

North Western Melbourne - Drug and Alcohol Treatment Services

2019/20 - 2022/23

Activity Summary View



[AOD - 1 - AOD 1: Workforce development and capacity building]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

1

Activity Title *

AOD 1: Workforce development and capacity building

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

It is critical for NWMPHN to support integration and improve capacity of services to respond to the needs of priority populations across north west Melbourne. This activity aims to achieve this by ensuring:

1. General Practice and allied health care providers are better equipped to respond to AOD related issues amongst patients;
2. Specialist AOD workforce have enhanced capacity to respond to priority populations;
3. General Practice, AOD and allied health providers are delivering integrated services; and
4. Consumers/patients are receiving integrated services from skilled and knowledgeable practitioners.

Description of Activity *

The commissioning of a range of workforce development and capacity building initiatives to:

- Support General Practitioners (GPs) in the delivery of integrated primary care responses for people experiencing harms related to AOD use. Examples of this is support provided for the implementation of the new Victorian Real Time Prescription Monitoring system, safescript and promotion of RACGP and ACRRM developed education package and training grants. This work includes development of pathways for GPs to refer patients to specialist AOD services.

- Enhance AOD providers understanding of priority populations and ability to meet their needs, including support to develop models of care tailored for culturally diverse communities.
- Facilitate improved relationships between AOD providers, mental health services, GPs and allied health practitioners through cross sector networks and small group learning activities.

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: Digitally Enhanced Care Pathways, workforce development and quality improvement, health literacy, consumer participation and organisational governance and accountability.

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83



Activity Demographics

Target Population Cohort *

To maximise the impact of our work, work in this activity may be targeted to identified priority populations or geographical locations

Indigenous Specific *

No

Indigenous Specific Comments *

N/A

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
Darebin - South	20602
Essendon	20603
Melbourne City	20604
Yarra	20607
Darebin - North	20902
Keilor	21001
Macedon Ranges	21002
Moreland - North	21003
Sunbury	21004
Tullamarine - Broadmeadows	21005
Brimbank	21301
Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.

For this activity collaboration options include: Victorian Alcohol and Drug Association, Victorian Department of Health and Human Services, Royal Australian College of General Practitioners, Pharmaceutical Society of Australia, Victorian Aboriginal Community Controlled Health Organisation and Victorian Council Of Social Services.



Activity Milestone Details/Duration

Activity Start Date *

30 Mar 2019

Activity End Date *

29 Jun 2022

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: Yes

To engage key stakeholders in capacity building activities we are prioritising working with peak bodies that have the expertise in delivering services to a range of health and community service sectors, including but not limited to AOD, mental health and homelessness. Therefore, it is likely that some commissioned activity will be through direct negotiation.

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

No

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

NWMPHN continues to work collaboratively with service providers, our AOD Expert Advisory Group, PHN Clinical and Community Advisory Councils, and other key stakeholders to inform key areas of activity to be delivered. This is enhanced through our involvement with the Victorian PHN Alliance and efforts for reform through Victorian Department of Health and Human Services.



[AOD - 2 - AOD 2: Respond to the needs of identified priority populations]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

2

Activity Title *

AOD 2: Respond to the needs of identified priority populations

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

The NWMPHN Health Needs Assessment highlighted the need to adapt to needs of priority populations. NWMPHN will have a high focus on priority populations over the next three years with the aim to ensure:

1. Commissioned services are more responsive to needs of priority populations
2. People from priority populations have greater understanding of AOD and mental health issues and treatment services
3. Access by people from priority populations is increased

Description of Activity *

The commissioning of a range of services and strategies aimed at enhancing responses for priority populations including Aboriginal, Culturally And Linguistically Diverse, LGBTIQ, people with comorbid AOD and mental health concerns and people experiencing homelessness. This includes co-commissioning of culturally diverse family centred AOD program in collaboration with our Children and Families and Afterhours programs.

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: Digitally Enhanced Care Pathways, workforce development and quality improvement, health literacy and consumer participation, communications and marketing.

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83
Aboriginal Health	89
Chronic Conditions	90
Older Adults	91
Children and Families	91



Activity Demographics

Target Population Cohort *

To maximise the impact of our work, work in this activity may be targeted to identified priority populations or geographical locations.

Indigenous Specific *

No

Indigenous Specific Comments *

N/A

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
Darebin - South	20602
Essendon	20603
Melbourne City	20604
Yarra	20607
Darebin - North	20902
Keilor	21001
Macedon Ranges	21002
Moreland - North	21003
Sunbury	21004
Tullamarine - Broadmeadows	21005
Brimbank	21301
Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of commissioning including co-design to support positive consumer experience, with a particular focus on the inclusion of consumers that have a lived experience of the identified priority population groups.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.



