

Northern Territory PHN - Drug and Alcohol Treatment Services

ACTIVITY WORK PLAN

phn NORTHERN TERRITORY
An Australian Government Initiative

RURAL Workforce AGENCY NT

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Alcohol and Other Drugs: Cross sector collaboration, workforce development and commissioning treatment services

1. Aim of Activity

This activity aims to have a whole of sector approach to capacity building and service delivery for AOD misuse. The Northern Territory (NT) requires intersectoral, culturally appropriate, and evidence-based approaches to managing and treating the harmful effects of AOD misuse. Furthermore, this activity supports AOD workforce access to ongoing development support to enhance skills and create a sustainable and effective workforce for service delivery.

2. Description of Activity

This activity enables Northern Territory Primary Health Network (Northern Territory PHN) to commission AOD treatment services throughout the NT. The AOD Non-Government Organisation (NGO) sector in the NT is characterised by a high number of residential treatment units and a limited number of outpatient counselling services. Northern Territory PHN commissions a range of services along this harm reduction continuum.

The types of treatment services commissioned by Northern Territory PHN are inclusive of the following:

- Counselling services
- Withdrawal management and Residential Rehabilitation
- Case Management and Aftercare support.

Harm Reduction

Northern Territory PHN references the NT AOD Workforce Development Framework to guide activities that will develop the skills of those working across the AOD sector. Northern Territory PHN works in partnership with the AOD Peak Body and other relevant stakeholders to operationalise the framework. The broad focus of this activity is to create a sustainable and highly skilled AOD workforce in the NT.

This activity will also:

- Commission and participate in research and evaluation that contributes to an improved evidence base and enhanced understanding of best practice in drug and alcohol treatment services for the NT

- Promote continuous quality improvement and support primary health professionals through AOD education and training
- Support the development of an AOD Outcome Framework and work with providers to embed within the commissioned services.

Workforce access, capacity and capability are critical areas of need to support the delivery of commissioned programs by Northern Territory PHN. Where required this activity could include workforce development initiatives to improve access, quality and sustainability of services to the communities in the NT.

3. Needs Assessment Priorities

Northern Territory PHN Needs Assessment Priorities 2024/25 – 2026/27

Priority	Page reference
AOD - Diagnosis of co-morbid mental illness and alcohol or other drug misuse and the coordination and integration of care.	66
AOD - Non-residential, community based primary care treatment options, particularly solutions which may be accessed in remote communities.	49
AOD - Case management, coordination and integration of care for individuals' mis-using alcohol and other drugs.	41
AOD - Health professional awareness and capability for AOD screening, intervention and referral, particularly for younger Aboriginal men, pregnant women and children with a high risk of Fetal Alcohol Spectrum Disorder (FASD).	11
AOD - To address the specific needs of youth, women of child-bearing age and pregnant women.	11

4. Demographics

Anyone in the NT requiring support with drug or alcohol misuse.

Most services in the NT service a high proportion of Aboriginal and Torres Stright Islander people therefore, a component of the activity will be specifically designed to address needs of Aboriginal and Torres Strait Islander people.

5. Consultation and Collaboration

Consultation

This activity supports a focus on strengthening collaboration both cross sectoral and regionally to enable better coordination of services relevant to the AOD treatment sector. Northern Territory PHN works in partnership with regional stakeholders, the Association of Alcohol and Drug Agencies NT (AADANT) and Aboriginal Medical Service Alliance NT (AMSANT) to understand sector needs and keep abreast of policy changes.

Collaboration

Northern Territory PHN works alongside the NT Government Department of Health and other funding bodies to promote a collaborative planning and a co-commissioning approach to the distribution of funding and equality of access to AOD services within the regions of the NT. Northern Territory PHN has ongoing involvement in several sector-wide advisory groups to promote and develop better networking and sector collaborations.

Northern Territory PHN also works collaboratively with AADANT to identify and facilitate delivery of sector specific training opportunities to service providers and works closely with NT Health to reduce duplication and identify opportunities for strategic allocation of resources.

