



Australian Government

Department of Health



An Australian Government Initiative

Drug and Alcohol Treatment Activity Work Plan 2019-2022:

Drug and Alcohol Treatment Services Funding

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

1. The Drug and Alcohol Treatment Services Activity Work Plan for the financial years 2019-20, 2020-2021 and 2021-2022. Please complete the table of planned activities funded under the following:
 - Schedule: Drug and Alcohol Treatment Services - Core and Operational Funding (formerly Transition Funding)
 - Schedule: Drug and Alcohol Treatment Services – NIAS Operational and Mainstream Funding (formerly Operational and Flexible Funding).
 - Schedule: Drug and Alcohol Treatment Services - NIAS Aboriginal and Torres Strait Islander people Funding (Indigenous Funding) (formerly Aboriginal and Torres Strait Islander people – Flexible Funding).
2. The indicative Funding Budget for the financial years 2019-20, 2020-21 and 2021-22 (attach an excel spreadsheet using template provided) to report planned expenditure under the following:
 - Drug and Alcohol Treatment Services – Core and Operational Funding (formerly Transition Funding)
 - Drug and Alcohol Treatment Services – NIAS Operational and Mainstream Funding (formerly Operational and Flexible Funding)
 - Drug and Alcohol Treatment Services – NIAS Indigenous Funding (formerly Aboriginal and Torres Strait Islander people- Flexible Funding)

South Eastern Melbourne PHN

When submitted this Activity Work Plan 2018-2021 to the Department of Health, the PHN must ensure that all internal clearances have been obtained and has been endorsed by the CEO.

Overview

This Drug and Alcohol Treatment Services Activity Work Plan covers the period from 1 July 2019 to 30 June 2022. 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:

- Guidance for PHNs: Commissioning of Drug and Alcohol Treatment Services;
- Drug and Alcohol Treatment Information Strategy for PHNs;
- Drug and Alcohol Treatment Services Needs Assessment Toolkit;
- PHN Needs Assessment Guide;
- Activity Work Plan Guidance Material;
- PHN Program Performance and Quality 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 Core and NIAS Funding allocations include:

- Early intervention (including Brief Intervention)
- Counselling
- Withdrawal Management
- Residential Rehabilitation
- Day Stay Rehabilitation (and other intensive non-residential programs)
- Aftercare / relapse Prevention
- Case management, care planning, and coordination
- Information and Education
- Workforce Development, Capacity Building, including 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 Core and NIAS Funding 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. Detailed budgets are provided outlining funding with a clearly identified allocation for each activity (including sub-activity) type.
- v. Proposed activities for Indigenous-specific and mainstream services are clearly delineated, including evidence of consultation and engagement from local key Indigenous stakeholders.
- vi. 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 Activity Work Plan to ensure services are complementary and do not duplicate existing efforts.

Formatting requirements

- Submit plans in Microsoft Word format only.
- Submit budgets in Microsoft Excel format only.
- 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. (a) Drug and Alcohol Treatment Services planned activities for the funding period 2019-20 to 2021-22
 - Drug and Alcohol Treatment Services – Core Funding
 - Drug and Alcohol Treatment Services – NIAS Mainstream Funding
 - Drug and Alcohol Treatment Services – NIAS Aboriginal and Torres Strait Islander people Funding

PHNs must use the table below to outline the activities proposed to be undertaken within the period 2019-2022.

