



Australian Government

Department of Health

phn
CENTRAL AND
EASTERN SYDNEY

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)

Central and Eastern Sydney PHN

When submitted this Activity Work Plan 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	
ACTIVITY TITLE	AOD 1 – Increase service capacity of drug and alcohol treatment services
Existing, Modified, or New Activity	Existing Activity AOD 2. Increased service capacity for drug and alcohol treatment services (AWP 2018-19 Drug and Alcohol Treatment Services – Operational and Flexible Funding)
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Priority Number: 20 Priority Title: Integrated service delivery Needs Assessment page reference: p. 90 Identified as possible option: Yes
Aim of Activity	Increase the capacity of local AOD treatment services by continuing to commission treatment services in line with service models such as rehabilitation, psychosocial counselling, withdrawal management, and follow-up care.
Description of Activity	Actively integrate services that have been newly transitioned from the Non-Government Organisation Treatment Grants Program/ Substance Misuse Service Delivery Grants Fund to the CESPHN administered Drug and Alcohol Program. The expected outcomes are: <ul style="list-style-type: none"> • Improved service capacity across the PHN region • Seamless pathways of care created for community • Accessible support to the right services at the right place and the right time • Empowerment of people experiencing substance use issues to remain engaged with support during waiting times.
Target population cohort	People seeking AOD treatment services who reside within the CESPHN region
In scope AOD Treatment Type	<ul style="list-style-type: none"> • Counselling • Withdrawal management • Aftercare / relapse prevention • Case management, care planning, and coordination
Indigenous specific	No However, CESPHN will continue to ensure cultural appropriateness for indigenous populations in accessing mainstream commissioned services and services of the newly transitioned Drug and Alcohol Program.

Coverage	People who experience substance use issues across the CESPHN region
Consultation	CESPHN region Drug and Alcohol Advisory Committee, relevant peaks, and ongoing consultation and contract management of the commissioned services and newly transitioned organisations from the Drug and Alcohol Program.
Collaboration	Collaboration with commissioned services, ongoing contract management of newly transitioned organisations from the Drug and Alcohol Program, relevant peaks and specialist training providers.
Activity milestone details/ Duration	Provide the anticipated activity start and completion dates (including the planning and procurement cycle): Activity start date: 1/07/2019 Activity end date: 30/06/2022 Any other relevant milestones? CESPHN will meet quarterly with service providers to review progress including qualitative and quantitative data.
Commissioning method and approach to market	1. Please identify your intended procurement approach for commissioning services under this activity: <input type="checkbox"/> Not yet known <input checked="" type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) 2a. Is this activity being co-designed? No 2b. Is this activity this result of a previous co-design process? No 3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No 3b. Has this activity previously been co-commissioned or joint-commissioned? No
Decommissioning	No
Data collection	Yes

