



Australian Government
Department of Health



An Australian Government Initiative

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

South Eastern Melbourne PHN

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.

Revised January 2018

Overview

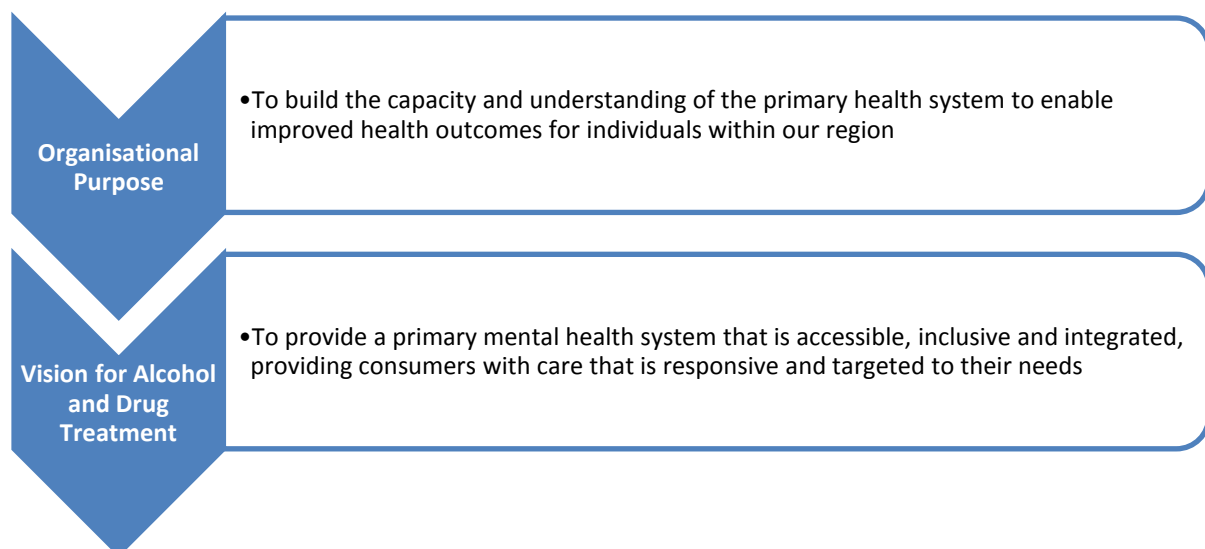
This Drug and Alcohol Treatment Activity Work Plan covers the period from 1 July 2016 to 30 June 2019 and is an update to the Activity Work Plan submitted to the Department in May 2016.

The duration of activities and terminology have been updated for the purposes of consistency throughout all Activity Work Plans.

As instructed, completed and discontinued activities are represented at the end of this document.

1. Strategic Vision for Drug and Alcohol Treatment Funding

Strategic Vision



The South Eastern Melbourne PHN (SEMPHN) will provide leadership across the catchment to identify and address system integration and capacity issues to ensure a well-coordinated and functional drug and alcohol service system capable of responding to the needs of the community.

Our work will include further consultation and co-design with clients and service providers to improve access and further develop existing alcohol and other drug (AOD) services. SEMPHN will build on our existing partnerships with key stakeholders, including state and local government, Local Hospital Networks, Aboriginal controlled health services, peak agencies, specialist AOD services and the community sector, to maximise opportunities for alignment, integration and coordination.

SEMPHN will have a focus on early intervention that seeks to prevent the need for long term treatment. We will commission a mix of service intervention modalities in primary care and specialist AOD services to ensure improved access for clients and where appropriate take a place based approach consistent with findings in our needs assessment.

SEMPHN recognises that alcohol and drug issues have the potential to impact on many facets of a client and their family's life and as such we will promote the connection and integration with a range of other services to maximise the effectiveness of treatment interventions.