Proposed Activities - copy and complete the table as many times as necessary to report on each activity	
ACTIVITY TITLE	<p><i>AOD1 - AOD Commonwealth Transition Contracts:</i></p> <ul style="list-style-type: none"> • <i>AOD Outreach Services</i> • <i>Dual Diagnosis</i> • <i>Young Parent's Program</i> • <i>Street Project</i> • <i>AOD Dual Diagnosis Management and Treatment Program</i> • <i>Breaking the Barriers</i> • <i>Peninsula Drug and Alcohol Program PenDAP</i> • <i>Dual Diagnosis</i> • <i>Altered States</i> • <i>Family Connections</i> • <i>Complex Care and Recovery</i> • <i>CALD</i>
Existing, Modified, or New Activity	<p><i>Existing Activity</i></p> <p><i>Commonwealth transitioned contracts.</i></p>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Due to these being transitioned contracts, the need was already identified prior to the SEMPHN Needs Assessment.</i>
Aim of Activity	<p><i>The Commonwealth transitioned contracts will continue to be monitored via existing SEMPHN contract management reporting and contractual obligations. The evaluation of services will be undertaken via ongoing program review, assessment of submitted reports and data, budget acquittals and the evaluation of outcomes. SEMPHN will also undertake a mapping exercise to identify gaps and duplication of services across the SEMPHN</i></p>

catchment alongside identified needs as detailed in the SEMPHN Needs Assessment Report.

This will inform future decisions and directions and depending on outcomes may result in the redirection and refocus of existing contracts.

AOD Outreach Services – aims to provide effective treatment and access to relevant services aimed at improving the quality of clients' physical and mental health.

Dual Diagnosis – aims to improve referral pathways and increase access to appropriate treatment for consumers experiencing dual diagnosis and currently accessing the mental health and AOD service systems.

Young Parent's Program – aims to reduce substance use and harm for young individuals and families.

Street Project – aims to deliver an outreach project that facilitates effective pathways into AOD treatment to people who are homeless, at risk of homelessness or involved in street prostitution.

AOD Dual Diagnosis Management and Treatment Program – aims to improve dual diagnosis responses through the provision of complementary specialist dual diagnosis treatment services and works specifically with clients who experience high levels of disadvantage and vulnerability as a result of co-occurring mental health and problematic substance use.

Breaking the Barriers – offers women the opportunity to access support to stabilise on pharmacotherapy during and post birth; to participate in individual/group counselling; and access practice supports and linkages to other services and networks to meet individual needs.

Peninsula Drug and Alcohol Program PenDAP – delivers flexible services to young people, adults and older adult populations via the delivery of early intervention, care coordination, outreach services and post treatment support.

Dual Diagnosis – aims to reduce the risk from AOD use for clients experiencing family violence or child protection issues, and families with dependent children who have lost or have reduced contact as a result of co-contributing AOD misuse. This activity also provides post withdrawal support linkages.

Altered States – aims to build resilience of LGBTI community members to minimise harm associated with AOD use, reduce problematic substance use, reduce harm associated with substance use, and enhance the capacity of alcohol and drug services to address the needs of LGBTI clients.

Family Connections – aims to reduce substance use and harms associated with substance use to individuals and affected family members via an integrated approach to service delivery.

	<p><u>Complex Care and Recovery</u> – aims to increase participation in service of clients experiencing comorbidity with the support of peer workers. The activity provides complex care coordination for residents experiencing comorbidities and maintains linkages and partnerships with relevant healthcare and welfare resources to better treat and support clients.</p> <p><u>CALD</u> – aims to offer evidence based interventions to young people from a CALD background to reduce the harms from substance use.</p>
Description of Activity	<p><u>AOD Outreach Services</u> – delivers evidence based treatment services to clients over the age of 16 with long term illicit/licit drug use and are unable to access mainstream services. The activity establishes referral pathways between AOD services intake and access points, Area Mental Health Services and GP services in order for clients to access additional primary health services.</p> <p><u>Dual Diagnosis</u> – provides effective treatment and access to relevant services aimed at improving the quality of clients' physical and mental health.</p> <p><u>Young Parent's Program</u> – supports young people's management of substance misuse and enables recovery to achieve positive outcomes for themselves and their child/ren via client centred, family sensitive and inclusive primary outreach based interventions. Provides outreach, referral service and non-residential withdrawal treatment types.</p> <p><u>Street Project</u> – this activity provides specific capacity to assist and address the drug and/or alcohol issues of those who are homeless, at risk of homelessness and/or involved in street prostitution.</p> <p><u>AOD Dual Diagnosis Management and Treatment Program</u> – assists clients with co-occurring mental health and alcohol and drug issues through improved screening and assessment, increased staff capacity to address mental health issues through access to mental health and dual diagnosis training, secondary consultation and facilitation of dual diagnosis communities of practice. The development of integrated treatment and client pathways between programs and services improves linkages with the relevant services.</p> <p><u>Breaking the Barriers</u> – a parenting program for mothers experiencing alcohol and other drug use and/or on pharmacotherapy by providing primary intervention with the mother and secondary intensive support for her children and significant other as the family works towards stability and social and economic participation in the community. A key focus is to identify, address and reduce the harms associated with comorbidity issues.</p> <p><u>Peninsula Drug and Alcohol Program PenDAP</u> – targets older adults and young people by implementing specific teams to better respond to the issues of these population groups with a key focus on treatment and recovery.</p>

