



Drug and Alcohol Treatment Activity Work Plan 2020-2022: 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)

Gold Coast 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.

Updated PPERS fields requirements

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.

ACTIVITY TITLE	AOD1 - Core and Operational AOD Treatment Service Delivery
Existing, Modified, or New Activity	Existing Activity If activity is existing or modified, provide the relevant reference/s from previous Activity Work Plan/s where possible.
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Activity transitioned from Department of Health in March 2017. These activities were not commissioned in response to the GCPHN needs assessment, however some of the activity meets one of the current needs assessment priority areas: “Flexible outreach treatment services with a focus on vulnerable target groups including young people is needed”. “Increase capacity of detoxification, residential rehabilitation and aftercare services to provide flexible support and follow up for clients as well as enabling people still using substances to access services.” <i>Page 1 of the Alcohol and Other Drugs Needs Assessment Summary (page 224 of page 279 of full Needs Assessment 2018).</i>
Aim of Activity	Activity aims: <ul style="list-style-type: none"> • Increase availability of AOD treatment services in the community • Increase timely access to specialist AOD treatment services for individuals and their families • Improve drug and alcohol treatment outcomes for clients, particularly for individuals who have high levels of complexity or co-morbidities including mental health conditions • Reduce harm associated with drugs and alcohol, with a focus on methamphetamine use <p>Gold Coast PHN commissioned AOD treatment activities align with recommendations in the National Drug Strategy 2017-2026.</p>
Description of Activity	Five (5) programs are delivered within this funding. <ul style="list-style-type: none"> • Family Therapy and Support Program • Youth Dual Diagnosis Support Services • Youth Community Outreach Program • Transition House Program

	<ul style="list-style-type: none"> • Treatment Effectiveness Program (Clinical Care Coordination) <p>These programs will continue to provide evidence-based treatment and community outreach opportunities and support for:</p> <ul style="list-style-type: none"> • People who present with dual diagnosis and highly complex or comorbid conditions • People identified as being in vulnerable or “at risk” populations in the community, with a focus on young people • Clients who transition from residential rehabilitation into transitional housing arrangements <p>In 2020/21 GCPHN will focus on:</p> <ul style="list-style-type: none"> • Continuing to commission Lives Lived Well for the provision of the above programs, using a contract management and performance monitoring approach that includes risk management, relationship management, data analysis, and continuous reviews of the Quality Improvement Plan • Reviewing the performance of the activity against the Quadruple Aim and the most recent needs assessment to identify changes that may be required in the service model and commissioning approach, given the funding is now flexible, including: <ul style="list-style-type: none"> ○ Reviewing client demographics to ensure access is provided to individuals who are most at need in the community ○ Needs identified in Joint Mental Health, AOD and Suicide Prevention Regional Plan ○ Outcomes based commissioning opportunities based on learnings from Brisbane South PHN ○ Finalisation and embedding of Program Logic • Enhancing referral pathways between General Practice, Gold Coast Hospital and Health Service, mental health services including GCPHN funded services across the Stepped Care Continuum to ensure individuals who require a comprehensive dual-diagnosis response can access services • Working with the commissioned provider to identify and fulfill effective evaluation activities including client outcome measurements through clinical assessments and consumer satisfaction and experience data <p>Changes to the commissioning approach during the period of this plan are dependent on the outcomes of the review of the activity. The Joint Regional Plan actions must also be taken into account to ensure any program changes align to direction of the Joint Regional Plan.</p> <p>GCPHN will also work with PHNs who hold contracts with service providers for Core funding that have designated activity in the Gold Coast region, with the aim to ensure service provision is well integrated with other commissioned services and treatment activity supports local needs.</p>
Target population cohort	Young people aged 12-35 residing in the Gold Coast area requiring treatment and support for alcohol and/or other drug use including individuals experiencing co-occurring mental health and substance related disorders.

