

Improved Services Initiative

Winter 2010 - Issue 3

IN THIS ISSUE

- ISI partnership on consumer, carer and family participation
- SA's Salvation Army Towards Independence program showcases their IT's futures initiative
- A wrap up of Queensland's National Comorbidity guidelines training
- In Victoria, Health Works provides an update form a drug "hot spot"
- In NSW, NADA hosted two workshops on aboriginal mental health
- In NSW, the Ted Noffs foundation update .
- ACT discusses a multidisciplinary response to comorbidity.

Want to contribute to the next newsletter?

Contact the peak in your local state or territory (details on the back).

THE NATIONAL NEWSLETTER FOR THE IMPROVED SERVICES INITIATIVE

WELCOME – TASSIE CONFERENCE PROVIDES OPPORTUNITY TO MEET FACE TO FACE

All peak bodies, with the exception of VAADA, were represented at a meeting that was held in Hobart on 15 April 2010. As the group usually meets by tele-conference it was a good opportunity to get to know each other better and to more effectively discuss issues face-to-face. Kim McLachlan from the Department of Health and Ageing in Canberra also attended the meeting and three of the Tasmanian Improved Services Initiative Project Officers visited the meeting to talk about their projects.



Pictured from the left: Maree Stallard (WANADA - WA), June Templer (ATDC - Tas), Robert Stirling (NADA - NSW), Sarah Morrison (NADA - NSW), Hannah Graham (Salvation Army - Hobart), Angela Corry (WANADA - WA), Margi O'Connell-Hood (QNADA - QLD), Carrie Fowlie (Youth Coalition of the ACT), Michelle Fay (The Link - Hobart), Barry White (NTCOSS - NT), Rosie Way (SANDAS - SA), Amanda Bode (Youth Coalition of the ACT), Andrew Biven (SANDAS - SA), Janine O'Neill (Holyoake - Hobart), Kim McLachlan (DoHA - Canberra)

**IMPROVED SERVICES INITIATIVE
PARTNERSHIP ON CONSUMER, CARER & FAMILY PARTICIPATION
Perth Metropolitan Non-Residential & Family AOD Services Consortium (PMNRF)
&
Mental Illness Fellowship of WA (MIFWA)**

The Perth Metropolitan Non Residential & Family Alcohol and Other Drug Services Consortium, also known as PMNRF, consists of 9 NGO Agencies, funded under the ISI, with Palmerston Association the Lead Agency. The Mental Illness Fellowship of WA (MIFWA) is one of WA's leading organisation's providing advice and support for West Australians with a mental illness, as well as their families and friends.

In August 2009, PMNRF agreed to work on a 12 month partnership with MIFWA with the aim of enhancing knowledge and skills around comorbid family, carer and consumer participation in NGO AOD services. Initiatives included:

- A Consumer and Carers Forum held in March 2010. A broad range of issues were raised including: effects on children, prescribed drugs, limited access to mental health services, support for families, education for Indigenous youth, rehabilitation, and aftercare services.
- MIFWA provided clients of PMNRF Consortium members access to the Wellways DUO program. The Program is a support and information program for carers, families and friends of people with mental illness and co-existing substance use.
- Strengths Based Training was provided to PMNRF Consortium members from consultant Jacqui Wharton. Jacqui, a successful author and bipolar survivor, delivered the training combining knowledge gained through a recovery journey spanning seven years and specialist training she received from the University of Kansas, School of Social Welfare. Using practical exercises, reinforced by Jacqui's personal story, the six key principles of Charles Rapp's Strengths Approach to psychiatric case management were demonstrated.

The PMNRF / MIFWA partnership has proven extremely successful in enhancing knowledge and skills around comorbid family, carer and consumer participation in NGO AOD services and has improved partnerships and linkages amongst participating mental health and drug and alcohol services.

For further information please contact wshannon@palmerston.org.au



IT Futures – A innovative way to connect and empower

'IT Futures' is an exciting and innovative computer based project utilising modern technology to provide a wealth of information to our clients who are often marginalised and disadvantaged, lacking in computer access and skills and consequently a range of opportunities to better their life circumstances.

