



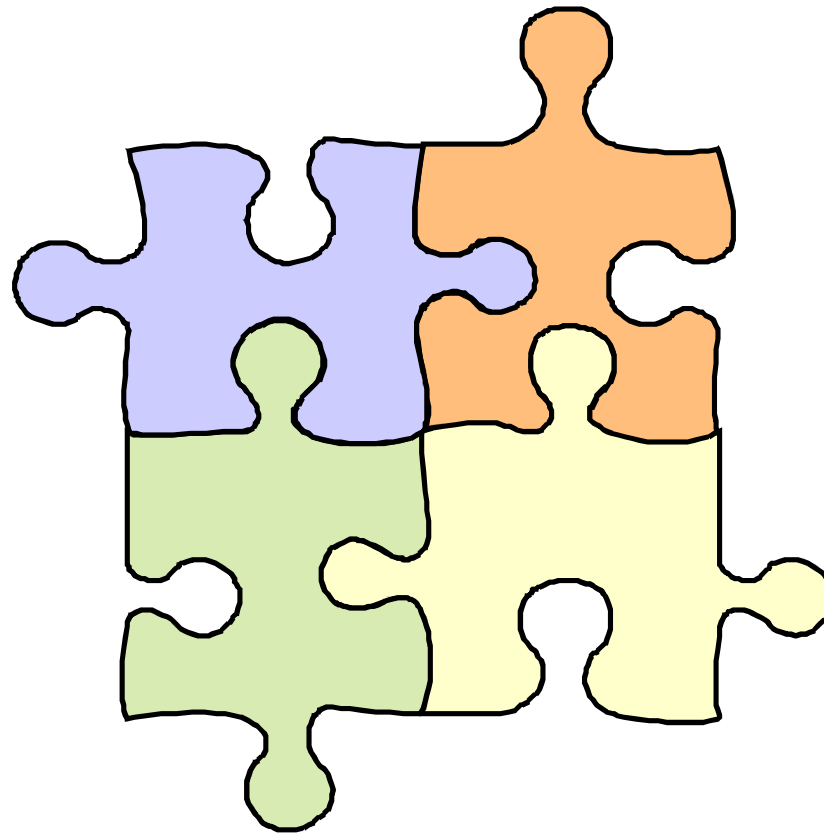
**Liaison on
Alcohol and other
Drugs**



National Addiction Sector

N E W S

Research Pilots Updates Reports Diary Events





National Service Framework Alcohol and Other Drug Service Specifications

Draft 4

Background

- Nationwide Service specification framework is central for the implementation of mental health & addiction service strategic direction and vision
- Service specifications are an essential component of the contracting process and audit



So What???



Why should you care?

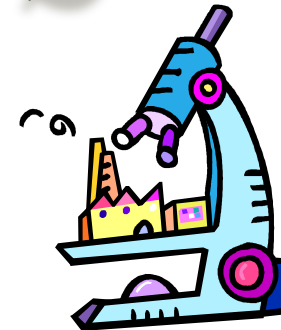
Contracts



Audits !!!



Money





The team



- Roz Sorensen and Miriam Horgan are carrying out the work and need our feed back
- Working alongside them are the technical groups who advise and make suggestions – we will be considering the AOD technical group suggestions today



Nationwide Services Framework Mental Health & Addiction Services 3 Tiered Structure



TIER ONE

General principles
that apply to **ALL**
mental health &
addiction services

eg

Objectives

Eligibility

Recovery

Whānau ora



TIER TWO

**Over-arching
principles specific to
population groups eg**

Adult

Infant Child Adolescent & Youth

Consumer

Eating Disorders

Alcohol & Other Drug*

Kaupapa Maori*

Pacific*

Family Whānau*

Forensic^

Older People^

Asian^

Maternal^



TIER THREE

Alcohol and Other Drugs

AOD Liaison Service - NEW

Continuing Care Service - NEW

Dual Diagnosis AOD / MH

AOD Supported Living (AOD CSW)

Adolescent & Youth Residential

Community AOD

AOD/MH Residential

Detoxification – inpatient

Detoxification – Home & Community

Detoxification – Residential

AOD Early Intervention

Residential treatment



our work for today... with these questions in mind

1. What **is** working well now?
2. What **looks like it will** work well in Draft 4?
3. What is **not** working well now?
4. What **looks like it will not** work well in Draft 4?
5. What are the **service gaps** now?
6. What are the service **gaps that will exist** in Draft 4?