In scope AOD Treatment Type	<p>AOD treatment types are drawn from the PHN Treatment Guidance Material and include:</p> <ul style="list-style-type: none"> • Screening and Assessment • Brief Intervention • Counselling • Case management • Information and education • Aftercare including relapse prevention <p>Treatment types within scope are as defined in the Australian Institute of Health and Welfare’s Alcohol and Other Drug Treatment Services National Minimum Data Set: Data Collection Manual 2018–19.</p>
Indigenous specific	No
Coverage	GCPHN Region (Gold Coast SA4)
Consultation	<p>As part of the Joint Regional Plan, consultation to prioritise AOD opportunities and actions has been occurring with a broad range of stakeholders including Gold Coast Health, Gold Coast AOD and mental health service providers, primary care providers, consumers, carers and family members.</p> <p>To assist in determining if and what changes may be required for the activities funded from the Core budget, the needs and opportunities identified through the Joint Regional Planning process will be considered.</p> <p>The programs funded in this activity have been part of the Gold Coast service system for many years and are well integrated across the sector, so any changes made will need to be managed effectively to ensure that continuity of care for clients and providers is achieved.</p> <p>A continuous quality improvement plan will be implemented to ensure referral pathways, client transitions and engagement with General Practice is effective.</p> <p>Ad-hoc and informal consultation will also continue to occur with stakeholders and AOD Peak Bodies to inform the GCPHN needs assessment, regional planning, implementation of the Queensland AOD Outcomes Framework and our future commissioning approach.</p> <p>GCPHN will also negotiate opportunities to formalise arrangements with Brisbane North PHN (BNPHN) regarding the activity funded through their Core activity. BNPHN funds QuIHN and Indigenous Urban Institute of Health (IUIH) for AOD service delivery in the Gold Coast region and to date there has been limited oversight or understanding of the service components being delivered through this activity, the numbers of clients accessing these programs, the outcomes being achieved and how this intersects with GCPHN funded programs. Objectives of this work are to ensure the sharing of reports and data, collaborative provider meetings, and scoping the potential to consolidate funding within the GCPHN region.</p>

Collaboration	<p>Stakeholder - Role</p> <ol style="list-style-type: none"> 1. Gold Coast Health, General Practice, Aboriginal and Torres Strait Islander services, mental health services - Regional Planning, Referral pathways and continuity and integration of care. 2. GCPHN Primary Health Care Improvement Committee, Clinical Council, Consumer Advisory Council, Joint Regional Plan Governance - Advice, consultation, codesign and linkages to primary care and clinical services. 3. AOD peak bodies - Regional Planning advice, promotion of services, engagement in outcomes framework activity. 4. Queensland Mental Health Commission - Regional Planning input and advice, consultation of Drug and Alcohol strategy. 5. Insight / Dovetail-Advice and possible partnering in relation to evidence based treatment delivery, workforce development, education and training opportunities across the generalist and specialist workforce. 6. Queensland Primary Health Networks (PHNs) - Partnerships with Queensland PHNs to maximise investment opportunities and economies of scale for workforce development opportunities, quality improvement opportunities with providers, primary care improvement strategies.
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (including the planning and procurement cycle):</p> <p>Activity start date: 1/06/2020</p> <p>Activity end date: 30/06/2022</p> <p>If applicable, provide anticipated service delivery start and completion dates (excluding the planning and procurement cycle):</p> <p>Service delivery start date: July 2020 tbc</p> <p>Service delivery end date: June 2022 tbc</p> <p>Any other milestones? TBC</p> <p>Prior to July 2020</p> <ul style="list-style-type: none"> • Re-commissioned service provider including contract negotiation process • Ongoing service delivery and performance management • Development of quality improvement activities <ul style="list-style-type: none"> a. client satisfaction and experience survey data collection methods b. training opportunities to ensure cultural competency of staff • Development of service review framework for commissioned activity <p>July – September 2020</p> <ul style="list-style-type: none"> • Implementation of quality improvement activities • Service Review of commissioned activity