Proposed Activities	
ACTIVITY TITLE	AOD 2 – Increase service capacity for drug and alcohol services designed for Aboriginal and Torres Strait Islander peoples
Existing, Modified, or New Activity	Existing Activity AOD 2.1 Increased service capacity for drug and alcohol services designed for Aboriginal and Torres Strait Islander peoples (AWP 2018-19 Drug and Alcohol Treatment Service for Aboriginal and Torres Strait Islander people)
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Priority Number: 20 Priority Title: Integrated service delivery Needs Assessment page reference: p. 90 Identified as possible option: Yes
Aim of Activity	Increase the capacity of AOD treatment services for Aboriginal and Torres Strait Islander peoples by ensuring appropriate standards of cultural competence within commissioned services.
Description of Activity	Continue to commission AOD treatment services in line with in-scope service models designed for and targeted to Aboriginal and Torres Strait Islander participants.
Target population cohort	Aboriginal and Torres Strait Islander peoples who experience substance use issues across the CESPHN region.
In scope AOD Treatment Type	<ul style="list-style-type: none"> • Counselling • Withdrawal Management • Aftercare / relapse Prevention • Case management, care planning, and coordination
Indigenous specific	Yes Commissioned providers are required to recruit identified Aboriginal and Torres Strait Islander positions for frontline delivery of service. The positions also include a component of community engagement responsibility which includes building and maintaining links with local Aboriginal Community Controlled Health Organisations, community groups, Elders and the local Aboriginal and Torres Strait Islander community.
Coverage	CESPHN region.
Consultation	NSW AOD peak, local Aboriginal Community Controlled Health Organisations and other drug and alcohol treatment providers, LHDs, LHNs, transitioned organisations from the Drug and Alcohol Program.
Collaboration	Drug and alcohol treatment providers, LHDs, LHNs, transitioned organisations from the Drug and Alcohol Program contribute in developing referral pathways into the program. Funded Identified workforce liaise with local Aboriginal and Torres Strait Islander Elders and community around service provision approach.
Activity milestone details/ Duration	Provide the anticipated activity start and completion dates (including the planning and procurement cycle): Activity start date: 1/07/2019 Activity end date: 30/06/2022 Any other relevant milestones? CESPHN will meet quarterly with service providers to review progress including qualitative and quantitative data.
Commissioning method and	1. Please identify your intended procurement approach for commissioning services under this activity:

<p>approach to market</p>	<p> <input type="checkbox"/> Not yet known <input checked="" type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement. <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) </p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>No</p>
<p>Data collection</p>	<p>Yes</p>

Proposed Activities	
ACTIVITY TITLE	AOD 3 – Improve services for high needs populations
Existing, Modified, or New Activity	Modified Activity AOD 3. Improve services for high needs populations (AWP 2018-19 Drug and Alcohol Treatment Services – Operational and Flexible Funding)
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Priority Number: 19 Priority Title: Person centred, quality service delivery Needs Assessment page reference: p. 90 Identified as possible option: Yes
Aim of Activity	To ensure the provision of high quality and evidenced based AOD treatment to CESPHN priority populations through workforce development initiatives.
Description of Activity	<p>This activity will focus on three high need populations:</p> <ul style="list-style-type: none"> • Culturally and linguistically diverse (CALD) communities: deliver cultural competence training, education and resources to local mainstream service providers to promote best practice approaches to working with CALD communities and facilitate a culturally safe service environment for CALD communities. • Consumer and peer work: deliver training to consumers to build advocacy and representation skills to allow participation in lived experience roles in the AOD sector and commission volunteer initiatives that provide a pathway for consumers to work in consumer and peer roles in AOD service provision. • Family models of care: deliver training to local service providers that promotes identification of and response to the needs of families in treatment and embeds key principles of family inclusive practice within all aspects of service provision. <p>The expected outcomes are:</p> <ul style="list-style-type: none"> • Provision of a skilled workforce to meet the needs of CESPHN priority populations • Increased access and improved treatment outcomes for priority populations • Establishment of a peer AOD workforce and identification of consumer representation roles across AOD sector organisations • Inclusion and participation of consumers with lived experience of substance use issues within AOD service provision • Increased wellbeing and inclusion of families with loved ones experiencing substance use issues.
Target population cohort	<ul style="list-style-type: none"> • CALD diverse communities; organisations who provide AOD treatment services to people who reside within the CESPHN region • Consumer peak organisations; people who reside within the CESPHN region who use alcohol and other drugs • People who seek AOD treatment services who reside within the CESPHN region and their families and carers; organisations who provide AOD treatment services to people who reside within the CESPHN region
In scope AOD Treatment Type	<ul style="list-style-type: none"> • Information and education • Workforce development, capacity building, including supporting the workforce through activities that promote joint up assessment and referral pathways, quality improvement, evidence-based treatment, and service integration.