Is to consider the following...



AOD Tier 2 Objectives

the following are among the objectives covered
you can see the others in the document online...

- **SUPPORTING RECOVERY**
- **INCLUSIVENESS OF FAMILY, WHĀNAU AND SUPPORTS**
- **HARM MINIMISATION WITHIN A CONTINUUM FROM HARM REDUCTION TO ABSTINENCE**



tier 2 the 4th draft for **AOD**

Split into 2 Working Groups

a scribe to make notes re comments suggestions

1. AOD Liaison Service – NEW
2. Continuing Care Service – NEW
3. Dual Diagnosis AOD / MH
4. AOD Supported Living (AOD CSW)
5. Adolescent & Youth Residential
6. Community AOD
7. AOD/MH Residential
8. Detoxification – inpatient
9. Detoxification – Home & Community
10. Detoxification – Residential
11. AOD Early Intervention
12. Residential treatment



Technical Group Suggestions

- Outreach options
- Residential Options
- Pregnant mothers – (*? With Mothers & Babies*)
- Mobile Services
- Support while on wait lists
- Liaison, Consult, education
- Help line that can do brief interventions
- **Can we add to this list? (Use the sheets you have)**



Your Feedback needs to be in before 20 March 09

WHY?

It takes around 3 months to go through for formal process outlined in *Guidelines for Developing Service Specifications* including:

- Complete specs, along with reporting requirements and PU codes
- Complete editing & formatting

Consideration & sign-off by

- Service Framework Group (SFG)
- Performance Framework Group (PFG)
- Nationwide Service Co-ordinating Group (NCG)

**Service Specs therefore need to be
completed by May 2009**



If you want to do more-
**AOD Documents for Feedback are
found at**

http://www.midlandmentalhealthnetwork.co.nz/page/midland_95.php

Info or feedback on all or any of the documents
can be made directly to Miriam Horgan:

miriam_horgan@moh.govt.nz (for the AOD specs)

Or

roz_sorensen@moh.govt.nz (MH specs)



AlcoholDrug Helpline Call Back Pilot Service



Starting Monday the 16th February

The *main* Call Back Objectives are:

- To build, support and reinforce caller's decisions and motivation for change.
- To strengthen engagement in the treatment process.
- To support people while waiting for specialist treatment.



AlcoholDrug Helpline
Call Back Pilot Service



- Callers receive individualized information and advice based on a client-centered approach.
- The Call Back option will be delivered with the same degree of skill and quality that currently occurs within the ADHL.



AlcoholDrug Helpline Call Back Pilot Service



The numbers to start with

- 20 callers receiving weekly calls.
- 20 callers receiving daily calls.

This development has been agreed with our funders and is an addition to the existing range of services that the ADHL provides.



NEW HOME FOR ADDICTION WORKFORCE AGENCY MATUA RAKI

- The Ministry has given Te Rau Matatini, the contract to host Matua Raki from 1 February 2009.
- Te Rau Matatini specialises in Maori mental health workforce development.

The work of the two agencies is complementary, and Te Rau Matatini will be able to provide the governance and business support that Matua Raki would benefit from.

You can read more www.matuaraki.org.nz



Advanced Practice Nursing Strategy for the Addiction Treatment Sector: A Discussion Document

- The document informs, leads and facilitates change to establish recognition of the specialist Addiction Nurses. Led by Daryle Deering (NAC) with the support of Matua Raki,
- www.matuaraki.org.nz/index.php?id=60



Getting it Right for People with Co-existing Addiction and Mental Health Problems

September 2008

- A Report to the Mental Health Commission Board and the Alcohol Advisory Council of New Zealand**



Documents from MoH

available on www.moh.govt.nz site

- *Practice Guidelines for Opioid Substitution Treatment in New Zealand*
- **Te Puāwaiwhero**
Whanau Ora and Maori Mental Health
23 October 2008



National Committee for Addiction Treatment

Addiction Treatment Leadership Day

March 12th in Christchurch

Hotel Grand Chancellor, Cashel St.

Theme:

Leadership, Advocacy and Innovation

- This event is organized by the National Committee for Addictions Treatment (NCAT)
- funded by the Ministry of Health through Matua Raki.
- held three times a year
- for leaders in the addiction treatment and allied fields.