	<ul style="list-style-type: none"> a. Data analysis and assessment against Quadruple Aim, provider performance b. Review priorities and opportunities in Joint Mental Health, AOD and Suicide Prevention Regional Plan c. Engagement with Brisbane South PHN and service provider to review the outcomes of the outcomes-based commissioning trial <p>October – December 2020</p> <ul style="list-style-type: none"> • Recommendations to inform any changes to commissioning approach for 1 July 2021
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. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. <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?</p> <p>No</p> <p>Should the review identify need to re-design activity consideration will be given to co-design requirements.</p> <p>2b. Is this activity the result of a previous co-design process?</p> <p>No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p> <p>No</p> <p>4a. Co-design or Co-commissioning details</p> <p>No co-design required as re-commissioning existing provider</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?</p>

	<p>No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p> <p>N/A</p>
Data collection	<p>Is this activity in scope for data collection under the Alcohol and Other Drug Treatment Services National Minimum Data set</p> <p>Yes</p>

ACTIVITY TITLE	AOD2 - NIAS Mainstream AOD Treatment Service Delivery
Existing, Modified, or New Activity	<p>Existing Activity</p> <p>If activity is existing or modified, provide the relevant reference/s from previous Activity Work Plan/s where possible.</p> <p>Ref: 1.2 Northern Gold Coast alcohol and other drug treatment services AOD Activity Work Plan 2019-2022</p>
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	<p>Needs (mainstream)</p> <p>Increase capacity of detoxification, residential rehabilitation and aftercare services to provide flexible support and follow up for clients as well as enabling people still using substances to access services.</p> <p><i>Page 1 of the Alcohol and Other Drugs Needs Assessment Summary</i></p>
Aim of Activity	<p>This activity aims to:</p> <ul style="list-style-type: none"> • Increase availability of AOD treatment services in the community • Increase timely access to specialist AOD treatment services for individuals and their families • Improve AOD treatment outcomes for clients • Reduce harm associated with drugs and alcohol use, with a focus on methamphetamine use <p>Gold Coast PHN commissioned AOD treatment activities align with recommendations in the National Drug Strategy 2017-2026.</p> <p>The expected outcome of these activities is:</p> <ul style="list-style-type: none"> • People in the PHN region are able to access appropriate drug and alcohol treatment services • Decrease in harm to population in PHN region from problematic drug and alcohol use

Description of Activity	<p>GCPHN will continue to commission QuIHN and Lives Lived Well to provide community based alcohol and other drugs treatment services for individuals in the Gold Coast community experiencing substance-related disorders and those who may have co-occurring mental health issues.</p> <p>These activities build on and enhance the existing service system by increasing overall service delivery capacity through flexible, outreach service provision. Services will also be provided via a service hub and in-reach to other AOD services, primary health, mental health and community services.</p> <p>Services will provide timely access for clients wanting to address their alcohol and/or drug use, responding to the motivation for change exhibited by the individual, and will operate within harm reduction frameworks.</p> <p>GCPHN activity for 2020/21 will focus on:</p> <ul style="list-style-type: none"> • Continuing to commission QuIHN and Lives Lived Well for the provision of community-based treatment, using a contract management and performance monitoring approach that includes risk management, relationship management, data analysis, and continuous reviews of the Quality Improvement Plan • Further consideration will be given to: <ul style="list-style-type: none"> ○ Reviewing client demographics to ensure access is provided to individuals who are most at need in the community ○ Data collection and analytical needs to ensure outputs align to the NIAS objectives ○ Finalisation and embedding of the Program Logic ○ Incorporating where appropriate the learnings from the Brisbane South PHN outcomes-based commissioning trial ○ Identify optimal client satisfaction survey processes ○ Strategies to reduce or eliminate waitlists and increase efficiency of intake, triage and onward referral processes • Work with the Gold Coast PHN funded central intake service through Primary and Community Care Services (Activity MH7.2 – Intake, Referral and Information Service) to ensure the AOD needs of the client are also met • Progressing actions, where relevant and appropriate, identified in the Gold Coast Health and Gold Coast PHN Joint Regional Plan for Mental Health, Suicide Prevention and AOD.
Target population cohort	Individuals 18+ requiring treatment support for alcohol and/or other drug use including individuals experiencing co-occurring mental health and substance related disorders.
In scope AOD Treatment Type	<p>AOD treatment types are drawn from the Treatment Guidance Material and include:</p> <ul style="list-style-type: none"> • Screening and Assessment • Brief Intervention • Counselling • Case management • Information and education