This plan has been informed by an array of consultation and information gathering with a broad range of organisations as follows:

- Individual AOD providers through our existing networks and regional coordination platforms
- SEMPHN has commenced a detailed service mapping and gap analysis which involves engagement with local AOD providers
- A South Eastern Melbourne PHN Consultation forum attended by 60 representatives from AOD specialist services, Local Hospital Networks, Victorian State Government, peak bodies and primary health providers (April 2016)
- Aboriginal Community Controlled Health Organisation (Dandenong & District Aboriginal Cooperative Ltd)
- Turning Point (February and May 2016)
- VAADA (February and May 2016)

We will continue to engage with the service sector to monitor and review the effectiveness of the strategies and activities implemented over the life of this work plan. Our intent is to use existing AOD and Primary Care networks to guide and monitor service planning and delivery of AOD services across the South Eastern Melbourne PHN. The current networks are comprised of LHNs, State Government and AOD providers .

Governance of AOD activities will be managed through existing governance arrangements, including as appropriate the SEMPHN board, clinical and community councils and the SEMPHN executive group, each of which have a strong background in AOD.

Our implementation of this vision and strategy will take the following path:

July – December 2016

- Develop a further understanding and confirm the findings of the initial Needs Assessment
- Detailed service mapping and gap analysis
- Further engagement with key stakeholders within the specialist drug and alcohol sector
- Establish data management system and reporting processes
- Prepare for commissioning selected services and activities
- Scope work related to specific new initiatives
- Plan and map General Practice professional capacity building

October 2016– January 2017

- Commence commissioning process for services
- Contractual arrangements established and in place
- General Practice professional capacity building

January 2017 – June 2019

- Full commissioning of services (staged)
- Contract management and review processes in place
- Data management and reporting activated

SEMPHN Commissioning Method

Commissioning refers to the strategic procurement, monitoring and evaluation of health and related services. SEMPHN's commissioning decisions are informed by:

- Population health analysis
- Evidence review
- Service mapping.

SEMPHN's commissioning activities are consistent with the Australian Government Department of Health commissioning guidelines in so far as they have:

- A strategic approach to purchasing that seeks to ensure that services meet the health needs of the population and contribute towards service and system improvement and innovation.

SEMPHN's commissioning approach is further underpinned by our key principles which are:

- Value for money
- Ethical behaviour and probity
- Competition
- Efficiency and effectiveness
- Equity and sustainability
- Stakeholder consultation.

Commissioning is a continuous process that requires SEMPHN to be responsible for:

- Strategic planning – assessing the needs of the community and available health services, and determining priorities based on service analysis and professional and community input.
- Service procurement – purchasing health services in line with outcomes of strategic planning, the PHN objectives and the identified local and national priorities for the PHN.
- Monitoring and review – assessing the efficiency and effectiveness (including value for money) of health services and implementing strategies to address gaps and underperformance.

SEMPHN uses Tenderlink to advertise tenders to the market and to manage the procurement process through to contract award stage. The approach to market may be via an expression of interest, competitive tender or closed/select tender process.

SEMPHN manages its procurement of goods and services to obtain the best 'value for money' and maximise operational benefits, whilst maintaining the highest standards of probity and corporate responsibility, accountability, transparency and confidentiality.

SEMPHN service development officers will work with all commissioned agencies to prepare a contractor work plan. All contracted services will be monitored via progress reports, data collection and client feedback surveys. Evaluation plans will further inform future commissioning activities and contribute to continuous improvement and capacity building of health services in SEMPHN catchment.

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

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	Activity 1 - Adolescent use of alcohol.
Existing, Modified, or New Activity	Modified
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Priority Reference 1.1 (page 30, 2017 needs assessment); adolescent use of alcohol within the LGA's Greater Dandenong, Cardinia, Frankston and Kingston
Description of Drug and Alcohol Treatment Activity	Aim <ol style="list-style-type: none"> 1. Target strategies to address adolescent alcohol consumption in the high need areas. 2. Commission key services to provide additional treatment interventions to address alcohol consumption
Target population cohort	Adolescents
Consultation	A forum with key AOD treatment service providers, LHNs and Victorian DHHS representatives was delivered in 2016. Consultation with key stakeholders will be coordinated to ensure models of care address the primary activity. SEMPHN will work with local youth services, LGAs, specialist AOD services, Area 4 Pharmacotherapy and Victoria Police to provide a coordinated approach to the reduction in alcohol consumption.
Collaboration	SEMPHN will work with local youth services, Local Government Authorities (LGAs), specialist AOD services, general practice, local hospital networks, Area 4 Pharmacotherapy and Victoria Police to provide a coordinated approach to the reduction in alcohol consumption.

