# Vaada news

Victorian Alcohol & Drug Association

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# Investment increase recognises vital role of Victorian AOD sector

After decades of investment drought, the Victorian Alcohol and other Drug (AOD) Sector is currently experiencing an unprecedented level of state government investment across a number of areas. Quite clearly the increased attention given to this sector is most welcome but nevertheless a reflection of the serious and profound impact that alcohol and drugs is having on the Victorian community.

What we observe is that the Victorian Sector has seen a 33% funding increase from the Victorian Government over the past three years. In dollar terms the budget has moved from \$146.2 M in 2014/15 to \$220.1M in 2017/18. VAADA acknowledges the commendable work undertaken by both the Victorian Government in securing the funding increase and the Department of Health and Human Services in working with the sector to apply the investment. Some of the dozens of targeted areas receiving funding include, over 100 new residential beds, a new AOD data system, a supervised injecting facility, a new Drug Court, a Real Time Prescription Medicine system, four new regional rehabilitation facilities, a new withdrawal and rehabilitation model, regionally based specialist family violence advisors, family focussed activity, investment in peer staff, new Aboriginal AOD treatment workers, new treatment services for forensic clients, as well as a list of other program enhancements.

As a result of the additional workforce pressure arising from this investment there is an intensifying discourse around workforce demands and a further \$2.5M referred to as a 'workforce lift' which is focussed on an 'attraction campaign' encouraging people to join our workforce. VAADA has also been supported to enhance its 'jobs board' and create online information which can help the public navigate the AOD training and education landscape. Additionally, a range of scholarships, free training places, agency placements and training and learning opportunities have been made available as well.

Inevitably, with all this activity it is expected that additional effort will need to focus on drawing this growing and evolving range of activities into a seamless and integrated system. The rocking and

rolling of the past few years brought about by sector reform may under this new sector growth scenario continue on for a bit longer while things settle down.

Amongst all this positive news of additional investment it has been interesting to see the recent release of the Victorian Parliament's 'Law Reform, Road and Community Safety Committee' report into Drug Law Reform. The 18 Chapter, 557-page report contains over 50 recommendations. Interestingly, while it explores the usual 3 pillars approach, namely harm reduction, law enforcement, and treatment it calls for a strategy based on 4 pillars, suggesting a 4th and discrete pillar of 'prevention' to being added. The report contains a range of pragmatic and quite positive policy initiatives which if supported would make a considerable contribution in addressing the array of at times inexplicable and contradictory policies often creating more harm than good.

Some common sense recommendations in the report include establishing a new Victorian governance structure to oversee and monitor the four pillars drug strategy which could include a Ministerial Council on Drug Policy and an Advisory Council on Drug Policy, the use of data, evidence, early warning systems, are also focussed on, as well as seeing drug use as a health rather than a criminal justice issue. As a measure of clear thinking the report also calls on expanded pharmacotherapy, and Victorian Government funded opioid substitution therapy dispensing fees.

Undoubtedly, many of the recommendations contained in the report are worthy of implementation and would without doubt reduce individual and community harms. Should Government seek to pursue such initiatives there is little doubt that the returns to the community would be enormous. While the good works of additional investment in our sector are most welcome and appreciated, the pursuit of pragmatic, evidence based and coherent policies that add to some recently developing trends and activity would cement in place some real progress in this complex social policy environment.

Sam Biondo
Executive Officer

## Sector update

#### New network meetings

One of the key ways VAADA supports the sector is through a range of network meetings. These networks provide the opportunity for staff to liaise, share practice wisdom, receive sector updates, hear about new developments and otherwise come together to support each other. Current networks cover Non-residential Withdrawal; CEOs and Manager's; Catchment Planner's and Intake and Assessment. Recently VAADA coordinated two new networks—a Specialist Pharmacotherapy Services network and a Supported Accommodation Forum. Both network meetings provided valuable insight into the operation of the sector allowing VAADA to advocate for systemic improvements and service enhancements on behalf of its member agencies.