	<ul style="list-style-type: none"> • Aftercare including relapse prevention <p>Treatment types within scope are as defined in the Australian Institute of Health and Welfare’s Alcohol and Other Drug Treatment Services National Minimum Data Set: Data Collection Manual 2018–19.</p>
Indigenous specific	No
Coverage	GCPHN Region (Gold Coast SA4)
Consultation	<p>As part of the Joint Regional Plan, consultation to prioritise AOD opportunities and actions has been occurring with a broad range of stakeholders including Gold Coast Health, Gold Coast AOD and mental health service providers, consumers, carers and family members. The needs and opportunities identified through the Joint Regional Planning process will be considered when re-commissioning services providers under this activity.</p> <p>The programs funded in this activity have now become embedded within the Gold Coast service system since commencement in January 2017. Consultation will occur with key stakeholders including QuiHN, Lives Lived Well, Gold Coast Health, and GCPHN advisory bodies to inform any changes to the contracted arrangements for 2020/21 – 2021/22 period.</p> <p>Consultation focus areas will include enhancing referral pathways, client transitions between AOD, mental health and primary care providers, engagement with General Practice and Gold Coast Health, and client outcome and experience data.</p> <p>Ad-hoc and informal consultation will also continue to occur with stakeholders and AOD Peak Bodies to inform the GCPHN needs assessment, regional planning and implementation of the Outcomes Framework.</p>
Collaboration	<p>Stakeholder - Role</p> <ol style="list-style-type: none"> 1. Gold Coast Health, General Practice, Aboriginal and Torres Strait Islander services, mental health services - Regional Planning, Referral pathways and continuity and integration of care. 2. Primary Health Care Improvement Committee, Clinical Council, Consumer Advisory Council, Joint Regional Plan governance - Advice, consultation, codesign and linkages to primary care and clinical services. 3. AOD peak bodies, Research bodies - Regional Planning advice, promotion of services, engagement in outcomes framework activity. 4. Queensland Mental Health Commission - Regional Planning input and advice, consultation of Drug and Alcohol strategy. 5. Insight/Dovetail - Advice and possible partnering in relation to evidence-based treatment delivery, workforce development, education and training opportunities across the generalist and specialist workforce.

	<p>6. Queensland Primary Health Networks - Partnerships with Queensland PHNs to maximise investment opportunities and economies of scale for workforce development opportunities, quality improvement opportunities with providers, primary care improvement strategies.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates (including the planning and procurement cycle):</p> <p style="padding-left: 40px;">Activity start date: 1/07/2020</p> <p style="padding-left: 40px;">Activity end date: 30/06/2022</p> <p>If applicable, provide anticipated service delivery start and completion dates (excluding the planning and procurement cycle):</p> <p style="padding-left: 40px;">Service delivery start date: July 2020</p> <p style="padding-left: 40px;">Service delivery end date: June 2022</p> <p>Prior to July 2020</p> <ul style="list-style-type: none"> • Re-commission service providers • Ongoing service delivery and performance management • Development of quality improvement activities <ul style="list-style-type: none"> a. client satisfaction and experience survey data collection methods b. training opportunities to ensure cultural competency of staff c. work with provider regarding accreditation requirements • Explore need implement referral templates to support GP engagement and referrals to services <p>July – September 2020</p> <ul style="list-style-type: none"> • Implementation of quality improvement activities • Ongoing service delivery and performance management of commissioned services • Implementation of identified workforce activities • Implementation of GP related activity <p>October – December 2020</p> <ul style="list-style-type: none"> • Recommendations to inform any changes to commissioning approach for 1 July 2021
<p>Commissioning method and approach to market</p>	<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. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</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>QuiHN and Lives Lived Well have been commissioned since January 2017. Both providers have been reviewed to be high performing providers and well respected in the region. The programs delivered are now embedded in the service system and have consistently been at service delivery capacity. GCPHN has worked with each provider during the commissioned period to move towards a more outcomes focused approach</p> <p>2a. Is this activity being co-designed?</p> <p>No</p> <p>2b. Is this activity this result of a previous co-design process?</p> <p>Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p> <p>No</p> <p>4a. Co-design or Co-commissioning details</p> <p>No co-design required as re-commissioning existing provider</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?</p> <p>No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p> <p>N/A</p>
Data collection	<p>Is this activity in scope for data collection under the Alcohol and Other Drug Treatment Services National Minimum Data set</p> <p>Yes</p>