	Our initial approach would be to engage with the above stakeholders to scope the work and identify the roles of the various stakeholders in the coordination of treatment services for adolescents.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? NO
Duration	2017 – 2019
Coverage	Outline geographic coverage of the activity. I.e. entire PHN region, activity that crosses PHN regions, or area within the PHN region. (Provide the statistical area as defined in the Australian Bureau of Statistics (ABS). LGAs of: <ul style="list-style-type: none"> • Greater Dandenong • Cardinia • Frankston • Kingston
Commissioning method	Refer to SEMPLHN Commissioning Method on page 2
Approach to market	Open tender
Decommissioning (if applicable)	N/A
Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	Activity 2.1 Improved service access to AOD treatment options Activity 2.2 Drug use in the Cities of Port Phillip, Frankston and Greater Dandenong.
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Priority reference 4.1 (pages 31-32, 2017 needs assessment)

Description of Drug and Alcohol Treatment Activity	<p>SEMPHN will engage with specific stakeholders in the Cities of Port Phillip, Frankston and Greater Dandenong as well as specialist AOD services, General Practice, LHNs and LGAs to increase service capacity activities and improve access to AOD services to address specific drug use. We aim to also include:</p> <ul style="list-style-type: none"> • innovative models and pathways between specialist AOD services and Primary Care to provide integrated service responses. • Commissioning of services in primary care and specialist AOD services based on local need, including but not limited to; counselling and case management services, CBT based therapies, non-residential rehab services, and harm minimisation and reduction services • integration and engagement between mental health and specialist AOD services to address high dual diagnosis rates
Target population cohort	Adolescent and adult
Consultation	A forum with key AOD treatment service providers, LHNs and Victorian DHHS representatives was delivered in 2016. Consultation with key stakeholders will be coordinated to ensure models of care address the primary activity.
Collaboration	Further consultation with AOD key stakeholders will determine whether this activity will be jointly implemented with other stakeholders.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? NO
Duration	2017 – 2019
Coverage	<ul style="list-style-type: none"> • City of Port Phillip • City of Frankston • City of Greater Dandenong
Commissioning method	Refer to SEMPHN Commissioning Method on page 2

Approach to market	Open tender
Decommissioning (if applicable)	N/A

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	Activity 3 - Early intervention and diversion of young people from ongoing substance abuse
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Priority Reference 2.1 (page 30, 2017 needs assessment)
Description of Drug and Alcohol Treatment Activity	Young people engaging in substance abuse and at risk behaviours, are at risk of enduring addiction to a range of drugs. This activity is designed to address this issue by developing a whole of system response for young people and their families to break the potential cycle of ongoing substance abuse. Our initial consultation with

	<p>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.</p> <p>This activity will include a range of treatment modalities, case management and coordination and development of pathways, to support young people to lead productive and meaningful lives.</p> <p>Aim</p> <ol style="list-style-type: none"> 1. Provide early intervention and treatment options for young people engaged in substance abuse and at risk behaviours 2. Foster social inclusion of young people through development of pathways into social support, education and employment 3. Build the capacity of families as part of the care and support response to young people
Target population cohort	<p>Target Population cohorts</p> <p>Young people and families in the SEMPHN catchment</p>
Consultation	SEMPHN will continue to engage with relevant youth specialist AOD services, Victoria Police and Youth Justice Services to develop this model.
Collaboration	Further work with stakeholders will identify whether this activity will be jointly implemented with other stakeholders.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? NO
Duration	2017 –2019
Coverage	Entire SEMPHN catchment
Commissioning method	Refer to SEMPHN Commissioning Method on page 2
Approach to market	Closed/select tender