#### Workforce development

At the time of writing, DHHS was about to release its new AOD workforce strategy. The workforce strategy is the result of consultation by DHHS through focus groups, surveys, submissions and the sector reference group.

VAADA contributed to the project by preparing a workforce roundtable report highlighting areas for investment and improvement across recruitment, retention and workforce capability. VAADA has advocated for a comprehensive and long term workforce vision to create a sustainable, capable, well paid workforce and an attractive industry. As a sector we need to establish a vision for the workforce. What do we want the workforce of the future to look like? What levels of qualification should we be striving for? These questions were central to our responses.

To meet a number of immediate needs, in late 2017 DHHS announced an investment in a series of AOD programs and projects. This included funding VAADA to redevelop its jobs board and education and training pages on the VAADA website.

#### Website development update

NEW VAADA ONLINE JOBS BOARD AND EDUCATION AND TRAINING PAGE - COMING SOON

Difficulties recruiting and retaining staff have been an issue for the sector for some time. VAADA has been acutely aware of these issues and has been advocating for increased investment in the space to build the workforce needed to support our clients now and in to the future. As part of the DHHS workforce lift initiative, VAADA is redeveloping its online jobs board and adding an education and training page. The aim is to develop and enhance the AOD jobs board and introduce an education and training page to proactively recruit

new employees to the AOD sector and support upskilling the existing workforce to meet an increased demand for services.

The key objectives of the website upgrade project are:

#### 1. Redevelopment and relaunching VAADA jobs board

- Redevelopment of VAADA online jobs board, including:
  - · Increasing its utility
  - Improving search results to attract AOD job seekers and advertisers
  - Links to related AOD job sites.
  - Use of social media activity aimed specifically at recruitment and driving potential staff and advertisers to the VAADA jobs board.

#### 2. Education and training page

Development of an online education and training page to attract new staff who may be considering a move into the AOD sector but may need to increase their AOD education to support this process. It will also provide a hub for existing AOD staff to see what industry AOD education and training opportunities are available. The education and training page will include:

- Information on existing RTOs and education providers including areas of speciality
- Sector scholarship opportunities where available
- Career pathways and career options within the AOD sector.

#### Service Provider's Conference - Save the date

On June 1 2018, VAADA is hosting the first of two service provider conferences for the year. The Service Provider Conference brings together staff from across the AOD sector to hear a range of contemporary plenaries from guest speakers and experts in their field. Break-out sessions offer the opportunity to participate in workshops or discussions focussed on particular AOD themes. The theme and content are still being finalised however the working conference title is around 'new approaches to old problems, looking at recent developments in the response to AOD use'.

While previous conferences have been held at the Darebin Arts and Entertainment Centre, the June Service Provider's Conference will be held at the Catholic Leadership Centre, 576 Victoria Parade, East Melbourne. The East Melbourne location offers convenience of access via a number of public transport options however parking is limited. We look forward to seeing you there.

## Sector update cont.

#### Sector forums/ education and training

VAADA is presently working with two Primary Health Networks (the North Western Melbourne PHN and the Western Victoria PHN) on workforce development and capacity building initiatives. These projects leverage VAADA's workforce development expertise to provide agencies and services in the respective regions with increased confidence and capability to deliver AOD services. In February, VAADA coordinated a forum for North West PHN agencies on clinical and systems best practice in culturally responsive services. Another forum on Family Violence was held in April 2018. An LGBTQI forum will be facilitated in the coming months. The

Western Victoria PHN project supports agencies to deliver brief AOD interventions in rural and regional Victoria.

#### **Recent submissions**

VAADA contributed to a range of inquiries, including the development of the National Alcohol Strategy, the TGA consultation into the use of prescription opioids for pain and the Joint Standing Committee on Electoral Matters on the Electoral Legislation Amendment (Electoral Funding and Disclosure Reform) Bill 2017. We have also submitted our Victorian state budget submission which highlights the range of key AOD issues impacting in Victoria.

