



# Country WA PHN Activity Work Plan

## Drug and Alcohol Treatment Services

**Summary View  
2022/2023 – 2025/26**

**Presented to the Australian Government Department of  
Health and Aged Care**

## Contents

AOD 1100 – Specialist treatment (Core).....	3
AOD-ATSI 1200 – Specialist Treatment in Areas of High Need (Aboriginal) NIAS)....	5
AOD 1001 – Drug and Alcohol Treatment Services Maintenance Measure .....	8
AOD 1200 – Specialist Treatment in Areas of High Need (Mainstream) (NIAS) .....	9
AOD 2000 – Workforce Development for Health Professionals (Mainstream) .....	12
AOD-ATSI 2000 - Workforce Development for Health Professionals (Aboriginal) ....	15

## **AOD 1100 – Specialist treatment (Core)**

### **Activity Title**

Specialist Treatment (Core)

### **Activity Number**

1100

### **Existing, Modified or New Activity**

Modified

### **PHN Program Key Priority Area**

Alcohol and other Drugs

---

### **Aim of Activity**

To increase the availability of evidence-based drug and alcohol treatment services for individuals, their families/significant others and communities experiencing harm from alcohol and drug use.

To facilitate support for individuals with co-morbid mental, physical health and substance use issues.

To continue to build links across the broader treatment sector including with primary health care providers and mental health services.

---

### **Description of Activity**

The Primary Health Network (PHN) will continue to focus on the management of the performance of the contracted provider/s including reviewing, monitoring and evaluating service provision; taking into account the requirements of the Australian Government Department of Health's PHN Program Performance and Quality Framework to determine how well targeted and efficient services are delivered; and taking into account the requirements of the National Treatment Framework and National Quality Framework for Alcohol and Other Drugs.

Using the new WA Primary Health Alliance Performance Management Framework (PMF), the PHN will measure and monitor provider's performance against specified PMF indicators relating to health equity, patient-reported experiences, patient-reported outcomes and service cost effectiveness. This data will be used by the PHN to evaluate the performance of services and inform any necessary actions.

Service providers are expected to work collaboratively with others in the region

to help facilitate system integration and actively seek to engage with primary care to improve patient health outcomes.

---

## Country WA PHN Needs Assessment

<b>Priorities</b>	<b>Page reference</b>
Improve access to screening and AOD treatment services.	15
Improve access to coordinated culturally appropriate primary care for Aboriginal people.	17, 46, 92
Increase access to early intervention and AOD management services including family supports.	15

---

## Coverage

Country WA PHN region

---

## Activity Start Date

1 July 2019

---

## Activity End Date

30 June 2024

---

## Activity Planned Expenditure

<b>Funding Stream</b>	<b>FY 22 23</b>	<b>FY 23 24</b>	<b>FY 24 25</b>
Core Drug and Alcohol	\$968,888.74	\$878,846.22	\$0.00
<b>Total</b>	<b>\$968,888.74</b>	<b>\$878,846.22</b>	<b>\$0.00</b>

# AOD-ATSI 1200 – Specialist Treatment in Areas of High Need (Aboriginal) (NIAS)

## Activity Title

Specialist Treatment in Areas of High Need (Aboriginal) (NIAS)

## Activity Number

1200

## Existing, Modified or New Activity

Modified

## PHN Program Key Priority Area

Alcohol and other Drugs

---

## Aim of Activity

To increase access to targeted and culturally appropriate approaches to alcohol and other drug treatment for Aboriginal and Torres Strait Islander people.

---

## Description of Activity

Culturally competent and accredited drug and alcohol specialist service providers will continue to be contracted to deliver direct alcohol and drug treatment activity.

Activities will be adjusted where necessary to ensure they align with local need, leverage other existing services, and avoid duplication.

Wherever possible, activities will be focused on intervening earlier, supporting those with mild to moderate alcohol and drug issues, addressing co-morbid mental and physical health issues and preventing relapse.

Treatment will be undertaken by suitably qualified and experienced staff from community-based facilities, via outreach or through the use of technology as appropriate.

Concurrent to this activity, WAPHA has committed to the development of a Cultural Competency Framework and an Aboriginal Cultural Capability Framework, which encompasses cultural awareness, cultural competency and cultural safety. These frameworks will facilitate opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and support programs. The frameworks will assist the PHN to reflect on current practice, identify areas that will improve cultural safety for communities, and develop cultural competence in internal staff and external stakeholders including commissioned services, resulting in better health and

wellbeing outcomes for Aboriginal, CALD and LGBTQIA+ communities.