Decommissioning (if applicable)	N/A
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Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	Activity 4.1 Improving the system response for at risk populations involved in illicit drug use Activity 4.2 Addressing Hepatitis C rates.
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Priority Reference 3.1 (pages 30 & 31, 2017 needs assessment)
Description of Drug and Alcohol Treatment Activity	<p>There are high levels of people who are homeless, high rates of ambulance attendances for illicit drug use including crystal meth and high rates of suicide and deaths from self-inflicted harm in the Cities of Port Phillip, Frankston and Greater Dandenong.</p> <p>The current system response is fragmented and results in sub-optimal service responses, including use of emergency departments. Additionally, there are high rates of hepatitis C in the Cities of Greater Dandenong, Frankston and Port Phillip. This activity seeks to reduce the harm related to illicit drug use in at risk populations and develop an improved system response for those at risk of poor health outcomes. The activity will:</p> <p>Aim</p> <ol style="list-style-type: none"> 1. Investigate system responses 2. Engage and work with existing funders to increase capacity where required and integration of improved system response. 3. Investigate and commission co-located specialist drug and alcohol services based on local need, including but not limited to; counselling and case management services, CBT based therapies, non-residential rehab services, and harm minimisation and reduction services 4. Improve integration between alcohol and drug services and treatment of Hepatitis C to support better pathways

	<p>5. Work with existing specialist alcohol and drug providers in identified locations to improve capacity and access to evidence based interventions for treatment and management of Hepatitis C</p> <p>This activity seeks to develop an understanding of the service system responses for these population cohorts and how their needs can be better addressed to reduce the harms associated with illicit drug use and connect them with appropriate health/community services.</p> <p>Alignment with PHN Objectives</p> <p>This activity seeks to reduce the harm related to illicit drug use in at risk populations and develop an improved system response for those at risk of poor health outcomes.</p>
Target population cohort	<p>Target Population cohorts</p> <ol style="list-style-type: none"> 1. People who are homeless or at risk of homelessness who are involved in illicit drug use 2. People at risk of developing Hepatitis C 3. People diagnosed with Hepatitis C
Consultation	Forum with key AOD treatment and delivery services, LHNs and Victorian DHHS representatives was delivered in 2016. Consultation with key stakeholders will be coordinated to ensure relevant strategies are identified to address activity outcomes.
Collaboration	SEMPHN will work with Homelessness services, Local Area Mental Health Services, Ambulance Victoria, specialist alcohol and drug services, Primary Health clinics, including General Practice.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? NO
Duration	2017 – 2019
Coverage	<ul style="list-style-type: none"> • City of Port Phillip • City of Greater Dandenong • City of Frankston
Commissioning method	Refer to SEMPHN Commissioning Method on page 2

Approach to market	Open tender
Decommissioning (if applicable)	N/A

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	Activity 5 Enhance workforce capacity and General Practitioner capability to respond to consumers with AOD issues
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Priority Reference 8 (page 34, 2017 needs assessment); Enhance Workforce Capacity
Description of Drug and Alcohol Treatment Activity	<p>The SEMPHN catchment has an ageing General Practice workforce and in particular GPs who have specialised in addiction medicine and pharmacotherapy. SEMPHN has strong linkages with key providers in the AOD and specialist primary care sector. Our initial work with General Practice indicates a strong desire by GPs to increase their capability in responding to AOD issues which present in their practices.</p> <p>Aim</p> <ol style="list-style-type: none"> 1. Ascertain the shortfall in the general practice workforce to manage patients with alcohol and drug issues. 2. Undertake a training needs assessment of GP workforce and develop a strategy to address workforce capability. 3. Implement and deliver the outcomes of the strategy developed under point 2 above.
Target population cohort	<p>Target Population cohorts</p> <p>General Practitioners</p>

Consultation	SEMPHN is the lead agency for the Victorian Government funded Area 4 Pharmacotherapy Network and we will work with the various partners to enhance workforce capacity and capability across the catchment through leveraging this work and ensuring connections with primary care and specialist AOD services.
Collaboration	SEMPHN is the lead agency for the Victorian Government funded Area 4 Pharmacotherapy Network and we will work with the various partners to enhance workforce capacity and capability across the catchment through leveraging this work and ensuring connections with primary care and specialist AOD services. We will also work with Turning Point Alcohol and Drug Service, who is a leading agency in this field.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? NO
Duration	2017 – 2019
Coverage	Entire SEMPHN catchment
Commissioning method	Refer to SEMPHN Commissioning Method on page 2
Approach to market	Select tender or EOI
Decommissioning (if applicable)	N/A