	<p><u>Dual Diagnosis</u> – provides evidence based psychotherapeutic therapy interventions with clients that are currently involved with child protection or experiencing family violence. It supports individuals to manage their problematic alcohol and/or drug use and their family/significant others to provide a supportive environment for this to occur.</p> <p><u>Altered States</u> – program works with LGBTI individuals experiencing problematic illicit drug use who also have concurrent mental health issues. The program includes a therapeutic group care model that addresses the comorbidity of problematic substance abuse and mental illness.</p> <p><u>Family Connections</u> – this counselling service provides professional and confidential support to families and friends impacted by someone’s drug and alcohol use. The specialist individual and family counselling service provides clients with the opportunity to redevelop and move forward in their relationships, drawing upon existing skills and strengths.</p> <p><u>Complex Care and Recovery</u> – complex care coordinator and peer worker works with and supports clients of the residential peer programs.</p> <p><u>CALD</u> – culturally specific, intensive drug and alcohol case management service. Provides information, support, education, treatment and reintegration into community for those identified as requiring a high level of support to address substance use.</p>
Target population cohort	The transitioned Commonwealth contracts target the young, young adult, adults, older adults, LGBTI, young mothers and CALD cohorts.
In scope AOD Treatment Type	<p>The transitioned Commonwealth contracts deliver the following treatment types:</p> <ul style="list-style-type: none"> • Early Intervention (including Brief Intervention) • Counselling • Withdrawal Management • Aftercare/Relapse Prevention • Case Management, Care Planning, and Coordination • Information and Education • Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration.
Indigenous specific	No
Coverage	The transitioned Commonwealth contracts deliver services across the SEMPHN catchment.
Consultation	Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH and DHHS representatives.

	<i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD Specialist Treatment Services, LHNs, Area 4 Pharmacotherapy, VAADA and Local Government to promote a coordinated approach in delivering services, the identification of gaps and duplication of services while working on highlighted issues such as workforce and reporting.</i></p> <p><i>SEMPHN will continue to work with identified AOD services as well as coordinate efforts with Commonwealth and State Departments.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD2 – AOD AWARE Alcohol, Wellbeing and Risk (AWARE)</i>
Existing, Modified, or New Activity	<i>Existing Activity Drug and Alcohol Activity Work Plan 2016-19: Activity 1.</i>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Priority Reference Section 4 2.1 on pages 33 to 34 (2018 Needs Assessment).</i>
Aim of Activity	<i>The AWARE activity delivers a service that addresses adolescent alcohol consumption in the identified high needs areas of the SEMPLHN catchment. The activity aims to provide additional treatment interventions that addresses and reduces adolescent alcohol consumption with the appropriate targeted strategies.</i>
Description of Activity	<i>The AWARE activity delivers strategies to address adolescent alcohol consumption in identified high needs areas and to strengthen additional treatment interventions that address alcohol consumption. This is achieved by collaborating with local schools and teachers and providing individual counselling using evidence based interventions. The program also links students to relevant programs post group program delivery and engages with parent/s and teacher/s by being involved in the information sessions.</i>
Target population cohort	<i>The AWARE activity targets the adolescent cohort.</i>
In scope AOD Treatment Type	<i>The AWARE activity delivers the following treatment types:</i> <ul style="list-style-type: none"> <i>• Early intervention (including Brief Intervention)</i> <i>• Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration</i>
Indigenous specific	<i>No</i>
Coverage	<i>The AWARE activity covers the following Local Government Areas of the SEMPLHN region:</i> <ul style="list-style-type: none"> <i>• Cardinia</i> <i>• Bayside</i> <i>• Mornington Peninsula</i>
Consultation	<i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, Department of Health (DOH), and the Victorian Department of Health and Human Services (DHHS) representatives. Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPLHN delivered a collaborative forum in 2018 and ongoing partnerships have been</i>