The Primary Health Network (PHN) will continue to focus on the management of the performance of the contracted provider/s including reviewing, monitoring, and evaluating service provision; taking into account the requirements of the Australian Government Department of Health’s PHN Program Performance and Quality Framework to determine how well targeted and efficient services are delivered; and taking into account the requirements of the National Treatment Framework and National Quality Framework for Alcohol and Other Drugs. It will also be an incorporated requirement of the provider to complete all data reporting via the alcohol and other drug treatment services national minimum data set.

In addition, using the new WA Primary Health Alliance Performance Management Framework (PMF), the PHN will measure and monitor providers performance against specified PMF indicators relating to health equity, patient-reported experiences, patient-reported outcomes and service cost effectiveness. This data will be used by the PHN to evaluate the performance of services and inform any necessary actions.

Service providers are expected to work collaboratively with others in the region to help facilitate system integration and actively seek to improve engagement with primary care to improve patient health outcomes.

---

## Country WA PHN Needs Assessment

<b>Priorities</b>	<b>Page reference</b>
Improve access to screening and AOD treatment services.	15, 46, 60
Improve access to coordinated culturally appropriate primary care for Aboriginal people.	15, 46, 92
Increase access to early intervention and AOD management services including family supports.	71

---

## Indigenous Specific Comments

As well as consumer and service provider feedback, the PHN continues to engage with Aboriginal community-controlled organisations, the state Aboriginal community-controlled organisation peak body and other key stakeholders including state government and Area Health Services.

## Coverage

Country WA PHN region

### Activity Start Date

1 July 2019

### Activity End Date

30 June 2024

### Activity Planned Expenditure

<b>Funding Stream</b>	<b>FY 22 23</b>	<b>FY 23 24</b>	<b>FY 24 25</b>
NIAS Aboriginal and Torres Strait Islander People	\$2,215,850.76	\$2,249,667.35	\$0.00
<b>Total</b>	<b>\$2,215,850.76</b>	<b>\$2,249,667.35</b>	<b>\$0.00</b>

# AOD 1001 – Drug and Alcohol Treatment Services Maintenance Measure

## Activity Title

Drug and Alcohol Treatment service Maintenance Measure (DATSM)

## Activity Number

1001

## Existing, Modified or New Activity

Modified

## PHN Program Key Priority Area

Alcohol and other Drugs

## Aim of Activity

The Drug and Alcohol Treatment Services Maintenance Measure is funding made available by the Department of Health and Aged Care to replace funding previously provided through the Social and Community Services (SACS) Wages Supplementation payments to Alcohol and other Drugs service providers.

## Description of Activity

DATSM provides funding to replace the SACS supplement payments which ceased on 30 June 2021. AOD Service providers that were eligible for SACS on 30 June 2021, as commissioned by the PHN, will continue to be eligible for DATSM until 30 June 2023.

## Coverage

Country WA PHN region

## Activity Start Date

31 Mar 2022

## Activity End Date

30 June 2023

## Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
DATSM	\$210,874.69	\$0.00	\$0.00
<b>Total</b>	<b>\$210,874.69</b>	<b>\$0.00</b>	<b>\$0.00</b>



## **AOD 1200 – Specialist Treatment in Areas of High Need (Mainstream) (NIAS)**

### **Activity Title**

Specialist Treatment in Areas of High Need (Mainstream) (NIAS)

### **Activity Number**

1200

### **Existing, Modified or New Activity**

Modified

### **PHN Program Key Priority Area**

Alcohol and other Drugs

---

### **Aim of Activity**

To increase the availability of evidence based, culturally appropriate drug and alcohol treatment services for individuals, their families and communities experiencing harm from alcohol and drug use.

To facilitate support for individuals with co-morbid mental and/or physical health and substance use issues.

To continue to build links across the broader treatment sector including with primary health care providers and mental health services.

---

### **Description of Activity**

Accredited drug and alcohol specialist service providers will continue to be contracted to deliver direct alcohol and drug treatment activity.

Activities will be adjusted where necessary to ensure they are in scope, align with local need, leverage other existing services, and avoid duplication. Wherever possible, treatment activities will be focused on intervening earlier, supporting those with mild to moderate alcohol and drug issues, addressing co-morbid mental and physical health issues, and preventing relapse. Treatment will be undertaken by suitably qualified and experienced staff from community-based facilities, via outreach, or through the use of technology (telephone or video conferencing) as appropriate.

Service providers are expected to work collaboratively with others in the region to help facilitate integration and improve health outcomes, and actively seek to

improve engagement with primary care.

The PHN will focus on the management of the performance of the contracted provider/s including reviewing, monitoring and evaluating service provision; taking into account the requirements of the Australian Government Department of Health’s PHN Program Performance and Quality Framework to determine how well targeted and efficient services are delivered; and taking into account the requirements of the national treatment framework and national quality framework for alcohol and other drugs. It will also be an incorporated requirement of the provider to complete all data reporting via the alcohol and other drug treatment services national minimum data set.