Proposed Activities	
Activity Title (e.g. Activity 1, 2, 3 etc.)	<p>Activity 7.1 Increase service delivery and access to counselling in an outpatient setting</p> <p>Activity 7.2 Promote quality improvement and support primary health professionals and specialists through education and training.</p>
Existing, Modified, or New Activity	New Activity

Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	<p>Priority area 5.1 (pages 32-33, 2017 needs assessment) Assess impact of the increased availability and use of Crystal Methamphetamine within the catchment and the local capacity to respond.</p> <p>Work with key services to support population specific service capacity activities to address specific drug use issues related to the use of Crystal Methamphetamine:</p> <ul style="list-style-type: none"> Commission services in primary care and specialist AOD services based on local need, including but not limited to; counselling and case management services, CBT based therapies, non-residential rehab services, and harm minimisation and reduction services.
Description of Drug and Alcohol Treatment Activity	<p>The Matrix model is an evidence-based, highly structured, integrated and time-limited intensive outpatient treatment approach consisting of individual therapy sessions and specific structured group sessions including early recovery skills groups, relapse prevention groups, family education groups, and continuing care social support groups as well as mandatory urine/breath testing.</p> <p>The Matrix program is an intensive outpatient addiction recovery program developed from over 30 years of research during the cocaine and methamphetamine epidemics in the United States. It is currently the gold standard therapeutic approach for methamphetamine dependence. It combines practical skills training for both escaping addiction and building a life without methamphetamine with frequent structured, focused social support and recognition of success.</p> <p>The aim is to:</p> <ul style="list-style-type: none"> Address the increase in demand of clients seeking treatment in the Frankston, Port Philip and Dandenong LGAs by providing evidence-based treatment services for clients using methamphetamine, alcohol and other drugs. Support primary health professionals and specialists through education and training
Target population cohort	Adult
Consultation	A forum with key AOD treatment service providers, LHNs and Victorian DHHS representatives was delivered in 2016. Consultation with key stakeholders will continue with a joint forum and workshop with DHHS in February 2018.

Collaboration	SEMPHN will continue to work with specialist alcohol and drug services, DHHS, General Practice and Primary Health Clinics
Indigenous Specific	No
Duration	2017 – 2019
Coverage	Port Phillip, Frankston, Greater Dandenong
Commissioning method	Refer to SEMPHN Commissioning Method on page 2
Approach to market	Open EOI followed by select tender.
Decommissioning (if applicable)	N/A

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.)	Improve access to AOD Services for Aboriginal & Torres Strait Islander people
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	<ul style="list-style-type: none"> Improved service access to AOD treatment options for the Cities of Port Phillip, Frankston and Greater Dandenong. Appropriateness of services in responding to the needs of culturally and gender diverse groups within the catchment. Includes CALD issues, LGBTI, Aboriginal and Torres Strait Islander community, and greater focus on gender issues with a view to barriers to access for women with substance misuse issue.
Description of Drug and Alcohol Treatment Activity	<p>The Aboriginal & Torres Strait Islander community is overrepresented within the broader SEMPHN catchment in relation to drug and alcohol issues. Further, over 90% of individuals from this community have a dual mental health and alcohol and other drug diagnoses. Our review of agency specific data and consultation with Aboriginal Community Controlled Health Organisation (Dandenong & District Aboriginal Cooperative Ltd) has identified the need for increased capacity to respond to AOD issues.</p> <p>Aim</p> <ol style="list-style-type: none"> 1. This activity seeks to increase service capacity to respond to this need. 2. Improve access to AOD services. 3. Improve outcomes for Aboriginal and Torres Strait Islander people with drug and alcohol issues. <p>This will be achieved by implementing a treatment modality such as brief interventions or a coordinated referral and assessment system for improved access to the AOD services in the SEMPHN catchment.</p>

Target population cohort	Aboriginal and Torres Strait Islander Population
Consultation	Our review of agency specific data and consultations with Aboriginal Community Controlled Health Organisation (Dandenong & District Aboriginal Cooperative Ltd) has identified the need for increased capacity to respond to AOD issues.
Collaboration	ACCHO – Dandenong & District Aboriginal Cooperative Ltd Identified community health organisations, LHNs
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? YES
Duration	2017 – 2019
Coverage	Entire SEMPLHN catchment
Commissioning method	Refer to SEMPLHN Commissioning Method on page 2
Approach to market	Closed/select tender
Decommissioning (if applicable)	N/A