ACTIVITY TITLE	AOD3 - NIAS Aboriginal and Torres Strait Islander People AOD Treatment Service Delivery
Existing, Modified, or New Activity	<p>Modified Activity</p> <p>If activity is existing or modified, provide the relevant reference/s from previous Activity Work Plan/s where possible.</p> <p>Ref: 1.3 Aboriginal and Torres Strait Islander Alcohol and Other Drugs Gold Coast Service Activity Work Plan 2019-2022</p> <p>Formerly AOD 1.3 Aboriginal and Torres Strait Islander people – Flexible Funding AOD Treatment Service Delivery</p>
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	<p>Needs (Indigenous)</p> <p>Flexible support through outreach treatment and assertive follow up for clients</p> <p><i>Page 1 of the Alcohol and Other Drugs Needs Assessment Summary</i></p>
Aim of Activity	<p>Activity aims:</p> <ul style="list-style-type: none"> • Increase access to, and responsiveness of, specialist, culturally appropriate drug and alcohol treatment services for individuals and their families • Improve drug and alcohol treatment service outcomes for clients • Provide holistic and coordinated care for co-occurring issues including mental health and drug and alcohol • Reduce harm associated with drugs and alcohol, with a focus on methamphetamine use <p>Gold Coast PHN commissioned AOD treatment activities aim to align with recommendations in the National Drug Strategy 2017-2026.</p> <p>The expected outcome of these activities is:</p> <ul style="list-style-type: none"> • People in the PHN region are able to access appropriate drug and alcohol treatment services. • Decrease in harm to population in PHN region from drug and alcohol misuse.
Description of Activity	<p>Kalwun has been commissioned to provide an integrated clinical service for mental health and alcohol and other drug treatment to the local Aboriginal and Torres Strait Islander community. The Service is known as the Social Health Team and encompasses a multidisciplinary team that works collaboratively with the clinical teams throughout the three Aboriginal and Torres Strait Islander health clinics on the Gold Coast, as well as mainstream primary care, mental health and drug and alcohol services.</p>

	<p>The 2020/21 activity of GCPHN will focus on:</p> <ul style="list-style-type: none"> • Refinement and embedding of the Social Health Team model within Kalwun and the mental health/AOD sector • Increasing service reach and engagement of Aboriginal and Torres Strait Island people in the region, via community engagement activities and improved referral pathways • Contract management and performance monitoring activities including risk management, relationship management, data analysis and reporting • Working with the providers to identify effective evaluation activities
Target population cohort	Aboriginal and Torres Strait Islander people residing in the Gold Coast area requiring treatment support for alcohol and/or other drug use including individuals experiencing co-occurring mental health and substance related disorders.
In scope AOD Treatment Type	<p>AOD treatment types are drawn from the Treatment Guidance Material and include:</p> <ul style="list-style-type: none"> • Screening and assessment • Brief Intervention • Counselling • Case management • Information and education • Aftercare and relapse prevention
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>Yes</p> <p>This activity will be delivered through an integrated clinical service for mental health and alcohol and other drug treatment to the local Aboriginal and Torres Strait Islander community. The Service, through its multidisciplinary team, will work collaboratively with the clinical teams throughout the three Aboriginal/Torres Strait Islander health clinics on the Gold Coast as well as mainstream mental health and drug and alcohol services to ensure access to treatment is facilitated for Aboriginal and Torres Strait Islander people.</p>
Coverage	GCPHN Region (Gold Coast SA4)
Consultation	<p>Consultation occurred with Kalwun during the 2019/20 period to inform a new model of service. This was commissioned in October 2019 and builds on the established approach of an integrated mental health, AOD and suicide prevention service.</p> <p>Consultation will include all stakeholders listed below as well as GCPHN clinical and community advisory groups.</p> <p>Ad-hoc and informal consultation will continue to occur with stakeholders to inform the GCPHN needs assessment, regional plan and co-design activities.</p>