In 2006, the Towards Independence Network made a commitment to improving people's lives by sharing the advances in information technology with its program participants. Since that time the 'IT Futures' concept has grown and flourished. All 13 units at our Supported Accommodation and 'Recovery' Services (Dawkins Place) and 24 rooms at our Supported Accommodation and 'Recovery' Services (Gilbert St) have been fitted with Pentium 4 computers running Microsoft Office software enabling our residents to utilise programs such as Word to write letters, keep a journal, simply jot down their thoughts and ideas or develop a resume. These computers are linked to a server giving access to the 'IT Futures' intranet database connecting clients to a variety of important files and valuable internet websites including interactive self help packages such as the MoodGym and BluePages. Our Improved Services Initiative project has assisted us to ensure that web-based access to mental health information and interactive programs receives as much attention as access to drug and alcohol information.



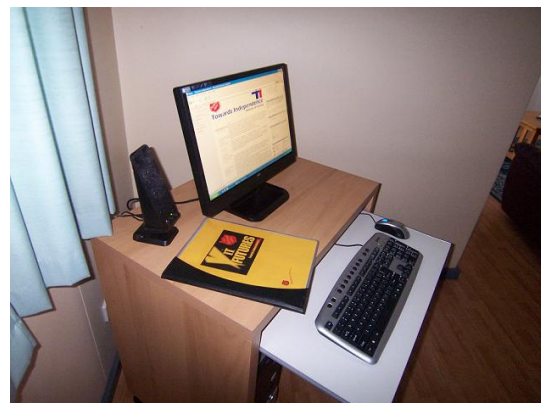
The 'IT Futures' client feedback since inception has been overwhelmingly of a positive nature and includes comments such as:

"I found it extremely useful. I used it to practice my learners permit...I now do word processing but when I first came here I couldn't even turn it on. It's opened a whole new world for me. I got my volunteer work at the Adelaide gaol through it"

Tony (June 2009)

"I think it's really excellent. I use the MoodGym, it's very helpful, and it's an excellent programme. The emails keep me in contact with my family".

Steven (May 2009)



For more information about this project please contact Daniela Musolino
via email: Daniela.Musolino@aus.salvationarmy.org

It was with great enthusiasm to our CEOs request "Would you mind attending a conference that we are hosting, the day after you start" I said "absolutely, not a problem" – thinking great what an introduction. Of course a fair amount of trepidation followed at breakfast when Alison Bell, train the trainer extraordinaire, embarked on a conversation referring to appropriate evaluation methodology for the two day training sessions.

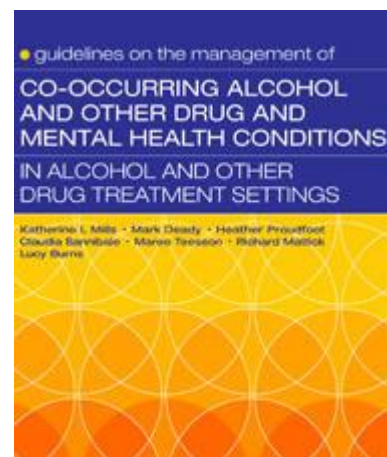
And so began an introduction to the Improved Services Initiative.....

The networks' members identified the need for training amongst Queensland's five key regions to disseminate the [Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings](#) (herein referred to the Guidelines), with particular emphasis on providing team leaders, clinical educators and other suitably qualified members with a package to deliver training on the guidelines to members of their organisations.

The participants were from a broad spectrum including 15 AOD workers from 13 organisations representing services in Cape York, Cairns, Atherton Tablelands, Sunshine Coast, the Brisbane region and Gold Coast. Two youth services and one Indigenous organisation, two representatives from the Department of Health and Ageing and one representative from Queensland Health were in attendance.