Proposed Activities

Activity Title (e.g. Activity 1, 2, 3 etc.)	Coordination & Case Management for Aboriginal and Torres Strait Islander people
Existing, Modified, or New Activity	Existing
Needs Assessment Priority Area (e.g. Priority 1, 2, 3, etc.)	Co-design & Patient focus

	In alignment with the Victorian alcohol and drug treatment principles clients of alcohol and drug treatment services to take an active role in quality improvement and service design.
Description of Drug and Alcohol Treatment Activity	<p>Aboriginal & Torres Strait Islander people are overrepresented in SEMPLHN catchment data for drug and alcohol issues. Over 90% of whom have dual mental health and alcohol and other drug diagnoses. Our review of agency specific data and consultation with Aboriginal Community Controlled Health Organisation (Dandenong & District Aboriginal Cooperative Ltd) has identified the need for coordination and case management to respond to AOD and Mental Health issues.</p> <p>This activity will drive improved coordination and integration of service responses. SEMPLHN recognises the need to connect service streams so that people receive coordinated and response care.</p> <p>Aim</p> <ol style="list-style-type: none"> 1. Improved coordination of services for Aboriginal and Torres Strait Islander people experiencing AOD issues. 2. Integrated response to health and social issues
Target population cohort	Aboriginal and Torres Strait Islander Population
Consultation	Review of agency specific data and consultations with Aboriginal Community Controlled Health Organisation (Dandenong & District Aboriginal Cooperative Ltd).
Collaboration	SEMPHN will lead this activity in collaboration with relevant Aboriginal health services in the SEMPLHN region.
Indigenous Specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? YES
Duration	2017 – 2019
Coverage	Entire SEMPLHN catchment

Commissioning method	Refer to SEMP HN Commissioning Method on page 2
Approach to market	Closed/select tender
Decommissioning (if applicable)	N/A

2. (c) Activities which will no longer be delivered under the Schedule – Drug and Alcohol Treatment Activities

Please use the table below to outline any activities included in the May 2016 version of your Drug and Alcohol Treatment Activity Work Plan which are not continuing from 2017-18.

Planned activities which will no longer be delivered	
Activity Title / Reference	Reduction in smoking across the general population and population sub-groups
Description of Activity	Smoking rates in parts of the SEMPHN catchment are higher than for the Victorian average including in particular cohorts such as adolescents, Aboriginal and Torres Strait Islander communities and women who are pregnant. This activity aimed to take a whole of population approach as well as targeted population cohorts.
Reason for removing activity	Not endorsed – resources/funding redirected to treatment services following feedback from the Department of Health
Funding impact	Funds were redirected to treatment services – nil impact

Planned activities which will no longer be delivered	
Activity Title / Reference	Activity 6.1 Appropriateness of services for the diversity within the catchment Activity 6.2 Inclusion of quality improvement measures in contractual agreements to focus on response to diversity
Description of Activity	<p>The SEMPHN catchment encompasses a broad range of culturally and gender diverse groups. This activity sought to gain a deeper understanding of the needs and appropriateness of current AOD service responses. SEMPHN will undertake a specific needs analysis to determine:</p> <ul style="list-style-type: none"> • The appropriateness of services in responding to the needs of the diverse population cohorts across the SEMPHN catchment

	<ul style="list-style-type: none"> • What barriers might exist which impact on access to services for the identified population cohorts? • Identify areas for improvement in responding to these needs and ensuring services are culturally appropriate.
Reason for removing activity	Activity has been completed – no further work required
Funding impact	Nil impact

Planned activities which will no longer be delivered	
Activity Title / Reference	Smoking cessation for Aboriginal and Torres Strait Islander people
Description of Activity	Smoking rates in parts of the SEMPHN catchment are higher than for the Victorian average including in particular cohorts such as adolescents, Aboriginal and Torres Strait Islander communities and women who are pregnant. Target strategies to reduce smoking rates in Aboriginal and Torres Strait Islander communities.
Reason for removing activity	Not endorsed – resources/funding redirected to treatment services following feedback from the Department of Health
Funding impact	Funds were redirected to treatment services – nil impact