Collaboration	<p>Stakeholder - Role</p> <ol style="list-style-type: none"> 1. Karulbo - Indigenous Community advice, codesign and leadership. 2. Mental Health and AOD Multidisciplinary Advisory Group - Advice, referrals and linkages to primary care and clinical services. 3. Gold Coast Health, General Practice, Aboriginal and Torres Strait Islander services, mental health services - Referral pathways and continuity of care. 4. Krurungal Aboriginal & Torres Strait Islander Corporation - Referral pathways, partner in client care. 5. AOD peak bodies - Advice, planning, promotion of services, engagement in outcomes framework activity. 6. Insight - Advice in relation to evidence-based treatment delivery, workforce development, education and training opportunities across the generalist and specialist workforce. 7. Mainstream AOD Providers - Referrals, shared care and continuity of care.
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: 1/07/2020</p> <p style="padding-left: 40px;">Activity end date: 30/06/2022</p> <p>If applicable, provide anticipated service delivery start and completion dates (excluding the planning and procurement cycle):</p> <p style="padding-left: 40px;">Service delivery start date: July 2020 tbc</p> <p style="padding-left: 40px;">Service delivery end date: June 2022 tbc</p> <p>Amy other milestones? TBC</p> <p>Existing and ongoing activity</p> <p>Prior to July 2020</p> <ul style="list-style-type: none"> • Continue to commission service provider • Finalisation of Service Model and associated policies and procedures • Ongoing service delivery and performance management • Development of quality improvement activities <ul style="list-style-type: none"> a. client satisfaction and experience survey data collection methods • Identify training, education and upskilling requirements of the generalist and specialist AOD workforce for Gold Coast region in relation to Aboriginal and Torres Strait Islander cultural competency. <p>July – September 2020</p> <ul style="list-style-type: none"> • Implementation of quality improvement activities

	<ul style="list-style-type: none"> • Ongoing service delivery and performance management of commissioned services • Implementation of identified workforce activities including delivery of Aboriginal and Torres Strait Islander specific AOD and mental health training for mainstream providers <p>October – December 2020</p> <ul style="list-style-type: none"> • Recommendations to inform any changes to commissioning approach for 1 July 2021
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. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</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?</p> <p>No</p> <p>2b. Is this activity this result of a previous co-design process?</p> <p>Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p> <p>No</p> <p>4a. Co-design or Co-commissioning details</p> <p>No co-design required as re-commissioning existing provider</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?</p> <p>No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

	N/A
Data collection	Is this activity in scope for data collection under the Alcohol and Other Drug Treatment Services National Minimum Data set Yes