Indigenous specific	No
Coverage	CESPHN region
Consultation	<ul style="list-style-type: none"> • CALD communities, AOD treatment service providers and relevant Peaks • Consumer peak organisations; people who reside within the CESPHN region who use alcohol and other drugs • People who seek AOD treatment services and their families and carers, AOD treatment service providers and relevant Peaks
Collaboration	Drug and Alcohol Multicultural Education Centre (CALD AOD peak), Family Drug Support (Family and Carer AOD peak) and NSW User's and AIDS Association (Injecting Drug User peak) to design and deliver workforce development approaches. Local AOD treatment providers/workers to engage and participate in workforce development activities.
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (including the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019</p> <p>Activity end date: 30/06/2022</p> <p>Any other relevant milestones?</p> <p>CESPHN will meet quarterly with service providers to review progress including qualitative and quantitative data.</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known</p> <p><input checked="" type="checkbox"/> Continuing service provider / contract extension</p> <p><input type="checkbox"/> Direct engagement.</p> <p><input type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p> <p><input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	No
Data collection	No

Proposed Activities	
ACTIVITY TITLE	AOD 4 – Service development initiatives
Existing, Modified, or New Activity	Existing Activity AOD 3.1 Service development initiatives (AWP 2018-19 Drug and Alcohol Treatment Service for Aboriginal and Torres Strait Islander people – Flexible Funding)
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Priority Number: 19 Priority Title: Person centred quality service delivery Needs Assessment page reference: 89 Identified as possible option: Yes
Aim of Activity	Continue to commission specialist services to develop, disseminate and support best practice guidelines for AOD services to assist in making them more culturally appropriate for Aboriginal and Torres Strait Islander peoples.
Description of Activity	This activity includes: <ul style="list-style-type: none"> • Developing guidelines for AOD treatment services to support cultural inclusion and safety for Aboriginal and Torres Strait Islander people. • Disseminating guidelines to AOD treatment services within 6 PHN regions. • Delivering workshops on the implementation of guidelines to AOD treatment services within the 6 PHN regions. • Measuring the use of guidelines and the impact, through a stepped wedge design randomised trial. • Final Report with recommendations detailing how services may be enhanced to service Aboriginal and Torres Strait Islander people within the 6 PHN regions.
Target population cohort	Organisations that provide AOD services to people within the CESP HN region. Aboriginal and Torres Strait Islander peoples who experience substance use issues in the CESP HN region.
In scope AOD Treatment Type	<ul style="list-style-type: none"> • 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.
Indigenous specific	Yes Governance of this project includes a Project Executive Group consisting of NADA, 6 PHNs, AH&MRC, Lives Lived Well, NDARC who have oversight of the project to ensure achievement of aims on time and on budget. A project Advisory Group is also convened with representation from AH&MRC, AMS, NARHDAN, LHDs to provide advice to ensure the project is culturally appropriate and to inform resource development. Development of the guidelines resource is informed by broad consultation with Aboriginal and Mainstream AOD services across metro and regional locations, Aboriginal Elders and community.
Coverage	CESP HN region
Consultation	Consultation with relevant peaks, Aboriginal Community Controlled Health Organisations, Aboriginal Elders, Aboriginal and Torres Strait Islander Community members and drug and alcohol treatment providers in the PHN regions.
Collaboration	Co-commissioned with the following PHNs: <ul style="list-style-type: none"> • Coordinaire, South Eastern NSW PHN • South West Sydney PHN