Activity Milestone Details/Duration

Activity Start Date *

30 Mar 2019

Activity End Date *

29 Jun 2022

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : Yes

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

No

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

Yes

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

NWMPHN will undertake an evaluation of current service provider agreements against this activity.

Intentions to decommission any core funded AOD treatment services will be communicated with the Department of Health as required in the NWMPHN Deed of Variation.

Providers who may be decommissioned will be communicated with openly and supported to develop Performance Improvement Plans or Transition Plans as appropriate. Service providers will be given sufficient notice of any proposed approaches and supported where necessary.

Co-design or co-commissioning details *

NWMPHN continues to work collaboratively with service providers, our AOD Expert Advisory Group, PHN Clinical and Community Advisory Councils, and other key stakeholders to inform key areas of activity to be delivered. This is enhanced through our involvement with the Victorian PHN Alliance and efforts for reform through Victorian Department of Health and Human Services.



[AOD - 3 - AOD 3: Development of a Regional Mental Health and Suicide Prevention plan, including AOD.]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

3

Activity Title *

AOD 3: Development of a Regional Mental Health and Suicide Prevention plan, including AOD.

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

The aim of this activity is to develop a comprehensive consumer centred plan to support Primary Care and Allied Health providers to deliver more integrated AOD related responses for individuals, families and communities

Description of Activity *

Development of an evidence based regional mental health, suicide prevention and AOD plan, in collaboration with consumers and carers, service providers, Victorian Department of Health and Human Services and other key stakeholders.

A deliberative engagement methodology will be utilised to ensure data and evidence informs and supports participation of experts (including people as experts through experience) to develop a plan that identifies regional priorities and opportunities for improved integration and collaborative service development.

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83
Chronic Conditions	90



Activity Demographics

Target Population Cohort *

To maximise the impact of our work, work in this activity may be targeted to identified cohorts or geographical locations.

Indigenous Specific *

No

Indigenous Specific Comments *

N/A

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
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Sunbury	21004
Tullamarine - Broadmeadows	21005
Brimbank	21301
Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience. NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

For the regional plan activity there are two governance groups that inform design and oversee this work including a reference group that includes peak bodies (including consumers and carers) with expertise in mental health, suicide prevention and AOD and a Local Hospital Network (LHN) group. The LHN group includes hospitals with a mental health role in the NWMPHN catchment.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches



Activity Milestone Details/Duration

Activity Start Date *

27 Feb 2019

Activity End Date *

29 Jun 2020

Other Relevant Milestones

A foundation plan will be delivered to community in June 2020



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): Yes

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

No

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

Yes

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

This activity is being co-designed through a reference group of key bodies representing consumers, carers, local hospital networks, mental health and AOD sectors. The methodology for the plan prioritises the experience of consumers to inform the development of the plan.



[AOD - 4 - AOD 4: Support commissioned AOD service providers to capture agreed outcomes]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

4

Activity Title *

AOD 4: Support commissioned AOD service providers to capture agreed outcomes

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

The Health Needs Assessment identified the opportunity to develop outcome measures that inform approaches to commissioning and support service providers to demonstrate impact of AOD treatment delivery. It is proposed that this be achieved through:

1. Commissioned service providers measuring outcomes using agreed tools
2. Commissioned service providers applying consistent approaches to capturing the delivery of treatment episodes of care
3. NWMPHN having improved understanding of the impact commissioned services have in the community

Description of Activity *

Conduct situation analysis to understand learnings and opportunities within the AOD sector to inform an approach to capture client, service and system level outcomes.

Facilitate dialogue among commissioned services regarding the range of valid outcome and experience measures that could be utilised and determine tools that providers can use in funded activities. This will support approaches to improve the quality of care.

Support the transition towards an outcomes-based commissioning approach in line with broader PHN objectives. This will include the promotion of relevant accreditations and standards.

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: workforce development and quality improvement, population health planning and performance measurement, organisational governance and accountability, communications and marketing.

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83



Activity Demographics

Target Population Cohort *

Commissioned Service Providers

Indigenous Specific *

No

Indigenous Specific Comments *

N/A

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
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Tullamarine - Broadmeadows	21005
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Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.