Outcomes

1. The Network (QNADA), in collaboration with Improved Services Advisory Body (funded services), develop a calendar of training and events – Under the revised structure the Improved Services Advisory Body has key decision making capacity within the scope of the project as identified by DoHA.
2. Initiate an online support system disseminating information and advice.
3. Initiate and set up a generic contact number to ensure access to information and advice by all regions can be achieved at the cost of a local phone call.
4. The Network plays a key role in ensuring that activities - both training and information dissemination - are targeted and developed in collaboration with key stake holders. The information will be collaborated and form the basis of a needs analysis to identify training opportunities and linkages under the Improved Services Initiative.



Your place or mine?

When Western Region Alcohol and Drug Service (WRAD) received the Improved Services Initiative funding, we had many of the vital elements of the project already in place. The process was driven by our Quality Assurance and Clinical teams.

We had moved our way forward using pennies as propellant stealing time from other programs to create our own direction. We needed to cuddle up to Psychiatric services and they responded to our advances with such enthusiasm that a marriage of the minds was ensured.

We set up a mental health clinic within our agency and Psychiatric services kindly allowed WRAD the use of a psychiatric registrar and Dr Jim Blackett also gave freely of his time and expertise. As with all projects we first had to evaluate what we were currently doing against the strategic direction guidelines:

- Identify our strengths and enhance them.
- Confront our weaknesses and plan how to address them.
- Devise systems to deliver better service outcomes.
- Design a method for collecting data that measured outcomes and detailed effort.
- Accept that service systems may differ, but within those differences lay opportunities, not obstacles.

This project has enabled the alcohol and drug service to

clearly articulate what it is like to provide service to Dual Diagnosis clients when the big D is the client's addiction. To achieve these aims we employed a Comorbidity Worker. We needed a lady with a fresh set of eyes; someone untainted by inter-service politics and preconceived misconceptions. So naturally we looked to Alaska and employed Maya Raschel. We also employed Dr. Margret Skene. Margret engineered thoughts and hopes into realities and it has been through her efforts that WRADDIS emerged.

WRADDIS is more than a Data Base, it's a template for service delivery, a clinical resource an outcome measure and it is still a baby. David Crosbie from the Mental Health Council provided the initial funding for WRADDIS. Psychiatric Services kindly placed with our service a fulltime worker, James Smith to help develop the screening and referral process. James Smith has become a valuable resource for both agencies.

We have worked hard to involve client and carer participation in this project and these efforts are just starting to reap benefits. We have done much more and this project has many hidden benefits that will ensure better service outcomes into the future. It depicts what can be achieved between agencies when there is a common vision, allocated

resources and commitment to quality care.

Good will enhanced professional courtesy and confidence in the appropriateness of referrals will live on in practice far beyond this project. Screening in both agencies will continue to be an expectation and essential in targeting treatment and indications for referral. WRADDIS will survive and in time with a little nurturing develop into a tool of worth to more agencies than just those of the South West. The project has developed a new level of trust between services in the South West. In an era when collaboration is seen as essential to compete, but where competition sometimes stifles collaboration, trust has grown.

I now trust everybody but I always cut the cards.

Daryl Fitzgibbon
DarylF@wrad.org.au
<http://www.wrad.org.au/>



Yarning about Mental Health

NADA hosted two day training workshops on Aboriginal Mental Health in April and May. The *Australian Integrated Mental Health Initiative (AIMHI)* Cultural Security workshops* were facilitated by the Healing and Resilience Division of the Menzies School of Health Research, Northern Territory.

The objectives of the AIMHI training is to improve knowledge about Aboriginal mental health, to support partnerships with clients, carers and staff, to improve communication with Aboriginal clients and families, and to increase confidence in assessment and treatment of clients. Over the two AIMHI workshops, a diverse range of non government drug and alcohol organisations, mental health organisations, Justice Health and Greater Western Area Health Service were represented.

Feedback gathered from participants indicated that the training was extremely valuable and many are excited and looking forward to using the resources and skills learnt in their work practices.

“I found the AIMHI training invaluable as it covered so much content in a palatable way. I felt that it was enjoyably and respectfully facilitated by the trainers. It catered to the diverse group of people and their differing levels of expertise working with Aboriginal clients with mental health issues.”