This is the last Leadership Day being organized by NCAT and the responsibility will then move directly to Matua Raki as the Addiction Workforce Development Programme.



Theme for the day:

Leadership, Advocacy & Innovation

- **Programme**
- 8.30 Coffee and registration
-
- 9.30 Launch of NCAT Position Statement
-
- 10 Advocacy & Leadership
-
- 1.15 Ministry of Health
-
- 1.40 Canterbury AOD project
- The Alcohol Drug Helpline new pilots
- Family Inclusive Practice Collaborative Project
- 2.15 Matua Raki
-
- 2.45 DAPAANZ
- ALAC
- Mental Health Commission
- Addiction Advocacy Service; making a difference
-
- 3.30 Close with coffee



NCAT & ATLD information

- Book a place online and get notes and further information at

<http://www.matuaraki.org.nz/>

Further info from Lynere only until March 26

lynere.wilson@adanz.org.nz



School of Addiction 2009

4-6 March 2009, Auckland

- The biennial school is offered to experienced clinicians and practitioners in the field of addiction treatment.
- Jointly hosted by DAPAANZ and the Pacific Centre for Motivation and Change
- Online Registration at www.matuaraki.org.nz



The Children Young Person and their Families (Youth Courts Jurisdiction and Orders) Amendment Bill

was introduced and had its first reading Feb 18
(under urgency).

The Bill was referred to the
Social Services Committee.

Below is a link to the Bill.

[http://www.legislation.govt.nz/bill/government/2009/
0016-1/latest/versions.aspx](http://www.legislation.govt.nz/bill/government/2009/0016-1/latest/versions.aspx)

● ● ● | The Bill is aimed at the worst 1,000 youth offenders and contains three main reforms:

It's giving the Youth Court the power to issue

- a new range of compulsory orders including
 - parenting,
 - mentoring,
 - drug and alcohol rehabilitation programmes,
- extending the jurisdiction of the Youth Court to include 12 or 13 year olds accused of serious offences,
- creating tougher, more effective sentences.



Paula Bennett

Minister of Social Development

press release

<http://beehive.govt.nz/release/fresh+start+young+offenders>

- A military-style activity camp prog would be developed to target the 40 most serious young offenders.
- ... up to three months residential training, using army-type facilities or training methods and provide clear boundaries, reinforcement of self-discipline, personal responsibility and community values.
- followed by up to nine months of intensive support to meet each young person's individual needs.



\$35 million.

- Successful military-style programmes such as the Limited Service Volunteers are already operating and achieving good results for young people...



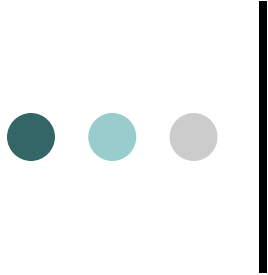
Which organisation/s will run the military activity camp programme?

- Child, Youth and Family is working with the New Zealand Defence Force to develop appropriate military-style residential programme.
- **How many camps will be run?** We propose running four programmes annually, with 10 young people in each intake.
- Child, Youth and Family will also work with other providers currently delivering supervision with activity programmes to ensure they too include the reinforcement of self-discipline, personal responsibility and community values.



Why is there a need for alcohol and drug programmes?

- A large number of young offenders have problems with substance abuse.
- Access to programmes which assist in rehabilitating young offenders reduces offending as well as improves the quality of life for the young person.
- **Which provider/s will run the mentoring, parenting and drug and alcohol programmes?** This will be announced prior to the commencement of the new legislation.



Regional Submission on what you want for your region?

- A group submission with input from as many groups in the region – most effective rather than individual submission
- What is this region like
- What is working here what is not
- What is needed
- Include evidence
- Elect a representative and request to present in person.



Submissions need to be in before the end of March

- Introduced to the House first reading
- Back to the **Social Services Committee** redrafting it –**need feedback during this stage** (before end of March)
- Back to the House for second reading most likely in May (maybe more tweaking)
- Expected to be passed in October 2009
- Implemented in 2010



Anyone...

- Identify someone to take the lead and bring a group together who can work up a submission with input from as many of the stake holders as possible
- Can use the ADANZ mailing list to gather and disseminate information
- Get feedback on drafts etc