For this activity collaboration options include: VAADA and other relevant bodies that can inform outcome measurement and outcome based commissioning approaches



Activity Milestone Details/Duration

Activity Start Date *

27 Feb 2019

Activity End Date *

29 Jun 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : Yes

This activity will support the identification and implementation of outcome measures that will be a component of commissioned AOD service delivery.

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

No

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

Broad sector engagement in the development of experience and outcome measures will be required to ensure that they are meaningful, adopted and used in decision making processes by service providers. Therefore, any activity will have a strong co-design process across different systems and organisation types.



[AOD - 5 - AOD 5: Reducing the impacts of AOD dependence, including tobacco for Aboriginal people]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

5

Activity Title *

AOD 5: Reducing the impacts of AOD dependence, including tobacco for Aboriginal people

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

Significant rates and associated harms of AOD misuse was identified among Aboriginal people in the NWMPHN Health Needs Assessment. In response to this a targeted commissioning approach will support:

1. More culturally safe and responsive services to meet needs of Aboriginal people
2. Increased access (to AOD and mental health services) for Aboriginal people
3. Improve the health of Aboriginal people with AOD issues and mental health concerns

Description of Activity *

Continue the commissioning of community-based AOD treatment services for Aboriginal people. This includes reviewing the effectiveness of current commissioned Aboriginal Community Controlled and mainstream services. An example of the work we are committed to includes funding for Aboriginal Community Controlled Organisations for the delivery of AOD treatment services for Aboriginal people across the region.

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: quality improvement in primary care practice, care navigation and access, health literacy and workforce development, communications and marketing.

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83
Aboriginal Health	89
Chronic Conditions	90
Older Adults	91



Activity Demographics

Target Population Cohort *

Aboriginal people in NWMPHN region

Indigenous Specific *

Yes

Indigenous Specific Comments *

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities.

This activity will work with existing Aboriginal AOD service providers, to gain insights and adapt to the dynamic AOD environment in the NWMPHN catchment. This will involve regular engagement with service providers and responding to identified support needs.

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
Darebin - South	20602
Essendon	20603
Melbourne City	20604
Yarra	20607
Darebin - North	20902
Keilor	21001
Macedon Ranges	21002
Moreland - North	21003
Sunbury	21004
Tullamarine - Broadmeadows	21005
Brimbank	21301
Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity. These EAGs each have VACCHO and VAHS members in attendance. NWMPHN also works closely with the Victorian Aboriginal Health Service (VAHS) and Victorian Aboriginal Community Controlled Health Organisation (VACCHO).

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.



Activity Milestone Details/Duration

Activity Start Date *

30 Mar 2019

Activity End Date *

29 Jun 2022

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

Yes

Has this activity previously been co-commissioned or joint-commissioned? *

Yes

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

N/A



[AOD - 6 - AOD 6: Workforce development, ensuring relevant programs incorporate Aboriginal cultural lens]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

6

Activity Title *

AOD 6: Workforce development, ensuring relevant programs incorporate Aboriginal cultural lens

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

Workforce development has been identified as a need in quality improvement strategies across all areas, this activity will meet this need with the following aims:

1. Commissioned services are more responsive to needs of Aboriginal people
2. Workforce capacity is enhanced

Description of Activity *

This activity includes the implementation of a range of strategies to enhance responses for Aboriginal people. This includes:

- Providing workforce development opportunities for the Aboriginal health and community workforce
- Increasing cultural safety of commissioned services and primary care workforce more broadly
- Building internal NWMPHN capacity to commission culturally competent services across the region
- Ongoing development and implementation of the NWMPHN Reconciliation Action Plan

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: workforce development and quality improvement, communications and marketing, digitally enhanced care pathways

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83

Aboriginal Health	89
Chronic Conditions	90
Older Adults	91



Activity Demographics

Target Population Cohort *

To maximise the impact of our work, work in this activity may be targeted to identified cohorts or geographical locations.

Indigenous Specific *

Yes

Indigenous Specific Comments *

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities.

This activity will work with existing Aboriginal AOD service providers, to gain insights and adapt to the dynamic AOD environment in the NWMPHN catchment. This will involve, in particular, working with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) to identify and support capacity building and quality improvement needs.

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
Darebin - South	20602
Essendon	20603
Melbourne City	20604
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Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations,

State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity. These EAGs each have VACCHO and VAHS members in attendance.

NWMPHN also works closely with the Victorian Aboriginal Health Service (VAHS) and Victorian Aboriginal Community Controlled Health Organisation (VACCHO).

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience. NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.



