



Alcohol, Tobacco and other
Drugs Council Tasmania Inc.



Tasmanian ATOD CSOs:

Key messages about working in our service system.

**Prepared for Siggins Miller
AOD Service System Framework Project**

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The strength of the community sector

Our vision across the alcohol, tobacco and other drug (ATOD) community sector is a Tasmania without drug or alcohol related harm or discrimination relating to drug use. Our services exist to respond to Tasmanians experiencing harm from alcohol, tobacco and other drugs. ATOD services are provided through three models of organisation: the government, the private sector and the community sector. The ATDC maintains that the community sector offers clear advantages in the way that services are delivered.

Distinct advantages of community sector organisations (CSOs):

- *more connected into local communities that they serve.* Staff in CSOs are experts in the local communities engendering highly responsive and tailored approaches. Staff and service users have a sense of identity and belonging, fostered through emotional connections, common history and experiences allowing a common language, shared values and norms and consequently shared needs and a commitment to meeting them. This is especially salient in the context of rural and remote communities across Tasmania, where government and private sector provision is limited.
- *less-siloed nature of service delivery* - many CSOs provide access to an array (mental health, welfare, housing, whole of person approaches etc.) services to clients and thus representing a 'less siloed' model of service delivery than often found in the government arena. This allows CSOs to address complex needs more effectively within the organisation and promotes better access to all types of relevant services for clients.
- *greater flexibility to be innovative* - while still governed by, and accountable to, rules and procedures, the community sector has a higher degree of flexibility than the bureaucratic model of service provision to design and implement innovative models of service provision.

In sum, from the perspective of the service user, ATOD CSOs are accessible and professional service providers that reflect the community that they are located in. This means that a multiplicity of services are available and can be tailored to meet the needs of local people. ATOD CSOs complement Department of Health and Human Services (DHHS) and the private sector, by providing wrap around services for complex presentations through local networks to a wide variety of services and are often the entry point into the treatment system

Key messages about our AOD system

1. One of the *persistent* gaps is the lack of an **ATOD service user voice**. Consumer participation in service design and feedback is a vital part of any service system. There are a number of existing arrangements where consumers are given a voice but these are ad hoc in nature and generally not focused at service design and feedback processes.
2. Another persistent gap in our service system is the lack of **Tasmanian specific data**. The ATDC has advocated for investment in a consistent data collection and analysis system across the entire ATOD sector (government, private and community sector organisations) to enable activity and performance reporting obligations to be met and to inform research and planning priorities. Currently decisions are made, and budgets are allocated, in the absence of such information. This is alarming.
3. Another priority for our sector is further **streamlined referral pathways** to other services connected to the ATOD sector, especially mental health services but also including housing, disability, justice, child protection and Child and Family Services (to name a few). In some cases it is about the development of a common language (tools, assessment procedures and common understandings) in other cases it is about bringing workers together to collaborate more effectively for the many clients with complex presentations.
4. There needs to be an **equal and significant policy focus on preventative health and early intervention**, alongside regular and acute treatment programs for alcohol, tobacco and other drugs.
5. Many of our CSOs have **wait lists** - this indicates a level of demand that is not being met. This also reinforces the need for Tasmanian specific data, mentioned above, so that this demand can be accurately quantified.
6. Our CSOs report ongoing issues with **access to withdrawal and detoxification services**. On the basis of geographical location and number of spaces available.
7. Similarly, ATOD service users have reported issues with **access to and responsiveness of pharmacotherapy services**. Specifically, the number of prescribing Doctors who are available and anecdotal reports of a system that requires ATOD consumer input so to become more responsive and flexible to the needs of those that access it.
8. Our CSOs are concerned about **availability of needle and syringe provision**; specifically lack of access in rural and remote areas and wanting expanded opening hours in metropolitan areas for primary outlets. While NSPs are funded by the public health stream in DHHS, they are still a critical component of any service system and serve as a strong referral point into the rest of the ATOD system.

Tasmanian ATOD community sector organisations

- Advocacy Tasmania
- Anglicare Tasmania Inc.
- Bethlehem House Tasmania Inc.
- Circular Head Aboriginal Corporation
- Colony 47
- Drug Education Network Inc.
- Headspace/Cornerstone Youth Services
- Holyoake Tasmania
- Launceston City Mission (Missiondale)
- Mission Australia
- Velocity Transformations.
- Quit Services Tasmania
- Red Cross Tasmania
- Relationships Australia Tasmania Inc.
- Rural Alive and Well Inc.
- Tasmanian Council on Hepatitis, HIV AIDS and Related diseases.
- Teen Challenge Tasmania
- The Link Youth Health Service
- The Salvation Army
- Tasmanian Users Health Support League
- Wyndarra Centre
- Youth Family and Community Connections

The workforce

It was estimated from survey data that in 2014 there were about 120 *frontline* workers who provided ATOD services in the community sector across Tasmania. Not all of these were specifically funded to provide ATOD services, some were 'generalist' workers who provided ATOD services alongside other health, education and welfare services.

Key roles performed by staff in ATOD CSOs include: Case Manager, Manager ¹, Community Education/Health Promotion Worker, Counsellor, Team Leader, Outreach Worker, Social Worker, Youth Worker and Needle and Syringe Program Worker.²

¹ Most managers (over 80%) reported that they also had contact with clients.

² This is a non-exhaustive list of role titles. CSOs will contain other roles or variations on the titles of these roles.



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Types of services

The types of services provided by Tasmanian ATOD CSOs include:

- Promotion, prevention and early intervention services
- Screening and brief intervention
- Case management
- Counselling
- Day Stay
- Home based withdrawal service
- Aftercare
- Residential Rehabilitation
- Needle and syringe programs (funded by public health but should be included)

About the ATDC

The Alcohol, Tobacco and other Drugs Council Tas Inc. (ATDC) is the peak body representing the interests of community sector organisations (CSOs) that provide services to people with substance misuse issues in Tasmania. We are a membership based, independent, not-for-profit and incorporated organisation. The ATDC is the key body advocating for adequate systemic support and funding for the delivery of evidence based alcohol, tobacco and other drug (ATOD) initiatives.

We support workforce development through the provision of training, policy and development projects with, and on behalf of, the sector and represent a broad range of service providers and individuals working in prevention, promotion, early intervention, treatment, case management, research and harm reduction.

We are underpinned by the principle of harm minimisation, which aims to improve public health, social inclusion and co-morbid illness outcomes, for individuals and communities. We play a vital role in assisting the Tasmanian Government to achieve its aims of preventing and reducing harms associated with the use of alcohol, tobacco and other drugs in the Tasmanian community.