	<ul style="list-style-type: none"> • Wentwest PHN • Hunter New England Central Coast PHN • Western NSW PHN <p>Representatives on executive group:</p> <ul style="list-style-type: none"> • Network of Alcohol and other Drug Agencies (NADA) NSW AOD peak body • National Drug and Alcohol Research Centre (NDARC) • Aboriginal Health & Medical Research Council (AH&MRC) • Consultant training provider • 6 NSW PHNs. <p>Representatives on advisory group:</p> <ul style="list-style-type: none"> • Aboriginal Community Controlled Health Organisations • Network of Alcohol and other Drug Agencies (NADA) NSW AOD peak body • National Drug and Alcohol Research Centre (NDARC) • Aboriginal Health & Medical Research Council (AH&MRC) • NSW Aboriginal Residential Healing Drug and Alcohol Network (NARHDAN) • Aboriginal Drug and Alcohol (ADAN) Leadership Group • Consultant training provider.
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (including the planning and procurement cycle):</p> <p style="padding-left: 40px;">Activity start date: 1/07/2019</p> <p style="padding-left: 40px;">Activity end date: 30/06/2020</p> <p>Any other relevant milestones?</p> <ul style="list-style-type: none"> • Development of guidelines (31/3/19), commence implementation of guidelines (15/12/19), draft evaluation report (1/6/20), final report (30/6/20)
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Not yet known <input checked="" type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement – commissioned directly to specialist organisation <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? Yes</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? Yes</p>
Decommissioning	No
Data collection	No

Proposed Activities	
ACTIVITY TITLE	AOD 5 – CESPHN region Drug and Alcohol GP Liaison and Shared Care Project
Existing, Modified, or New Activity	Existing Activity AOD 4. CESPHN region Drug and Alcohol GP Liaison and Shared Care Project (AWP 2018-19 Drug and Alcohol Treatment Services – Operational and Flexible Funding)
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Priority Number: 18, 20 Priority Title: Enhanced access to AOD treatment in the primary care setting, Integrated service delivery Needs Assessment page reference: p. 88-89 Identified as possible option: Yes
Aim of Activity	Increase the capacity of GPs to provide effective, timely, coordinated and person centred AOD treatment.
Description of Activity	This activity includes: <ul style="list-style-type: none"> • Commissioning a region wide shared care project to assist specialist AOD services and GPs to work together to provide care for people with substance use disorders. • Delivering training and resources to GPs to enhance uptake of drug and alcohol treatment including screening, brief intervention and referral, and planning and coordination of treatment for severe substance use disorder. • Developing referral pathways between primary care and specialist drug and alcohol treatment services and promote Health Pathways. • Building liaison capacity between sectors via the provision of clinical liaison services to increase clinical understanding, and seamless referral of clients with complex needs. • Providing education and support to prescribers regarding pharmaceutical drug misuse. • Supporting and build capacity of GPs during the changes in codeine rescheduling and following OST guideline changes. The expected outcomes are: <ul style="list-style-type: none"> • Increased number of patients supported in primary healthcare setting • Increased integration between primary health and specialist treatment services • Increased awareness and use of HealthPathways and DASAS • Referral links made between GPs and allied health providers, including pain management specialists • Reduction in over-prescribing of pharmaceutical opioids.
Target population cohort	General practitioners and people who experience substance use issues across the CESPHN region.
In scope AOD Treatment Type	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.
Indigenous specific	No
Coverage	CESPHN region
Consultation	LHD and LHNs, Addiction Medicine Specialists, GPs and people with lived experience.

Collaboration	South East Sydney Local Health District, Sydney Local Health District, St Vincent's Health Network, Sydney Local Health District and Participating general practices within CESPHN region.
Activity milestone details/ Duration	Provide the anticipated activity start and completion dates (including the planning and procurement cycle): Activity start date: 1/07/2019 Activity end date: 30/06/2022 Any other relevant milestones? CESPHN will meet quarterly with service providers to review progress including qualitative and quantitative data.
Commissioning method and approach to market	1. Please identify your intended procurement approach for commissioning services under this activity: <input type="checkbox"/> Not yet known <input checked="" type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement: Commission in whole to LHD with experience and specialist skills in GP shared care and liaison services <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) 2a. Is this activity being co-designed? No 2b. Is this activity this result of a previous co-design process? No 3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No 3b. Has this activity previously been co-commissioned or joint-commissioned? No
Decommissioning	No
Data collection	No