Using the new WA Primary Health Alliance Performance Management Framework (PMF), the PHN will measure and track providers’ performance against specified PMF indicators, which include indicators relating to health equity, patient-reported experiences, patient-reported outcomes and service cost effectiveness. This data will be used by the PHN to evaluate the performance of services and inform any necessary actions.

---

## Country WA PHN Needs Assessment

Priorities	Page reference
Improve access to screening and AOD treatment services.	15, 46, 60

---

## Target Population Cohort

Individuals, their families and communities experiencing harm from alcohol and drug use.

---

## Coverage

Country WA PHN region

---

## In Scope AOD Treatment Type

Counselling

Early intervention/Brief Intervention

Withdrawal management

Aftercare/relapse prevention

Case management, care planning and coordination

---

## Consultation

The PHN continues to engage with stakeholders to understand complexities and gaps, identify what is needed to develop seamless care pathways, and work across the care continuum to improve health outcomes. Stakeholders include peak bodies representing consumers, families and carers; primary care; Aboriginal Community Controlled Health Services and Organisations; health, welfare and community service providers; State government agencies and health service providers.

## Collaboration

The PHN will continue to collaborate with the WA Mental Health Commission through its formal partnership arrangement to coordinate planning and commissioning of alcohol and other drug treatment services. The PHN will work closely with the WA Network of Alcohol and other Drug Agencies to support development and quality improvement of the alcohol and other drug services sector.

### Activity Start Date

1 July 2019

### Activity End Date

30 June 2024

## Activity Planned Expenditure

<b>Funding Stream</b>	<b>FY 22 23</b>	<b>FY 23 24</b>	<b>FY 24 25</b>
NIAS Aboriginal and Torres Strait Islander People	\$1,137,293.81	\$1,212,538.22	\$0.00
<b>Total</b>	<b>\$1,137,293.81</b>	<b>\$1,212,538.22</b>	<b>\$0.00</b>

# AOD 2000 – Workforce Development for Health Professionals (Mainstream)

## Activity Title

Workforce Development for Health Professionals (Mainstream)

## Activity Number

2000

## Existing, Modified or New Activity

Modified

## PHN Program Key Priority Area

Alcohol and other Drugs

---

## Aim of Activity

To increase the supply, knowledge, skills, capability and confidence of the generalist and specialist health workforce to:

- Recognise and respond to alcohol and drug (AOD) use issues.
- Increase the appropriateness of referrals to drug and alcohol specialist service providers.
- Increase uptake of screening, brief intervention, and management of people with alcohol and drug issues within a primary care setting.
- Grow and develop the AOD workforce to manage complexity, multi morbidity and demand for services.
- Deliver quality services that are culturally safe.
- Reduce stigma associated with AOD use and enhance opportunities for treatment in a primary health care setting.

---

## Description of Activity

Working with health professionals', activities will include:

- Increasing the number of suitably accredited organisations.
- Awareness raising of available specialist treatment services, improving effectiveness of referral pathways by engaging with local experts, encouraging development of multi-disciplinary relationships, and promoting utilisation of HealthPathways, Practice Assist and MyHealthRecord.
- Provision of information on appropriate use of language to reduce stigma and the discrimination of people who experience harm from alcohol and/or other drug use, encouraging the engagement of consumers and significant others in service design and recognising problematic alcohol and drug use as a health issue.

- Raising awareness and support for the provision of holistic, person-centered care that responds to multi-morbidity including mental health issues and physical health conditions.
- Facilitating opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and maintenance of appropriate accreditation. This activity will be supported with the development of a Cultural Competency Framework and an Aboriginal Cultural Capability Framework, currently under development by WA Primary Health Alliance. These frameworks will facilitate opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and support programs. The frameworks will assist the PHN to reflect on current practice, identify areas that will improve cultural safety for communities, and develop cultural competence in internal staff and external stakeholders including commissioned services, resulting in better health and wellbeing outcomes for Aboriginal, CALD and LGBTQIA+ communities.

---

## Country WA PHN Needs Assessment

Priorities	Page reference
Increase access to early intervention and AOD management services including family supports.	71
Improve coordinated and integrated care for people experiencing complex and severe mental health who can be managed within primary care settings.	18
Improve access to screening and AOD treatment services.	15

---

## Coverage

Country WA PHN region

---

## Consultation

The PHN engages with peak bodies, commissioned service providers, consumer/community representatives, subject matter experts, tertiary and vocational institutions, primary health care professionals and other key stakeholders to inform the planning, design, monitoring and review of workforce development activities.