A broad range of multimedia resources (information sheets, flip charts, animated videos) and activities (role play and skills practice) are used as part of the AIMHI approach. The *Yarning about Mental Health Resource Pack*, containing

practical tools and information for the workplace, was provided to each of the participants. One of the participants indicated that using the AIMHI tools (forms and flip charts) has already had a significant impact on engaging and accurately recording client information which is working towards bridging some cultural differences.



For more information about the AIMHI project visit the Menzies School of Health Research website www.menzies.edu.au/AIMHI



**The Australian Integrated Mental Health Initiative in the Northern Territory (AIMHI) was a 5 year action research project that engaged with managers, service providers, Aboriginal Mental Health Workers and communities. The project has established base line measures, explored understandings of mental health from the community perspective, developed service based strategies for improved cross cultural assessment, conducted the first Indigenous mental health clinical trial of a new brief psychotherapy, and developed a range of resources linked with a training program, for service providers and the community.*

Ted Noffs - Capacity Building Project

The Ted Noffs Foundation is coming into the final stages of the Improved Services Initiative (ISI) capacity building project. It has been an extremely positive experience for Ted Noffs. Noffs runs four adolescent rehabilitation services, a withdrawal unit, several out client settings and day programs and the Street University. The three main areas that Noffs has concentrated on are;

1. *Strengthening the overall screening, assessment and treatment of young people with co-morbid issues*

Prior to starting this project Noffs was already screening for mental health issues as a part of its comprehensive assessment process using the Brief Symptom Inventory. Through this project, Noffs bolstered up this process ensuring the current instruments were still valid. In addition we added The Beck Youth Inventory Tool and aspects of Psycheck. This has enabled Noffs to not only effectively screen for mental health issues but to monitor them throughout the treatment phase.

Coupled with this we have introduced treatment plans to complement the case management plans. This has enabled the counsellors to treat the comorbid conditions in a structured and complimentary manner.

2. *Training and upskilling the workforce*

Noffs has always had its own training division and with the start of the comorbidity project we were able to restructure this training to ensure that all training dealt with comorbid issues, new training was introduced and all staff were targeted in the training process. The benefit here is that staff are confident and skilled in effectively dealing with most comorbid issues. The especially pleasing aspect here is that the Alcohol and Other Drug Workers (residential care workers) have dramatically had their roles upgraded to ensure they are an integral part of the treatment process. This has had a flow on effect to the increased job satisfaction of AODW's, better management of the young people and increased retention.

3. *Information Sharing*

As Part of the Project Noffs designed and built its own Online Client Management System (Ted). Ted opened up the sharing of information to all branches of the organisation, defined the process of screening, assessment and treatment, provides reports and doubles as a database for research purposes. In relation to the first two areas TED brings the whole project together giving clarity and understanding to Noffs Treatment processes.

Overall the Improved Services Initiative has brought an increased capacity and clarity to our treatment of young people with comorbid issues.

Contact Details

Mark Ferry, Program Manager

ferrym@noffs.org.au

www.noffs.org.au



The screenshot shows the 'Episode Details' window in the Ted Noffs Online Client Management System. The interface is organized into several sections:

- Client Assessment:** A grid of buttons for various assessment and treatment plans, including Pre-Treatment Assessment, Assessment Summary, Vocation Education Plan, Satisfaction Part C, AOD Treatment Plan, M/H Treatment Plan, Support Services, Discharge Summary, Follow-Up Part D, and Screening.
- Table:** A table with columns for Stage, Site/Section, Start Date, End Date, AFC, Outcome, and Days Away. It contains four rows of data for Screening, Assessment, Program, and Aftercare, with dates set to 31/07/2009 and AFC listed as Mark Ferry.
- Client Records:** A grid of buttons for various records, including Medication Record, Program Health Record, Medical Record, Action Plan, Exit Plan, Weekly Check List, Telephone Contact List, Behaviour Incident Record, and Urinalysis/Breathalyser Results.
- Buttons:** 'Save' and 'Previous' buttons are located at the bottom right of the window.