# Mandatory treatment for severely AOD affected young people

Magistrate Jennifer Bowles undertook a Churchill Fellowship in 2014 to explore options for better addressing the needs of seriously AOD affected young people appearing before the Children's Court of Victoria who (often due to their chaotic lives) could not successfully engage with the existing volunteer treatment regimes. As one desperate mother said to her "What can you do? I am watching my son die before my eyes".

Magistrate Bowles travelled overseas, conducted extensive research and observed a variety of treatment services. As a result of such research and analysis, she developed a model of a mandated therapeutic residential service for troubled young people in Victoria.

As Magistrate Bowles summarises, "The advice I received from numerous experts and practitioners in all countries was that, for some young people, compulsory orders to attend therapeutic facilities are necessary in order to ensure these young people are safe and secure, to deal with the addiction, to commence the process of improving their physical and mental health and wellbeing and to reconnect them with education and training. I spoke with some young people who admitted they did not wish to attend such a facility, but having been there, they believed it was essential for them."

In 2015, a Steering Committee was established to further develop and advocate for the model. The Steering Committee comprises 25 professionals who have varied involvements in the field. This includes the CEOs of key AOD treatment agencies, AOD clinical specialists, clinical and forensic psychiatrists, the community service agency sector, lawyers and advocacy groups.

The Steering Committee recognises the benefits of the therapeutic treatment service proposed by Magistrate Bowles,

which includes the following critical elements: committed and quality staff; the homely nature of the onsite buildings (both secure and open elements); 'step-down' facilities as part of the transition; support for the young person after leaving the residential facilities; education; and external scrutiny. She has proposed that the Children's Court would be able to make 'Youth Therapeutic Orders' for appropriately assessed young people to receive residential treatment.

The Steering Committee's recommendations have been widely supported to date. The Victorian Government commissioned the Youth Justice Review and Strategy (Ogloff/Armytage -Executive Summary) which stated 'there is merit in considering a Youth Therapeutic Order for court-mandated therapeutic treatment for young offenders' (as proposed by the What Can Be Done (WCBD) Steering Committee). The former Commissioner for Aboriginal Children and Young People, Andrew Jackomos, recommended that the Government consider this option for Koori youth. The recently released Parliamentary Inquiry into Youth Justice Centres in Victoria recommended 'That the Victorian Government establish a trial program of Youth Therapeutic Orders based on the 'What Can Be Done model'. At this point the Victorian Opposition has promised, if elected, to establish a 36-bed facility, based on the WCBD model (involving young people presenting before either the criminal, the child protection or the intervention order pathways of the Children's Court). The Steering Committee remains optimistic that a similar approach will be taken by the Victorian Government.

The Steering Committee welcomes and encourages advocacy efforts to support the establishment of this critical service for our most severely at-risk young people.

# Financial counselling & AOD treatment – a holistic approach

You may be surprised to learn that there are only two AOD services in Victoria with a co-located financial counsellor. We provide financial counselling to clients suffering from addictions, addressing such issues as fines, debt collection, payday lenders, utility debts, phone debts, gambling, superannuation & insurance claims, Centrelink issues, such as "robo." debts and refused DSP claims.

Through working with clients within an AOD treatment environment we have found that clients are more willing to disclose such issues and in so doing reduce the risk of relapse and improve therapeutic outcomes.

Consider the fear that unresolved financial issues can engender in our clients. For instance, Paul could not open his mail because it was too overwhelming to deal with outstanding debts and fines that kept pouring in. It seemed pointless because there was no way out. He was afraid to answer his phone unless he knew who was calling, or answer the door if he wasn't expecting anyone for fear that it was a debt collector or sheriff. Leaving his house meant further fear of police or sheriffs chasing unpaid fines.

This level of anxiety is not uncommon, encountering fear at every turn and no resolution to it in sight. Feeling overwhelmed, anxious and hopeless was a continual cause of relapse for Paul and kept him in a spiral of debt and addiction. Further exacerbating his situation were multiple payday loans, unpaid bills and mobile phones that he had sold to pay for drugs.

Seeing a financial counsellor took away all the fear and avoidance. The trigger for relapsing was reduced and Paul was able to focus on his treatment, stay drug free and resolve his financial issues.