6. Commissioning

The Northern Territory Aboriginal Health Forum (NTAHF) is a high-level partnership that provides strategic guidance and makes decisions on key policy issues aimed at improving Aboriginal health and wellbeing. Northern Territory PHN is a member of this forum, which serves as a platform for key organisations, including the Commonwealth Department of Health, Disability, and Ageing, to collaborate in planning and coordinating programs and activities. Additionally, organisations such as the AMSANT, AADANT, NT Health's Mental Health Alcohol and Other Drugs (MHAOD) Branch, and other key partners are involved in decision-making and service commissioning to ensure there is no duplication and that areas of highest need are effectively addressed.

Alcohol and Other Drugs:
Drug and alcohol treatment services for Aboriginal and Torres Strait Islander people delivered through a Social and Emotional Wellbeing (SEWB) model

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1. Aim of Activity

This activity aims to: commission services that are informed by the National SEWB Framework and are culturally appropriate for Aboriginal and Torres Strait Islander people and their communities who are affected by substance misuse or who are seeking support for substance misuse.

2. Description of Activity

This activity involves commissioning the delivery of drug and alcohol treatment services through a SEWB model to support region specific, intersectoral and integrated approaches to drug and alcohol treatment services delivered through Aboriginal Community Controlled Health Services and NT Health.

Through a collaborative co-design process at the NT Aboriginal Health Forum (NTAHF), SEWB was identified as an appropriate framework through which to deliver drug and alcohol treatment and mental health services for Aboriginal and Torres Strait Islander people in the NT.

The SEWB model commissioned by Northern Territory PHN includes:

- Therapeutic Stream (Counselling, Case Management, Aftercare)
- Social/Cultural (Screening, Brief Intervention).

Workforce access, capacity and capability are critical areas of need to support the delivery of commissioned programs by Northern Territory PHN. Where required this activity could include workforce development initiatives to improve access, quality and sustainability of services to the communities in the NT.

3. Needs Assessment Priorities

Northern Territory PHN Needs Assessment Priorities 2024/25 – 2026/27

Priority	Page reference
AOD - Diagnosis of co-morbid mental illness and alcohol or other drug misuse and the coordination and integration of care.	66
AOD - Non-residential, community based primary care treatment options, particularly solutions which may be accessed in remote communities.	49
AOD - Holistic, integrated and Aboriginal and Torres Strait Islander led responses to alcohol and other drug use in line with the SEWB model of service delivery.	41
AOD - Case management, coordination and integration of care for individual's mis-using alcohol and other drugs.	41
AOD - Health professional awareness and capability for AOD screening, intervention and referral, particularly for younger Aboriginal men, pregnant women and children with a high risk of FASD.	11
AOD - To address the specific needs of youth, women of child-bearing age and pregnant women.	11

4. Demographics

Aboriginal and Torres Strait Islander people in the NT.

Culturally appropriate services will be delivered for Aboriginal and Torres Strait Islander people in the NT using a SEWB model.

5. Consultation and Collaboration

Consultation

The NTAHF is a peak-level partnership that provides strategic guidance and makes decisions about key policy issues to improve Aboriginal health and wellbeing. Northern Territory PHN is a member of this forum, and it is through this channel that key organisations the including Commonwealth Department of Health, Disability and Ageing come together to plan and coordinate programs and activities. Additionally, AMSANT, AADANT and the NT Health MHAOD Branch and key partners that are involved in decision making and commission of services to ensure there is no duplication and areas of highest need are addressed.

Collaboration

AMSANT provides SEWB workforce support and trauma-informed care training to Northern Territory PHN commissioned SEWB providers. Northern Territory PHN collaborates regularly with AMSANT to ensure that the workforce support provision is fit for purpose and supports community needs.

6. Commissioning

A co-design process was undertaken at the commencement of the SEWB program in 2016. This process involved representatives from the NT Aboriginal Community-Controlled Health Services sector, Top End Health Service, NT Health, National Indigenous Australians Agency (NIAA) and the Commonwealth Government Department of Health, Disability and Ageing. These agencies continue to be involved in planning and commissioning of AOD services to ensure there is no duplication and area of highest needs are met.