

Regional Voices: Alcohol and Drug Sector Consultation

Throughout May and June VAADA facilitated a total of ten, three-hour consultation forums in each of the DHS regions across Victoria, as part of its Regional Voices Consultation project.

Funded externally as a pilot project, the forums reflect VAADA's commitment to further developing its connection with its membership, and remaining accessible to the State's rural regions.

In addition to increasing members' engagement, the project had a number of other aims and intended outcomes.

Meetings with Regional Directors and/or senior bureaucrats following each forum, provided an opportunity to foster working ties with DHS at the regional level, as well as to feed back complex issues and key themes to senior staff with responsible for multiple departmental program areas.

Perhaps most importantly, the forums have provided a wealth of valuable information that reflects the views and experiences of over 150 people from services in more than 80 organisations state wide.

These include representatives from the full range of specialist treatment, primary and community health, local government, Victoria Police, consumer, Indigenous, CALD, and family services.

This information will better inform VAADA's policy positions and practice, and enable it to advocate with greater strength and authority on behalf of the AOD sector and its clients. It will also assist in the development of VAADA's future priorities.

VAADA specifically sought information about responses to client groups that are working well, innovative programs, barriers to cross-sectoral collaboration, identified gaps, emerging trends, issues working with Koori, CALD and older drug users and their families, and service capacity issues.

Each forum identified region-specific issues and some of the innovative solutions developed to meet these challenges.

Not surprisingly, there were also shared challenges and common themes between regions and across the State, with a number of additional challenges identified by rural providers.

Given the very large number of issues raised, it is not possible to cover all of them here. However, some of the common themes included:

- Poor client transition through the drug treatment service system, especially in relation to residential rehabilitation supports
- Poor client access to primary and mental healthcare, and pharmacotherapy treatments
- Other service gaps such as safe and secure housing, specialised ABI support, and family treatment options (especially for Indigenous and CALD families)
- Increased client complexity necessitating longer-term and more sophisticated responses
- Inflexible funding that fails to adequately cover management and other service delivery costs, further compounded in rural areas
- Reporting on EOC targets that inadequately reflects the full scope of services provided, stifles innovation and has limited use for future planning

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Month in Review

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- Sector sustainability issues relating to recruitment and retention, relatively low salaries, and barriers to accessing ongoing training, supervision, and other professional development opportunities

All information is currently being collated. Regional summaries will be available shortly, followed by more comprehensive regional and state wide reports later this year.

If you would like to receive an alert when this information is available on the VAADA website, please email jrostant@vaada.org.au

Thank you to all of those who participated in the forums. Your input, expertise and feedback on the process is highly valued.

Community Sector Workcover Initiative

VAADA through its participation in the VCOSS Peaks and Statewide Network has been involved in the Department of Human Services (DHS) Community Sector Investment Fund (CSIF) since its inception three years ago. A number of member organisations have noted the lack of effective Workcover insurance and claims management services available to employers in the sector.

Members have highlighted a number of areas of dissatisfaction including:

- Inconsistent claims management
- High premiums
- A lack of value added services by Workcover companies, including relevant Occupational Health and Safety (OHS) advice and tailored training.

As an outcome of representations made to the CSIF, DHS has funded a project to explore avenues for a new approach to insurance that seeks to improve Workcover performance for the community sector.

VAADA is pleased to advise that the result is a preferred provider arrangement between a consortium of community sector peak bodies (of which VAADA is part), with two Workcover Insurers:

- Cambridge Integrated Services (Victoria) Pty Ltd and
- Wyatt Gallagher Bassett Workers Compensation Victoria Pty Ltd. (WGB)

Following a highly competitive process, using a panel of experienced Workcover consultants, Hilary Kerrison and Associates, and a panel comprised of representatives from the peaks consortium, these two companies have been selected because of their commitment to deliver superior services to community sector organisations. The 'preferred provider' model will enable senior level account management, even for small organisations, so long as they are members of this initiative.

Opportunities for member organisations include free training, customised advice and assistance, more effective claims management and cost savings on Workcover premiums.