Clients experiencing dependence usually have more complex and multiple matters to deal with and the casework involves a longer time span. However the outcomes for the client are not only limited to resolving financial issues but also extend to better therapeutic outcomes, quality of life and improved relationships. Clients are able to feel that they can operate within the community instead of seeing themselves as marginalised thus improving self-esteem.

Unfortunately, government funding takes a silo approach. AOD funders are only interested in AOD treatment. Financial counselling funders are only interested in LGAs and generalist services. This has put an enormous strain on our capacity to provide financial counselling to all those clients and services seeking to engage. As a result, we have had to stop providing outreach financial counselling and at times, we have had to close our books to further referrals. We need funders and service managers to have a broader vision and realise that the quality and outcomes of AOD treatment and financial counselling will be enormously enhanced with a more enlightened approach to funding these services.

**Garry Rothman** is a senior financial counsellor at Odyssey House Victoria, with 15 years of experience working with AOD clients. He is a winner of the Virginia Noonan Award for excellence in financial counselling.

## Networking manual – CCB project

The role of VAADA's commonwealth funded Co-occurring Capacity Building (CCB) Project includes the development and dissemination of resources for the AOD and related community sectors. In early 2016 VAADA released its Capacity Building and Change Management Manual, which (available at www.vaada.org.au) has been a popular resource to assist agencies to better manage, and identify opportunities for change.

From mid-2017 the Commonwealth Substance Misuse Services Delivery Grants Fund ceased to exist, and those funds were re-directed into the provision of direct service delivery for clients. Some agencies therefore need to innovate to maintain their complementary capacity building activities. The establishment of partnerships, alliances and networks have been proven to be an effective approach to capacity building, by encouraging agencies to share resources and work collaboratively. This in turn has benefits for clients

through increased knowledge of referral pathways and shared-care options.

Utilising the principles of its Capacity Building and Change Manual VAADA is currently developing a Networking Manual which will provide agency staff with a step-by-step guide about how to set up networks within your own regions. This manual will include topics such as a description of the types of networks, how to identify which type will help you the most, what resources and structures you will need, involve consumers with co-design, leadership and evaluation. It also showcases the Eastern Mental Health Service Co-ordination Alliance (EMHSCA) as being a highly successful example of how a sustainable networking model can be established.

It is anticipated that the manual will be available from VAADA's website from June 2018. For further enquiries please contact Jane Moreton on **jmoreton@vaada.org.au**.

# CALD workforce development project

As part of the North West Melbourne Primary Health Network (NWMPHN) funded workforce development project, VAADA ran a forum on 20 February focused on working with Culturally and Linguistically Diverse populations. It was targeted at managers and senior practitioners, with expert and lived experience speakers outlining the most effective methods of engaging with CALD communities and developing improved service responsivity.

The day commenced with a highly energetic performance by an African drumming and acrobatic duo, before Louise Richardson, North West Region Health Service Planner provided an enlightening analysis of population versus service data, overlaying CALD population data over service data, highlighting areas requiring service attention.

John Quiroga set the scene further by sharing learnings from a CALD AOD project run by VAADA a number of years ago (for full report follow this link http://www.vaada.

org.au/wp-content/uploads/2016/06/CALD-AOD-Project-final-report.pdf), outlining key factors impacting on CALD communities.

The day continued with two panels, one focused on the changes required at an organisational level, and the other explored practice considerations for clinicians.

The afternoon involved facilitated workshops for managers and practitioners respectively, giving these cohorts an opportunity to reflect on learnings from the morning, identify ways in which this new learning can be applied in their organisation or practice, and also determine the supports needed to do this.

Highlights of the day included a deeply moving account by Monica Majak, a South Sudanese mother, courageously speaking of her son's experience using ice, along with an inspiring session facilitated by the Victorian Transcultural Mental Health, challenging unconscious bias and proposing an intersectional approach to encourage inclusive access and responsiveness to diversity.