Responding to comorbidity requires a multidisciplinary response

Comorbidity Interagency Day

It is rarely the case that people present at a service with an isolated single issue, but rather, they present with a range of issues that require complex and effective multi disciplinary responses. In acknowledgement of the breadth of services that are responding to comorbidity, CatholicCare Canberra and Goulbourn coordinates an annual Comorbidity Interagency Day.

The interagency day has grown to be a major activity of the calendar each year.

The Improved Services Initiative funding has supported an increased capacity within ACT AOD services to support clients experiencing comorbidity, as well as engage with allied mental health services. However, this increased focus has also highlighted the extent to which people experiencing comorbidity may also be experiencing other issues, and may require engagement of additional allied services such as housing and homelessness, youth, Aboriginal and Torres Strait Islander etc.

In the ACT, we have a number of AOD services that are providing a high level of support for people experiencing comorbidity; and it is important that opportunities for discussion of integrated care are fostered.

Over 160 people from 53 agencies attended the day, demonstrating the degree to which many sectors recognise comorbidity as a priority for service delivery in the ACT. It also highlights the importance of providing opportunities to share knowledge and coordinate services to benefit consumers who require a variability of support and treatment needs.

The logo for ACT (Alcohol Tobacco & Other Drug Association ACT) is displayed in a purple rectangular box with a blue border.

The interagency day allowed workers and services to:

- exchange information, ideas and contacts;
- increase contact and relationships between workers and services; and
- facilitate discussion related to shared treatment and planning across a range of agencies.

As we all know, the service system can be hard to navigate at the best of times, meaning that it is crucial that services take the lead to support clients to link with required services as smoothly as possible. Initial engagement with services support further discussions of the development of more formal links including referral pathways and collaboration to support clients.

In 2010, ACT Grant Recipients will be focusing on embedding the outcomes to date and identifying opportunities to sustain momentum beyond the completion of the ISI projects.

CatholicCare Canberra & Goulburn in partnership with the ACT AOD Sector Project and other ACT Improved Services Grant Recipients. For more information about activities happening in the ACT contact Amanda Bode, Comorbidity Project Officer on amanda@atoda.org.au or (02) 6255 4070.



ATDC Conference

Registration is now open for the Alcohol, Tobacco and Other Drugs Council's national conference - **ATDC 2010: Reducing Harm across the Lifespan** to be held in Hobart from 18 – 20 October 2010.

The conference will deliver:

- A comprehensive program covering ATOD issues across the lifespan including the latest research presented by leaders in the field
- A focus on both policy and practice ensuring delegates are able to apply the knowledge gained to their field of work
- An opportunity to network and share information with those in the ATOD sector

Key note speakers include:

Professor Steve Allsop, Dr Raimondo Bruno, Tom Calma, Paul Dillon, Dr Chris Doran, Dr Sarah Durkin, Professor Dennis Gray, Professor Ian Webster, Associate Professor Ted Wilkes, Dr Celia Wilkinson, Dr Alex Wodak .

To register or submit an abstract, go to the conference web page [here](#). For further information, contact Christine Murphy on (03) 6224 7780.



ATDC 2010
Reducing Harm across the Lifespan
18 – 20 October 2010 · West Point Convention Centre, Hobart

National ISI Forum 7 & 8 October 2010

A Tale of Two Systems: Alcohol and Other Drug and Mental Health Co-occurrence Adelaide, South Australia

The Forum is a joint initiative between the National Centre for Education and Training on Addiction (NCETA) and the State and Territory alcohol and other drug peaks or equivalents; with support from the Department of Health and Ageing. The forum will provide a unique opportunity for Improved Services Initiative (ISI) grant project recipients across Australia to come together to discuss common issues and future directions.

The forum will provide an opportunity for all recipients of the Improved Services Initiative funding to come together to:

- showcase examples of best practice in capacity building;
- hear from experts in the field;
- discuss the outcomes, success and challenges experienced;
- explore opportunities for sustainability.