	<i>established to ensure models of care and identified priorities are coordinated and informed by the sector.</i>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD specialist treatment services, LHNs, Area 4 Pharmacotherapy, VAADA and Local Government to promote a coordinated approach to delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting.</i></p> <p><i>SEMPHN will continue to work with Local Youth Services, Local Government, Specialist AOD Treatment Services, General Practice, LHNs, peak bodies such as VAADA, lived experience and Area 4 Pharmacotherapy to ensure a coordinated and responsive approach to the reduction in alcohol consumption.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD3 - AOD ADLOW Alcohol and Other Drug Liaison Outreach Workers (ADLOW)</i>
Existing, Modified, or New Activity	<i>Existing Activity Drug and Alcohol Activity Work Plan 2016-19: Activities 2.1 and 2.2.</i>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Priority Reference Section 4 5.1 on pages 37 to 38 (2018 Needs Assessment).</i>
Aim of Activity	<i>The ADLOW activity provides access to AOD treatment options and drug use by providing short to medium term bridging support and brief intervention, the development of treatment plans, links to community AOD services, target outreach to CALD and LGBTIQ communities and work closely with hospital emergency departments through a coordinated approach.</i>
Description of Activity	<p><i>The ADLOW activity provides:</i></p> <ul style="list-style-type: none"> <i>• Outreach for comorbid clients, youth, CALD and LGBTIQ communities</i> <i>• Short to medium term bridging support</i> <i>• Brief interventions prior to gaining access to mainstream/primary health services</i> <i>• Motivational interviewing treatment techniques</i> <i>• Assistance to mainstream/primary health services with the development of Individual Treatment Plans (ITPs)</i> <i>• Capacity building training modules to GPs, primary health care providers, hospitals and specific CALD agencies</i> <i>• An integrated approach by working closely with emergency departments to identify individuals with AOD concerns that can be assisted with AOD treatment via discharge plans and referrals</i>
Target population cohort	<i>The ADLOW activity targets the adolescent and adult cohorts.</i>
In scope AOD Treatment Type	<p><i>The ADLOW activity delivers the following treatment types:</i></p> <ul style="list-style-type: none"> <i>• Early intervention (including Brief Intervention)</i> <i>• Counselling</i> <i>• Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration</i>
Indigenous specific	<i>No</i>
Coverage	<p><i>The ADLOW activity is delivered from the following LGAs:</i></p> <ul style="list-style-type: none"> <i>• City of Port Phillip</i> <i>• City of Greater Dandenong</i>