Starting from June 2006, the two companies will be marketing their services to the sector, and are endorsed by VAADA and the other peak organisations that comprise the consortium.

The key points in relation to this initiative:

- Transferring to Cambridge or WGB is voluntary.
- As you know, Workcover insurance operates for a set price, based on your payroll, but the relevant value added services, customer service & advice and claims management approach are some of the features to look at most closely in deciding which company to go with.
- DHS is not involved in the project now that it is auspiced by the peaks consortium, however DHS are developing a partnership with Worksafe around community sector issues, and the aim is for the two projects to complement each other.
- Regional and rural services can expect the same level of service as those in the metropolitan area.
- The peaks consortium will be actively monitoring and evaluating the preferred provider model, and welcome your feedback.

June and July are the months where the majority of organisations transfer Workcover Insurer. If you are a member of VAADA or one of the other consortium peaks, we encourage you to consider moving to one of the preferred providers for the Community Sector Workcover Initiative. For more information please contact VAADA on 9416 0899.

YOUR SAY

The Quiet Achievers - Victorian Hospital Addiction Medicine Services Barb Kelly Program Manager, Eastern Health Alcohol & Drug Service Dr Matthew Frei, Consultant, Addiction Medicine Eastern Health

Over the past few years a quiet revolution has occurred within the main metropolitan hospitals of Melbourne.

Through the creative use of diverse streams of funding and auspicing, hospital addiction medicine services are now working in most of our major teaching hospitals.

Hospital addiction medicine teams are providing consultation liaison or direct clinical management of inpatients, outpatient services, support and consultancy for community treatment providers and management of patients in community withdrawal units.

Some hospital addiction medicine services are well-established over many years, while others are barely 18 months young. Some are large and well-resourced, others are small and growing. Their staff includes addiction medicine physicians from the recently established Australasian Chapter of Addiction Medicine, as well as specialist alcohol and drug nurse clinicians and welfare workers.

The need for these services may have existed for years, but their recent growth may be attributed to increasing skills in the addiction medicine workforce.

A few years ago the Chapter of Addiction Medicine was formed to formalize the qualifications of specialist physicians in the sector. The development of nursing skills in addiction medicine is also maturing, although formal training and career pathways for nurses still have a way to go.

Current funding for nurse, doctor and other positions in addiction medicine services come from mainstream hospital resources, hospital demand reduction (HARP/HDM) funding, non-government grants and other sources.

To date, hospital addiction medicine units do not appear in any DHS Services framework. Further, when an addiction medicine service is classified as a project it often has to apply yearly for funding, making it difficult to establish a robust, stable team.

Despite resource limitations, these quiet achievers are starting to fill some of the major cracks in the drug and alcohol sector.

What is particularly exciting is their impact on two significant areas of the sector: general practitioners (GPs) and community residential withdrawal services.

We know that treating withdrawal is only part of the management of harmful drug use, and is not very effective, unless combined with longer term measures.

Furthermore, many working in the alcohol and drug sector have identified changing trends in the last 5 years, particularly, increasingly complex drug use patterns and co morbidities. If we want to optimise outcomes for this client group, appropriate inpatient management of withdrawal needs to be combined with transition into community supports.

Using the expertise of addiction medicine physicians, these hospital services can provide effective withdrawal management in residential services and hospitals, and facilitate return to community based services.

In addition, one of the roles of these specialist hospital teams is to provide support to GPs managing clients post withdrawal. Such integration of specialist services with the community alcohol and drug system is likely to improve the overall management of substance withdrawal and reduce presentations to acute services.

So what else are these quiet achievers achieving? To gain a comprehensive and complete understanding, note in your diary the inaugural Hospital Addiction Medicine Services' conference ***Withdrawal and beyond: Integrating Hospital and Community AOD Services*** on the 17th July 0900-1530 at VicHealth, 15-31 Pelham Street Carlton.

For a registration form go to www.vaada.org.au or contact Chris on 9416 0899 or email at cmcdonnell@vaada.org.au.