VENUE: The Shores
Cnr. Hamra & Military Roads
West Beach, SA 5024
www.theshores.biz

FOR MORE INFORMATION

If you would like to know more about the Improved Services Initiative or any of the articles in this newsletter please contact your local representative:

ACT (ATODA) www.atoda.org.au

Amanda Bode Ph: (02) 6255 4070
Email: amanda@atoda.org.au

Carrie Fowlie Ph: (02) 6255 4070
Email: carrie@atoda.org.au

New South Wales (NADA) www.nada.org.au

Robert Stirling Ph: (02) 8113 1320
Email: robert@nada.org.au

Sarah Morrison Ph: (02) 8113 1308
Email: sarah@nada.org.au

Northern Territory (NTCOSS) www.ntcoss.org.au

Barry White Ph: (08) 8948 2665
Email: barry@ntcoss.org.au

Christine Barry Ph: 8948 4590
Email: chris@ntcoss.org.au

Queensland (QNADA) www.qnada.org.au

Lauren Trask Ph: (07) 3010 6500
Email: lauren.trask@qnada.org.au

South Australia (SANDAS) www.sandas.org.au

Andrew Biven Ph: (0) 8212 9020
Email: Andrew@sandas.org.au

Rosie Way Ph: (08) 8212 9020
Email: Rosie@sandas.org.au

Tasmania www.atcd.org.au

David Perez Ph: (03) 6224 7780
Email: davidp@atcd.org.au

Victoria (VAADA) www.comorbidity.org.au

Merissa van Setten Ph: (03) 9412 5608
Email: mvansetten@vaada.org.au

Edita Kennedy Ph: (03) 9412 5607
Email: ekennedy@vaada.org.au

Western Australia (WANADA) www.wanada.org.au

Angela Corry Ph: (08) 6365 6365
Email: angela.corry@wanada.org.au

Maree Stallard Ph: (08) 6365 6365
Email: maree.stallard@wanada.org.au

We appreciate your feedback on the newsletter. Please send comments to your state or territory representative (listed above).

CONFERENCES

The MHS Conference

20 years strong and now a renaissance, 14– 17 September, Sydney Convention Centre, Sydney

<http://www.themhs.org.au/>

Mental Wellbeing Conference 2010

Innovative Integration: Road map to mental wellbeing, 15-16 September, Sydney Convention Centre, Sydney

http://www.uws.edu.au/psychology/sop/mental_wellbeing_conference_2010

Public Health Association 40th Annual Conference

20-27 September, Adelaide Convention Centre, Adelaide

<http://www.phaa.net.au/40thPHAAAnnualConference.php>

2nd Australian Rural and Remote Mental Health Symposium

29-30 September, Novotel Sydney Brighton Beach, Sydney

<http://www.anzmf.asn.au/rmh10/>

National ISI Forum 2010

Thursday 7 & Friday 8 October 2010 The Shores Cnr. Hamra & Military Rd West Beach, SA 5024 www.theshores.biz

National Drug and Alcohol Research Centre (NDARC) National Drug Trends Conference

15 October, Powerhouse Museum, Ultimo, NSW

<http://ndarc.med.unsw.edu.au/NDARCWeb.nsf/page/Conference>

ANEX 2010 Australian Drugs Conference

Public Health and Harm Reduction, 25-26 October, Melbourne Cricket ground, Melbourne.

<http://www.australiandrugsconference.org.au>

Emerging Health Policy Research Conference 2010

11 August, Darlington Centre, University of Sydney

For more information, click [here](#).

11th International Mental Health Conference – Anxiety and Depression

18 – 20 August, Surfers Paradise, QLD

[Click here](#) to download the conference program.

Creating Futures 2010 – Harnessing creativity and social enterprise for mental health and wellbeing

20-23 September, Cairns, Far North Queensland

For more information, [click here](#).

Creating Synergy Conference: SIDE BY SIDE: Family Inclusive Approach

3-5 November, Wollongong, NSW

Australasian Professional Society on Alcohol & other Drugs (APSAD) Conference

28 Nov-1 Dec 2010, Canberra, ACT