Consultation	<p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH, and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD specialist treatment services, LHNs, Area 4 Pharmacotherapy, VAADA and Local Government to promote a coordinated approach in delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting.</i></p> <p><i>SEMPHN will continue to work with Local Youth Services, Local Government, Specialist AOD Treatment Services, General Practice, LHNs, peak bodies such as VAADA, lived experience and Area 4 Pharmacotherapy to ensure a coordinated and responsive approach to the reduction in alcohol consumption.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD4 - AOD FaYEIP Family and Youth Early Intervention Program (FaYEIP)</i>
Existing, Modified, or New Activity	<i>Existing Activity Drug and Alcohol Activity Work Plan 2016-19: Activity 3.</i>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Priority Reference Section 4 2.1 on pages 34 to 35 (2018 Needs Assessment).</i>
Aim of Activity	<i>The FaYEIP activity aims to increase service delivery capacity and improve the effectiveness of AOD treatment and diversionary programs with a focus on early intervention and ensure improved access for clients via a place based approach.</i>
Description of Activity	<p><i>The FaYEIP activity engages with young people involved in substance abuse and at risk behaviours and at risk of enduring addiction to a range of drugs. This program is designed to address these issues by developing a whole of system response for young people and their families and aims to break the potential cycle of ongoing substance abuse.</i></p> <p><i>The FaYEIP activity delivers a range of therapeutic interventions aimed at reducing risk and increasing resilience and protective factors via case management and coordination, and development of pathways that support young people to lead productive and meaningful lives. The activity also focuses on identifying and addressing barriers to education and employment by working closely with parents in the assessment and care planning process.</i></p> <p><i>Harm education will be provided to family members to increase the families' knowledge, develop greater confidence and resilience in addressing AOD issues within the family unit.</i></p>
Target population cohort	<i>The FaYEIP activity targets young people and families.</i>
In scope AOD Treatment Type	<p><i>The FaYEIP activity delivers the following treatment interventions:</i></p> <ul style="list-style-type: none"> <i>• Early intervention (including Brief Intervention)</i> <i>• Counselling</i>
Indigenous specific	<i>No</i>
Coverage	<i>The FaYEIP activity covers the entire SEMPHN catchment.</i>
Consultation	<p><i>Our initial consultation with AOD specialist services has identified a strong need to work with young people and their families to provide treatment options to intervene in substance abuse exhibited by this population group.</i></p> <p><i>Through the commissioned provider, SEMPHN will continue to engage with relevant Youth Specialist AOD Services, Victoria Police and Youth Justice Services.</i></p>

	<p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH, and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD Specialist Treatment Services, LHNs, Area 4 Pharmacotherapy, VAADA, lived experience and Local Government to promote a coordinated approach in delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting. SEMPHN will continue to work with these services to ensure a coordinated and responsive approach to delivering this service.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD5 - AOD Integrated Hepatitis C Program</i>
Existing, Modified, or New Activity	<i>Existing Activity</i> <i>Drug and Alcohol Activity Work Plan 2016-19: Activities 4.1 and 4.2.</i>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Priority Reference Section 4 3.1 on pages 35 to 36 (2018 Needs Assessment).</i>
Aim of Activity	<p><i>The Integrated Hepatitis C Program seeks to:</i></p> <ul style="list-style-type: none"> • <i>Strengthen capacity and integration for improved service response which includes integration between AOD services and treatment of Hepatitis C for improved support pathways</i> • <i>Improve capacity and access to evidence based interventions for treatment and management for Hepatitis C</i> • <i>Test clients for HCV Ab, HCV PCR and Fibroscan on site</i> • <i>Support GPs and nursing staff that provide Hepatitis C treatment in community settings</i> • <i>Building capacity for GPs to independently prescribe Hepatitis C treatment post mentoring program</i> • <i>Provide Hepatitis C training to GPs</i>
Description of Activity	<i>The Integrated Hepatitis C activity is delivered by working closely with General Practices, GPs and nursing staff to support them with independent diagnosis, assessment, treatment and monitoring of clients being screened and treated for Hepatitis C.</i>
Target population cohort	<p><i>The Integrated Hepatitis C activity targets:</i></p> <ul style="list-style-type: none"> • <i>People at risk of developing Hepatitis C</i> • <i>People diagnosed with Hepatitis C</i>
In scope AOD Treatment Type	<p><i>The Integrated Hepatitis C activity delivers the following treatment types:</i></p> <ul style="list-style-type: none"> • <i>Early intervention (including Brief Intervention)</i> • <i>Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration</i>
Indigenous specific	<i>No</i>
Coverage	<p><i>The AOD Integrated Hepatitis C Program is delivered from the following LGAs:</i></p> <ul style="list-style-type: none"> • <i>City of Port Phillip</i> • <i>City of Frankston</i> • <i>City of Greater Dandenong</i>