Activity Milestone Details/Duration

Activity Start Date *

30 Jun 2019

Activity End Date *

29 Jun 2022

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: Yes

There are a limited number of providers that deliver organisational capacity building activities to improve cultural safety. NWMPHN continues to work closely with approved training providers to deliver cultural safety training activities tailored to the needs of NWMPHN staff and commissioned mainstream service providers.

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

No

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

Yes

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

NWMPHN continues to work collaboratively with service providers, our AOD Expert Advisory Group, PHN Clinical and Community Advisory Councils, and other key Aboriginal stakeholders to inform key areas of activity to be delivered. This is enhanced through our involvement with the Victorian PHN Alliance and efforts for reform through Victorian Department of Health and Human Services.



[AOD - 7 - AOD 7: Continue to improve access, integration and care navigation for Aboriginal people]



Activity Metadata

Applicable Schedule *

Drug and Alcohol Treatment Services

Activity Prefix *

AOD

Activity Number *

7

Activity Title *

AOD 7: Continue to improve access, integration and care navigation for Aboriginal people

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Alcohol and Other Drugs

Aim of Activity *

Improving access and integration of AOD and other social and primary health services were major themes of the NWMPHN Health Needs Assessment. This activity seeks to address this identified need with the following aims:

1. Access by people from Aboriginal communities is increased
2. Increased number of Aboriginal consumers/patients are receiving more integrated services

Description of Activity *

Strategies to continue to improve access, integration and care navigation for the Aboriginal population in our region include:

- Continue to commission, monitor and review the community based Integrated Team Care (ITC) activities to ensure they complement and are integrated to AOD and mental health activity for Aboriginal people
- Support ACCHOs and other agencies to develop evidence based Care Navigation models
- Continue to review existing care pathways, and develop new care pathways for the Aboriginal population in our region.

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: Digitally Enhanced Care Pathways, workforce development and quality improvement, health literacy and consumer participation, communications and marketing

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

Needs Assessment Priority	Page Reference
Alcohol and Other Drugs	82
Mental Health	83
Aboriginal Health	89
Chronic Conditions	90
Older Adults	91



Activity Demographics

Target Population Cohort *

To maximise the impact of our work, work in this activity may be targeted to identified cohorts or geographical locations.

Indigenous Specific *

Yes

Indigenous Specific Comments *

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities.

This activity will work with existing Aboriginal AOD service providers, to gain insights and adapt to the dynamic AOD environment in the NWMPHN catchment. In addition, it is likely that this activity will engage key Aboriginal Health bodies in Victoria (Victorian Aboriginal Community Controlled Health Organisation and Victorian Aboriginal Health Service), mainstream ITC providers, mental health stakeholders and other Aboriginal Community Controlled Organisations that interact with Aboriginal people experiencing concerns related to AOD use.

Coverage *

Whole Region

Yes

SA3 Name	SA3 Code
Brunswick - Coburg	20601
Darebin - South	20602
Essendon	20603
Melbourne City	20604
Yarra	20607
Darebin - North	20902
Keilor	21001
Macedon Ranges	21002
Moreland - North	21003
Sunbury	21004
Tullamarine - Broadmeadows	21005
Brimbank	21301
Hobsons Bay	21302
Maribyrnong	21303
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation *

NWMPHN utilises a range of mechanisms to facilitate consultation including Community Councils and Clinical Councils. The NWMPHN Drug and Alcohol Expert Advisory Group has also been established with membership from peak organisations, State Government and Emergency Services, and other Expert Advisory Groups (mental Health and suicide) and Taskforces (LGBTIQ) also contribute to this activity. These EAGs each have VACCHO and VAHS members in attendance.

NWMPHN also works closely with the Victorian Aboriginal Health Service (VAHS) and Victorian Aboriginal Community Controlled Health Organisation (VACCHO).

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience. NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services.

Collaboration *

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches.



Activity Milestone Details/Duration

Activity Start Date *

30 Jun 2019

Activity End Date *

29 Jun 2022

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2022



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: *

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

Yes

Is this activity the result of a previous co-design process? *

No

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

Yes

Has this activity previously been co-commissioned or joint-commissioned? *

No

Decommissioning *

No

Decommissioning Details? *

N/A

Co-design or co-commissioning details *

NWMPHN continues to work collaboratively with service providers, our AOD Expert Advisory Group, PHN Clinical and Community Advisory Councils, and other key Aboriginal stakeholders to inform key areas of activity to be delivered. This is enhanced through our involvement with the Victorian PHN Alliance and efforts for reform through Victorian Department of Health and Human Services.