Calendar of Events

July 12	<p>Practical skills and knowledge in working with young people experiencing Co - occurring Mental Health and Alcohol, Tobacco and other Drug issues To be held at the Wodonga Civic Centre, commencing at 8.45am. Lunch morning and afternoon tea are inclusive. Cost: \$25 and \$10 for concession card holders. RSVP by 12 July 2006. Further information: Contact Colin English, Upper Hume Community Health Service, 02 6022 8888</p>
July 14	<p>Talking Point seminar "The Child Protection Act, the Child Safety Commissioner and the alcohol and other drugs sector" Presented by Bernie Geary, Child Safety Commissioner of Victoria. This seminar will focus on new initiatives in child protection and safety law and how legislation impacts on the alcohol and other drugs sector. Friday To be held 14th July, 1-2 pm, 142 Gertrude St, Fitzroy. The seminar is free. All welcome, bookings essential, ring 8413 8413 or email info@turningpoint.org.au <mailto:info@turningpoint.org.au></p>
July 17	<p>Withdrawal and beyond: Integrating Hospital and Community AOD Services – Presented by VAADA and the Addiction Medicine Hospital Liaison Group This conference will introduce tertiary hospital addiction medicine consultation liaison services, their role within teaching hospitals. For a registration form go to www.vaada.org.au or contact Chris on 9416 0899 or email at cmcdonnell@vaada.org.au .</p>
July 19	<p>Utilising meditation and relaxation techniques as an essential component of treatment for people with anxiety disorders and depressions TRANX/PADA training, 9.30am-4.30pm, Darebin Arts and Entertainment Centre, cnr St Georges Road and Bell Street, Preston. Contact Anne Smarrelli on 9886 0955 for more information or to register</p>
July 26	<p>Introduction to CBT for anxiety disorders, including Obsessive compulsive Disorder, Social Phobia and Panic Disorder TRANX /PADA training, 9.30-4.30pm, Kingston Arts Centre, 979 Nepean Highway, Moorabbin. Contact Anne Smarrelli on 9886 0955 for more information or to register</p>
July 28	<p>Hume Youth and Parents Drug Services Program-One Year On – Moreland Hall Lunchtime Seminar Series 12.30 – 1.30pm Presented by Leonie Smith (AOD Clinician Moreland Hall) & Karen Walka (AOD Clinician Moreland Hall). Seminars will be held Moreland Hall, 26 Jessie Street Moreland. To make further enquiries please call 03 9386 2876 or email seminarseries@morelandhall.org.</p>
August 3-4	<p>VCOSS Congress - Strong Foundations: Working for a fairer future to be held on Thursday 3rd and Friday 4th August 2006 at the RACV Club Conference Centre, 501 Bourke St, Melbourne. For more details please go to www.vcooss.org.au</p>
August 8	<p>Responding to sexual assault Level 1 - CASA House This one-day workshop is designed to assist those working with victim/survivors of sexual assault who have not had the opportunity to access training previously. The cost of the workshop will be \$100.00 and limited to 20 places. Attendance is by booking only. Registration forms are available by contacting CASA House on 9347 3066 or go to www.rwh.org.au/casa/</p>
August 10	<p>2006 FADNET Conference - Widening the Lens: Families in the AOD Picture to be held at the John Scott Meeting House, La Trobe University on 10th August 2006. For more details please visit the website: www.familydrughelp.sharc.org.au/fadnet</p>
August 10-11	<p>7th Rural Victorian Alcohol & Drug Conference - Warrnambool, 10 & 11 August 2006. This year's Conference explores the commonalities and disparities between Indigenous and non-Indigenous alcohol and other drug issues and services. Registrations open late May, to take advantage of early-bird rates and preferences, send an e-mail with your contact details to enquiries@wadac.wrad.org.au soon!</p>
August 18	<p>Turning Point Alcohol and Drug Centre WIP (Work in Progress) 2006 - Translating research into practice: Making services, research and development matter To be held at the Michael Chamberlain theatre, St Vincent's Hospital, Melbourne. Registration fees (inc. GST): \$75 per person, \$30 student concession. [Nb: Registration fees are based on cost-recovery for staging WIP]. For further information contact tracey.brooke@turningpoint.org.au</p>