Consultation	<p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p>
Collaboration	<p><i>SEMPHN will continue to work with Homelessness Services, Local Area Mental Health Services, Ambulance Victoria, specialist alcohol and drug services, and Primary Health clinics, including General Practice.</i></p> <p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD specialist treatment services, LHNs, Area 4 Pharmacotherapy, VAADA and Local Government to promote a coordinated approach to delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	AOD6 - AOD ResetLife
Existing, Modified, or New Activity	Existing Activity Drug and Alcohol Activity Work Plan 2016-19: Activities 7.1 and 7.2.
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	ResetLife Adult Model, links to Priorities 5.1 and 5.2 on pages 37 to 39 and Priority 8.1 on page 41.
Aim of Activity	<p>The aim of the AOD ResetLife activity is to address the increase in demand of clients seeking AOD treatment in the LGAs of Port Phillip and Frankston by providing an evidence based outpatient rehabilitation treatment service for clients using methamphetamine, alcohol and other drugs. It will also support primary health professionals and specialists through education and training.</p> <p>The Intensive Outpatient AOD Rehabilitation Treatment Service provides a more intensive and integrative intervention than is currently available in Victoria for people experiencing problematic alcohol and other drug use who require comprehensive care management. The model emphasises targeting participant's cognitive, behavioural, emotional and relationship issues, which may be contributing factors to substance dependence.</p> <p>The program incorporates a holistic treatment approach which includes early recovery skills, relapse prevention, family education, harm minimisation, individual and family counselling, peer support, and post-rehabilitation continuing care support.</p>
Description of Activity	<p>ResetLife is based on the Matrix Model, which is an evidence based, highly structured, integrated and time-limited intensive outpatient rehabilitation treatment approach incorporating elements of early intervention, treatment, and post-treatment support.</p> <p>ResetLife consists of screening and assessment, harm minimisation through random mandatory drug testing, individual therapy sessions, conjoint family therapy sessions, and specific structured group counselling sessions including: early recovery skills; relapse prevention; family education; and continuing care social support.</p>
Target population cohort	The ResetLife activity targets adults aged 18 and older who have a mild to severe substance use disorder.
In scope AOD Treatment Type	<p>ResetLife delivers the following treatment types:</p> <ul style="list-style-type: none"> • Early Intervention • Counselling • Outpatient Rehabilitation • Aftercare/Relapse Prevention • Case Management, Care Planning, and Coordination • Information and Education