ACTIVITY TITLE	AOD4 - Service Integration, Capacity Building and System Efficiency and (AoD shared care frameworks and pathways)
Existing, Modified, or New Activity	Existing Activity If activity is existing or modified, provide the relevant reference/s from previous Activity Work Plan/s where possible.
PHN Program Key Priority Area	Alcohol and Other Drugs
Needs Assessment Priority	Provision of training and resources, including referral pathways, for General Practice to support patients with substance use issues including ice. Enhance the cultural competency of mainstream alcohol and other drugs treatment services to confidently, safely and effectively work with Aboriginal and Torres Strait Islander people <i>Page 1 of AOD summary document</i>
Aim of Activity	This activity aims to lead and promote a coordinated approach in relation to planning, service provision and workforce development activities. to Activity aims: <ul style="list-style-type: none"> • Enhance service capacity and integration and system efficiency • Enhance AOD specialist workforce capacity and General Practitioner capability to respond to patients with AOD issues • Build local workforce cultural and clinical skills to meet the needs of local community, particularly for Aboriginal and Torres Strait Islander people, the CALD community, and people who identify with the LGBTIQAP+ community • Improve drug and alcohol treatment service outcomes for clients, particularly for individuals who have high levels of complexity or co-morbidities including mental health conditions <i>AoD shared care frameworks and pathways</i> The aim is to clearly identify the needs of the local community in relation to AoD through co-design with consumers, providers and the broader community, translate these into an agreed shared care model and pathway hosted on an electronic platform. This will complement the palliative care shared care model that has been developed by GCPHN as a part of the <i>Greater Choice for At Home Palliative Care</i> project, as an exemplar shared

	<p>care and pathways model. Critically it will fund the infrastructure on which to host both the palliative care and AoD shared care model and pathways.</p> <p>These aims will be achieved through the development and implementation of a range of activities including:</p> <ul style="list-style-type: none"> • Support the generalist and specialist AOD workforce • Strategy development and sector engagement • Implementation of actions identified in the Gold Coast Health and Gold Coast PHN Joint Regional Plan Mental Health, Suicide Prevention and AOD
Description of Activity	<p>Work in partnership with key stakeholders across the following activities:</p> <p>Planning:</p> <ul style="list-style-type: none"> • Ongoing development and implementation activity associated with activity HSI 4 Joint Regional Plan for mental health, suicide prevention and AOD • Ongoing engagement with QLD NT AOD PHN network to align and complement service agreements to obtain consistency for providers who are commissioned by multiple PHNs • Scope demand for afterhours AOD treatment and opportunities to increase after hours individual and group treatment and support • Review with service providers the models of clinical communication, triage, screening and waitlist management procedures, and transfer of care processes to identify opportunities to enhance efficiency and best practice • Explore need to embed a suite of, and/or centralised, referral templates to enable General Practice, Gold Coast Hospital and Health Service, mental health services including GCPHN funded services across the Stepped Care Continuum to ensure individuals who require a comprehensive dual-diagnosis response can access services • Explore opportunities to better coordinate access to specialist treatment for patients with chronic pain management needs and substance dependency <p>Service Provision:</p> <ul style="list-style-type: none"> • Work with the Alcohol and Drug Information Service (ADIS) and Alcohol and Drug Clinical Advisory Service (ADCAS) to implement the direct referral service in the region • Explore opportunity to increase capacity and capability to support patients of the primary care workforce through: <ul style="list-style-type: none"> ○ Quality Improvement activities linked to the Practice Incentive Program ○ Embedding referral templates and pathways in General Practice software ○ Enhanced promotion of the Queensland Health funded Alcohol and Drugs Information Service (ADIS) for General Practice ○ Use of AH5 Primary Sense™ Population Health Management and audit tool to inform targeting interventions, support and training needs

	<ul style="list-style-type: none"> • Regular information provision through GCPHN publications and website for health professionals and community in relation to available service options, service capacity and how to access services. <p>Workforce Development:</p> <ul style="list-style-type: none"> • General Practitioner and Pharmacy education in relation to screening, brief intervention and opioid prescribing and management in partnership with appropriate stakeholders including Gold Coast Health and NPS MedicineWise • In collaboration with Qld PHN AOD Network, promote and support implementation of the ASSIST screening and assessment tool for alcohol and other drug use • Identify training, education and upskilling requirements of the generalist and specialist AOD workforce for Gold Coast region. Consultation / planning with AOD Qld PHN Network to identify opportunities that could be coordinated state-wide through agencies such as RACGP and Insight • Support access to cultural awareness and competency training for mainstream service providers so they can effectively support Aboriginal and Torres Strait Islander peoples • Explore opportunities to support AOD, mental health and suicide prevention workforce collaboration, networking and integrated service provision such as shared case management <p><i>AoD shared care frameworks and pathways</i></p> <p>Enhanced support for General Practice to deliver AoD through an evidence based, locally relevant and user friendly health pathway and “shared care” framework including:</p> <ul style="list-style-type: none"> • review, prioritisation and localisation of existing appropriate guidelines, tools and resources • define and document clinical support and pathways with Gold Coast Health • protocols agreed and documented • embedded within usual general practice business processes • document published in appropriate online and hard copy formats • general practice user acceptance testing • awareness, training and support for use of framework
Target population cohort	AOD service providers, GPs, service system users, mental health service providers
In scope AOD Treatment Type	N/A
Indigenous specific	No
Coverage	GCPHN Region (Gold Coast SA4)