The day came to a close with Etienne Dinanga performing some poignant and heartfelt songs offering the audience time to reflect on a rich and rewarding day.

For more information on the event, please follow the link http://www.vaada.org.au/cald-aod-forum-presentations-and-resources/?doing\_wp\_cron=1521507817. 6432750225067138671875

As part of the same workforce development project, VAADA will also be hosting two further forums, namely Domestic and Family Violence on April 17 https://goo.gl/h41cUs and another forum on LGBTIQ on June 19 https://goo.gl/hZbtuN

"Denying access to good quality data to any community is actually denying them a human right, because you don't know whether you are being trated fairly in a society, unless you have a measure of fairness."



#### Victorian Alcohol & Drug Association

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### Calendar

#### **14 MAY**

#### Cultural appreciation: working with Aboriginal and Torres Strait Islander clients and families

Turning Point, Richmond

Registration: www.eventbrite.com.au/e/cultural-appreciation-working-with-atsi-clients-and-families-workshop-03-tickets-38827828079

#### **15 MAY**

#### Working with male perpetrators of family violence

VAADA, Kensington

Registration: www.eventbrite.com.au/e/nwm-region-working-with-male-perpetrators-of-family-violence-reflections-on-collusion-registration-45368402112

#### **24 MAY**

#### Working with interpreters training for mental health and AOD services

NWMPHN, Preston

Registration: www.trybooking.com/book/event?eid=360618&

#### **29 MAY**

#### Introduction to domestic family violence for AOD workers

360 Edge, St Kilda

Registration: 360edge.com.au/events/#domestic-family-violenceworkshops

#### **30 MAY**

#### **Advanced Domestic Family Violence responses in AOD**

360 Edge, St Kilda

Information: 360edge.com.au/assets/uploads/2018/01/360Edge-Training-Calendar-2018.pdf

#### 12 JUNE

#### **LGBTIQ AOD** cultural competency training

Turning Point, Richmond

Registration: www.eventbrite.com.au/e/developing-cultural-competency-in-working-with-lgbtiq-communities-workshop-04-tickets-40089485731

#### **19 JUNE**

#### **NWM PHN LGBTIQ Forum - Managers and Practitioners**

VAADA

Melbourne Polytechnic, 77 St Georges Road, Preston Registration: www.eventbrite.com.au/e/nwm-phn-region-lgbtiq-forumtickets-43185912226

#### 18 JULY

#### Working with cognitively impaired AOD clients

Turning Point, Richmond

Registration: www.eventbrite.com.au/e/everyday-practical-recommendations-and-strategies-for-working-with-cognitively-impaired-aod-clients-tickets-38827560278

#### 19 JULY

#### Working with substance use and dependency

Taskforce, Webinar

#### 26 - 27 JULY

#### **DANA Conference 2018**

Drug and alcohol nurses of Australia (DANA), Melbourne Information: www.danaonline.org/dana-2018-conference/

# The Horizons Project: An empirical analysis of AOD treatment funding, purchasing and workforce mechanisms

Do you oversee an AOD treatment service?

We are looking for service managers to participate in an important study which examines how funding approaches, purchasing mechanisms, and workforce characteristics of AOD treatment impacts on client treatment outcomes.

This project, named Horizons, is being conducted by the Drug Policy Modelling Program at the UNSW. Prof Alison Ritter is leading the research team, and the project has been funded by the National Health and Medical Research Council.

Having accurate information on the funding approaches, purchasing mechanisms, and workforce characteristics of services will help, amongst other things, to:

- Better plan the ways in which treatment services are funded;
- Assist with the allocation of resources to maximise health and wellbeing outcomes; and
- Gain insight in funding and workforce characteristics in relation to treatment outcomes to enhance the capacity of the AOD sector.

If you would like more information, have questions, and/or are interested in participating, please contact Dr Katinka van de Ven via email (k.vandeven@unsw.edu.au) or phone +61 (2) 8936 1218.

The VAADA website now hosts an online calendar where events can be uploaded and sighted. To access this free online service, go to www.vaada.org.au/events