	<ul style="list-style-type: none"> • <i>Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration.</i>
Indigenous specific	No
Coverage	<p><i>ResetLife is delivered from the following LGAs:</i></p> <ul style="list-style-type: none"> • <i>Frankston</i> • <i>Port Phillip</i>
Consultation	<p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p> <p><i>Consumer and carer information sessions have also been delivered as the program has been implemented in the identified areas to raise awareness.</i></p>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD Specialist Treatment Services, LHNs, Area 4 Pharmacotherapy, VAADA, Local Government, and lived experience to promote a coordinated approach in delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting.</i></p> <p><i>SEMPHN will continue to work with these services, including consumers and families as the program rolls out. Communities of Practice will be established to create a structure that allows ResetLife provider organisations to collaborate and promote best practice while developing common capabilities in the establishment, implementation, and delivery of the ResetLife treatment program across the SEMPHN catchment.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD7 - AOD ResetLife Youth</i>
Existing, Modified, or New Activity	<i>Modified Activity</i> <i>Drug and Alcohol Activity Work Plan 2016-19: Activities 7.1 and 7.2</i>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>ResetLife Youth Model, links to Priorities 2.0 and 2.1 on pages 33 to 35, Priorities 5.1 and 5.2 on pages 37 to 39, and Priority 8.1 on page 41.</i>
Aim of Activity	<p><i>The aim of the AOD ResetLife Youth Program is to address the demand of young clients seeking non-residential AOD treatment across the SEMPHN catchment by providing an evidence based outpatient rehabilitation treatment service for clients using methamphetamine, alcohol and other drugs. The program structure is flexible allowing it to be adapted to young people who require early intervention, are experimenting with alcohol or other drugs, or who have developed a mild, moderate, or severe substance use disorder.</i></p> <p><i>It will also support primary health professionals and specialists through education and training.</i></p> <p><i>The Intensive Outpatient AOD Rehabilitation Youth Treatment Service provides a more intensive and integrative intervention than is currently available in Victoria for people experiencing problematic alcohol and other drug use who require comprehensive care management. The model emphasises targeting participant's cognitive, behavioural, emotional, social and relationship issues, which may be contributing factors to substance dependence.</i></p> <p><i>ResetLife for Youth incorporates a holistic treatment approach which includes early recovery skills, relapse prevention, family/parent education, harm minimisation, individual and family counselling, peer support, and post-rehabilitation continuing care support.</i></p>
Description of Activity	<p><i>ResetLife for Youth is based on the Matrix Model For Teens and Young Adults, which is an evidence based, highly structured, integrated and time-limited intensive outpatient rehabilitation treatment approach incorporating elements of early intervention, treatment, and post-treatment support.</i></p> <p><i>ResetLife for Youth consists of screening and assessment, harm minimisation through random mandatory drug testing, individual therapy sessions, conjoint family therapy sessions, and specific structured group counselling sessions including: early recovery skills; relapse prevention; family/parent substance use education; youth substance use education, and continuing care social support.</i></p>
Target population cohort	<i>ResetLife for Youth program targets young people aged 11-22 who are experimenting with alcohol and other drugs as well as those who have a mild to severe substance use disorder.</i>
In scope AOD Treatment Type	<i>ResetLife for Youth program delivers the following treatment types:</i>

	<ul style="list-style-type: none"> • <i>Early Intervention</i> • <i>Counselling</i> • <i>Outpatient Rehabilitation</i> • <i>Aftercare/Relapse Prevention</i> • <i>Case Management, Care Planning, and Coordination</i> • <i>Information and Education</i> • <i>Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint up assessment and referral pathways, quality improvement, evidence based treatment, and service integration.</i>
Indigenous specific	No
Coverage	<i>The service location for the ResetLife for Youth activity is to be determined; however, services will be open to clients across the SEMPHN catchment.</i>
Consultation	<p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p> <p><i>Consumer and carer information sessions have also been delivered as the program has been implemented in the identified areas to raise awareness.</i></p>
Collaboration	<p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD specialist treatment services, LHNs, Area 4 Pharmacotherapy, VAADA, Local Government and lived experience to promote a coordinated approach to delivering services, the identification of gaps and duplication of services, while working on highlighted issues such as workforce and reporting.</i></p> <p><i>SEMPHN will continue to work with these services as the program rolls out. Communities of Practice will be established to create a structure that allows ResetLife provider organisations to collaborate and promote best practice while developing common capabilities in the establishment, implementation, and delivery of the ResetLife treatment program across the SEMPHN catchment.</i></p>

Proposed Activities - copy and complete the table as many times as necessary to report on each activity

