role	Indigenous AOD practitioners from Gold Coast Health	Assist to identify the most appropriate training available for staff
Stakeholder	Role					
Indigenous AOD practitioners from Gold Coast Health	Assist to identify the most appropriate training available for staff					
Indigenous Specific	Yes					
Duration	From date of approval from DoH through to June 2018					
Coverage	GCPHN Region (Gold Coast SA4)					
Commissioning method	Contract – (service agreements will be developed for the successful provider/s to deliver the services.					
Approach to market	A combination of direct approach and open tender will be used to procure these services due to the particular areas of specialty required for some activities.					
Decommissioning (if applicable)	N/A					