Consultation	<p>Identification of opportunities and implementation of activities have been and will continue to be jointly undertaken with key stakeholders including (but not limited to) the HHSs, GPs, non-government organisation service providers, PHNs, peak bodies, Aboriginal and Torres Strait Islander health services, and consumer advisory groups.</p>
Collaboration	<p>Stakeholder - Role</p> <ol style="list-style-type: none"> 1. Gold Coast Health HHS, Gold Coast PHN Joint Regional Plan Steering Committee, working groups, advisory groups - Planning, advice, consultation, design, prioritisation. 2. Gold Coast Health AOD Consumer and Carer Advisory Group - Consultation in relation to service reviews, Joint Regional Plan prioritisation, quality improvement activities. 3. Qld NT PHN AOD Network – Collaborate and coordinate activities. <ul style="list-style-type: none"> • Commissioned services • Workforce development • Outcomes based commissioning 4. AOD peak bodies - Advice, promotion of services, planning. 5. NPS Medicinewise Insight Dovetail - Advice in relation to evidence-based treatment delivery, workforce development, education and training opportunities across the generalist and specialist workforce. 6. Mainstream AOD Providers - Referral pathways and continuity of care. Consultation, planning, codesign and implementation of activities.
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: 1/07/2020</p> <p style="padding-left: 40px;">Activity end date: 30/06/2022</p> <p>If applicable, provide anticipated service delivery start and completion dates (excluding the planning and procurement cycle):</p> <p style="padding-left: 40px;">Service delivery start date: July 2020 tbc</p> <p style="padding-left: 40px;">Service delivery end date: June 2022 tbc</p> <p>Amy other milestones? TBC</p> <p>Prior to July 2020</p>

	<ul style="list-style-type: none"> • Commence consultation and planning with key stakeholders across the planning, service provision and workforce development areas <p>July – June 2021</p> <ul style="list-style-type: none"> • Development and implementation of quality improvement activities, system efficiency activities identified in Description <ul style="list-style-type: none"> • Delivery of education and training events • Promotional activity for ADIS and ADCAS • Quarterly meetings with AOD PHN Network • Development and implementation of referral templates and CQI documentation • Commence co-design of AoD locally relevant and user friendly health pathway and “shared care” framework including <ul style="list-style-type: none"> • review, prioritisation and localisation of existing appropriate guidelines, tools and resources • define and document clinical support and pathways with Gold Coast Health • protocols agreed and documented • embedded within usual general practice business processes • document published in appropriate online and hard copy formats • general practice user acceptance testing • awareness, training and support for use of framework
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input checked="" type="checkbox"/> Not yet known</p> <p><input type="checkbox"/> Continuing service provider / contract extension</p> <p><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</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?</p> <p>Yes</p> <p>Where required</p> <p>2b. Is this activity this result of a previous co-design process?</p> <p>Yes</p>

	<p>Joint Regional Plan consultation, Qld NT PHN AOD Network</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p> <p>No</p> <p>4a. Co-design or Co-commissioning details</p> <p>Co-design elements will be used to inform the design of the workforce development activities to ensure the delivery approaches, subject areas, content and target groups are fit for purpose.</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?</p> <p>No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p> <p>N/A</p>
Data collection	<p>Is this activity in scope for data collection under the Alcohol and Other Drug Treatment Services National Minimum Data set</p> <p>No</p>

DoH Approved August 2020