ACTIVITY TITLE	<i>AOD8 - AOD Services for Aboriginal and Torres Strait Islander people</i>
Existing, Modified, or New Activity	<p><i>Existing Activity</i></p> <p><i>Drug and Alcohol Activity Work Plan 2016-19: Planned Activities: Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander People – Flexible Funding</i></p>
PHN Program Key Priority Area	<i>Alcohol and Other Drugs</i>
Needs Assessment Priority	<i>Priority Reference Section 4 3.2 on pages 36 to 37 (2018 Needs Assessment).</i>
Aim of Activity	<p><i>The AOD Services for the Aboriginal and Torres Strait Islander People Activity aims to:</i></p> <ul style="list-style-type: none"> <i>• Address the increased demand for access to drug and alcohol treatment through needs based targeted planning in response to the changing needs of the community</i> <i>• Deliver culturally appropriate drug and alcohol treatment services for Aboriginal and Torres Strait Islander people and linked to broader Indigenous Health Services</i> <i>• Increase the capacity to respond to the needs</i> <i>• Improve outcomes for Aboriginal and Torres Strait Islander people with drug and alcohol issues</i> <p><i>This will be achieved by client engagement and commitment to residential rehabilitation treatment and building capacity to appropriately identify and treat coinciding mental illness and substance misuse through various methods.</i></p>
Description of Activity	<p><i>The AOD Services for Aboriginal and Torres Strait Islander People Activity delivers the following:</i></p> <ul style="list-style-type: none"> <i>• Counselling for adult people referred to residential rehabilitation centres</i> <i>• Brief intervention for adult people referred to residential rehabilitation centres</i> <i>• Coordination and case management</i> <i>• Liaison with AOD mental health mainstream services</i> <i>• Cultural capacity building training and professional development</i> <i>• Community development activities to the Aboriginal and Torres Strait Islander community</i>
Target population cohort	<i>The AOD Services for Aboriginal and Torres Strait Islander People Activity targets the Aboriginal and Torres Strait Islander Population.</i>
In scope AOD Treatment Type	<p><i>The AOD Services for Aboriginal and Torres Strait Islander People Activity delivers the following treatment types:</i></p> <ul style="list-style-type: none"> <i>• Early Intervention (including Brief Intervention)</i> <i>• Counselling</i>

	<ul style="list-style-type: none"> • <i>Case Management, Care Planning, and Coordination</i> • <i>Information and Education</i> • <i>Workforce Development and Capacity Building, including supporting the workforce through activities which promote joint assessment and referral pathways, quality improvement, evidence based treatment, and service integration.</i>
Indigenous specific	<p>Yes</p> <p><i>This activity will engage with the Aboriginal and Torres Strait Islander population group by:</i></p> <ul style="list-style-type: none"> • <i>Providing access to culturally appropriate AOD and mental health services with a focus to empower Aboriginal and Torres Strait Islander people to feel supported to take control of their alcohol and drug use and mental health</i> • <i>Linking with broader Indigenous health services that assist with this cohort to recognise the impacts and interactions between life events, biological risks and social determinants of health</i> • <i>Increasing service capacity to respond to these needs and improve health outcomes.</i>
Coverage	<p><i>The AOD Services for Aboriginal and Torres Strait Islander People Activity covers the following LGAs:</i></p> <ul style="list-style-type: none"> • <i>Greater Dandenong</i> • <i>Port Phillip</i> • <i>Stonnington</i>
Consultation	<p><i>Our review of agency specific data and consultations with an Aboriginal Community Controlled Health Organisation has identified the need for increased capacity to respond to AOD issues.</i></p> <p><i>Stakeholders have been consulted via forums that included key AOD treatment service providers, LHNs, DOH and DHHS representatives.</i></p> <p><i>Ongoing regular meetings have been established with AOD treatment services and DHHS. A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018 and ongoing partnerships have been established to ensure models of care and identified priorities are coordinated and informed by the sector.</i></p>
Collaboration	<p><i>The AOD Services for Aboriginal and Torres Strait Islander people was designed with the commissioned provider to ensure the service was tailored to meet local needs. The commissioned provider, an Aboriginal Community Controlled Health Organisation has strong links with other Aboriginal Community Controlled Health Organisations and other providers that supports the establishment of strong links within the community across the SEMPHN catchment. Ongoing regular meetings are scheduled to support the commissioned provider to meet emerging needs, workforce issues and concerns and ensure success of the activity.</i></p> <p><i>A coordinated approach between DHHS, DOH and SEMPHN delivered a collaborative forum in 2018. This included AOD Specialist Treatment Services, LHNs, Area 4 Pharmacotherapy, VAADA, Local Government and lived experience to promote a coordinated approach to delivering services, the</i></p>

	<i>identification of gaps and duplication of services while working on highlighted issues such as workforce and reporting.</i>
--	--