## Collaboration

The PHN works collaboratively with the WA Mental Health Commission, WA Network of Alcohol and other Drug Agencies, Aboriginal Health Council of WA, Royal Australian College of General Practitioners, Australian College of Rural and Remote Medicine and other key stakeholders in the planning, development, commissioning and delivery of activities to grow and support a primary health care workforce that is equipped to recognise and respond to alcohol and other drug use and related harm.

---

### Activity Start Date

1 July 2019

### Activity End Date

30 June 2023

---

## Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
NIAS Operational and Mainstream	\$259,054.73	\$0.00	\$0.00
<b>Total</b>	<b>\$259,054.73</b>	<b>\$0.00</b>	<b>\$0.00</b>

# AOD-ATSI 2000 - Workforce Development for Health Professionals (Aboriginal)

## Activity Title

Workforce Development for Health Professionals (Aboriginal)

## Activity Number

2000

## Existing, Modified or New Activity

Modified

## PHN Program Key Priority Area

Alcohol and other Drugs

---

## Aim of Activity

To increase the supply, skills, capability and confidence of the generalist and specialist health workforce to effectively recognise and respond to problematic alcohol and drug use among Aboriginal people.

This will be achieved by:

- Increasing the number of suitably accredited organisations.
- Increasing the appropriateness of referrals to drug and alcohol specialist service providers.
- Increasing the uptake of screening, brief intervention, and culturally appropriate management of Aboriginal people with alcohol and drug issues within a primary care setting.
- Improving the cultural competence and capability of organisations delivering services to Aboriginal people.

---

## Description of Activity

To achieve program objectives, the following activities will occur:

- Promoting and supporting the provision of evidence-informed and culturally secure education and training resources designed to support health care professionals to provide culturally appropriate alcohol and drug treatment and support services for Aboriginal people.
- Increasing awareness of available specialist treatment services and improving effectiveness of referral pathways by engaging with local experts, encouraging development of multi-disciplinary relationships, and promoting utilisation of HealthPathways, Practice Assist and MyHealthRecord.
- Support education and training activities which promote practices to

provide information on appropriate use of language, reducing stigma and the discrimination of Aboriginal and Torres Strait Islander people who experience harm from alcohol and other drug use, encouraging the engagement of consumers and significant others in service design and recognising problematic alcohol and drug use as a health issue and one that requires a holistic, person-centered response.

- Facilitate opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and support to achieve appropriate accreditation.
- Providing access to specialist advice, training and support to assist Aboriginal organisations prepare for, and obtain suitable accreditation to deliver alcohol and other drug treatment services in line with the National Quality Framework.
- Supporting initiatives to develop Aboriginal workers through professional training, leadership opportunities, mentorships and supervision.

Concurrent to this activity, WAPHA has committed to the development of a Cultural Competency Framework and an Aboriginal Cultural Capability Framework, which encompasses cultural awareness, cultural competency and cultural safety. These frameworks will facilitate opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and support programs. The frameworks will assist the PHN to reflect on current practice, identify areas that will improve cultural safety for communities, and develop cultural competence in internal staff and external stakeholders including commissioned services, resulting in better health and wellbeing outcomes for Aboriginal, CALD and LGBTQIA+ communities.

---

## Country WA PHN Needs Assessment

<b>Priorities</b>	<b>Page reference</b>
Promote integration and coordinated care pathways for clients with mental health condition and harmful alcohol and other drug use.	27
Promote integration and coordinated care pathways for clients with mental health condition and harmful alcohol and other drug use.	27
Support Aboriginal people to navigate the primary care system and access appropriate services.	34

---

## Indigenous Specific comments

As well as consumer and service provider feedback, the PHN continues to



engage with Aboriginal community-controlled organisations, the state Aboriginal community-controlled organisation peak body and other key stakeholders including state government and health service providers.

---

## Coverage

Country WA PHN region

---

## Consultation

The PHN engages with peak bodies, commissioned service providers, consumer/community representatives, subject matter experts, tertiary and vocational institutions, primary health care professionals and other key stakeholders to inform the planning, design, monitoring and review of workforce development activities.

---

## Collaboration

The PHN works collaboratively with the WA Mental Health Commission, WA Network of Alcohol and other Drug Agencies, Aboriginal Health Council of WA, Royal Australian College of General Practitioners, Australian College of Rural and Remote Medicine and other key stakeholders in the planning, development, commissioning and delivery of activities to grow and support a primary health care workforce that is equipped to recognise and respond to alcohol and other drug use and related harm.

---

## Activity Start Date

1 July 2019

## Activity End Date

30 June 2024

---

## Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
NIAS Aboriginal and Torres Strait Islander People	\$50,501.06	\$225,411.78	\$0.00
<b>Total</b>	<b>\$50,501.06</b>	<b>\$225,411.78</b>	<b>\$0.00</b>

END

---