

# AUSTRALASIAN THERAPEUTIC COMMUNITIES ASSOCIATION

## SYMPOSIUM:

(Macquarie Dictionary: A meeting or conference for discussion of a topic, especially one in which the participants form an audience and make presentations;  
A convivial meeting for intellectual discussion)



## A Common Voice- A Common Voice- The Shape of Future Service Delivery



**TUESDAY 29 NOVEMBER 2011**  
**THE SALVATION ARMY**  
**140 ELIZABETH STREET, SYDNEY**  
**8.30am – 5pm**

### Presenting:

**Dr David Best**, Associate Professor in Addiction Studies at Turning Point and Monash University;  
**Ms Gayle Anderson**, Assistant Secretary, DoHA, Substance Misuse and Indigenous Wellbeing Branch;  
**Professor Ian Webster and Roundtable discussion-** The Changing Landscape in Health Care

# A COMMON VOICE – THE SHAPE OF FUTURE SERVICE DELIVERY

The ATCA Board of Directors invites you to the 2011 Annual General Meeting and ATCA Symposium, which this year takes the theme, *A Common Voice – The Shape of Future Service Delivery*.

This day will challenge you as we consider and discuss the place and role of AOD services, and particularly therapeutic communities in the context of the Health Reform Agenda.

In the last financial year, ATCA members admitted 9,000 residents into TC treatment, with 1,700 of these being in correctional settings. There were more than 200 children in our programs, receiving vital support alongside their parents, and a further 23,386 clients accessed our outpatient, educational and non-residential services. TCs are far more than the structures which house our programs – we are dynamic, responsive and innovative – providing an impressive range of services and programs to diverse populations in many different settings.

TCs are acknowledged as working with the most complex and chaotic populations. Outcomes, nevertheless, have been shown to be impressive over many studies in Australia and internationally. As we take up the challenges of the coming years, what will the AOD landscape present, how will a shift to an outcomes- and outputs-based funding model affect us and how can we influence the policy framework through practice-based evidence?

One of our key challenges right now is to inspire those coming through our programs and entering into TCs as staff, to maintain the enthusiasm, the passion and the commitment to the TC model.

**So – a challenge to our TCs – as you register your delegates for this year’s Symposium – bring with you at least one of your youngest staff members – these are the people who will carry our TCs forward into the next decades as we address the issues ahead of us. Support and nurture them to become passionate about TCs.**

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## POSTER PRESENTATIONS

We would like to invite our members to prepare a poster presentation for display during the Symposium.

Poster presentations are visual displays used to communicate a message i.e. research findings, program highlights, etc. The Symposium program includes a poster presentation session during the AGM (for delegates not attending the AGM) and over the lunch break. This provides an intimate forum for the exchange of information by allowing more personal discussion between presenter and audience.

Posters may include information on research projects, innovative projects, activities of interest to other TCs or an overview of your TC and related programs. Poster presentations may also be developed as powerpoint presentations and shown on individual laptops.

If you would like to provide a poster or powerpoint presentation for display and discussion during the Poster Presentation Session, please complete the details on the Registration Form.

### PLENARY - 10.15am - 11am



**Dr David Best** took up the post as Associate Professor in Addiction Studies at Monash University in Melbourne on 1 June 2011. He will maintain involvement with the recovery movement in the UK and will be returning on a quarterly basis to fulfil obligations around PhD students and ongoing research and recovery programs.

He is qualified as a psychologist and criminologist, having studied at Strathclyde University and London School of Economics, and having been trained at the Institute of Psychiatry and Maudsley Hospital in London. Academically, he has also worked in the addictions research area at Strathclyde University, Birmingham University and the University of the West of Scotland. Additionally, he has worked on secondment at the National Treatment Agency for Substance Use and the Prime Minister's Delivery Unit.

His research interests are in developing an evidence base around recovery and in implementing recovery-oriented systems of care.

The ATCA is thrilled to welcome David to the Symposium as the Keynote Speaker, addressing the topic, *Implementing recovery in a treatment system*.

### STREAM 1 - 11.20am - 12noon

**Ms Sue Hailstone** is a member of the NSW Ministry of Health Project Team, National Drug And Alcohol Population Based Service Planning Model. Her presentation will address *The DA-CCP Model - what does it mean for AOD treatment in Australia?*

The DA-CCP project was commissioned early in 2010 by the Ministerial Council on Drug Strategy (MCDS) through the Intergovernmental Committee on Drugs (IGCD) as a project under the cost shared funding model (CSFM). The Mental Health and Drug & Alcohol Office within the NSW Department of Health is the lead agency. It is based on a modelling process developed in NSW for mental health services planning in 2000 and is overseen by the DA-CCP Steering Committee which provides final decisions on all matters related to the model.

The DA-CCP Expert Reference Group is chaired by Associate Professor Alison Ritter, NDARC, and provides advice on the clinical and technical information to go into the model.

Representatives include:

- One health official from each state and territory
- Two health officials from the Dept of Health and Ageing, i.e. OATSIH and Drug Strategy Branch
- One representative from Australian Chapter of Addiction Medicine (AChAM), ADCA, ANCD (Garth Pople), ATCA (Lynne Magor-Blatch)

The project is nearing completion and will provide the first national population based model for drug and alcohol service planning.

### STREAM 1 - 12noon - 12.20pm

In 2010, ATCA Directors Garth Pople and James Pitts attended the World Federation of Therapeutic Communities (WFTC) Institute in Genoa. The Institute brought together 200 people from 52 countries involved with and committed to the work of therapeutic communities in responding to the issues of global substance misuse and related problems.

The Institute developed a Statement which highlights the challenges facing therapeutic communities and other treatment modalities, and restated the commitment to work to restore the wholeness of the person and through this, to improve the social well-being and wholeness of the society in which we operate.

This session will present the Statement, which calls upon public authorities, civil society and spiritual organisations to support and join in this commitment.

### **STREAM 1 - 1.45pm - 2.15pm**

**Ms Gayle Anderson** has a background as an allied health professional having worked in public and private hospitals and in private practice. She has also worked in the University sector for several years, lecturing and researching. Gayle worked for Queensland Health during 2001 before joining the Australian Government Department of Health and Ageing in 2002. Gayle has worked in a range of areas including food policy and regulation, HIV/AIDS and international health strategies. She was the NSW and ACT State Manager of the Australian Government Department of Health and Ageing before moving back to Canberra in June 2011 to be the Assistant Secretary, Substance Misuse and Indigenous Wellbeing Programs Branch, in the Mental Health and Drug Treatment Division. Gayle will address the issue: *Future Directions for AOD. Where do TCs fit in the picture?*



### **ROUNDTABLE - 2.15pm - 3.45pm**



**Ian Webster** is a physician and Emeritus Professor of Public Health and Community Medicine of the University of New South Wales. He has also held appointments at Monash, Sheffield and Sydney Universities and in public hospitals in New South Wales.

He is Patron of the Alcohol and other Drugs Council of Australia and is past Chairman of the Alcohol Education and Rehabilitation Foundation (now Foundation for Alcohol Research and Education). He is Chairman of the Australian Suicide Prevention Advisory Council, the NSW Expert Advisory Group on Drugs and Alcohol, the Governing Council of the Ted Noffs Foundation and the Centres for Primary Health Care and Equity at the University of New South Wales. He was a member of the Australian National Council on Drugs and has been a member of several area health boards in NSW. He was made an Officer in the Order of Australia in 1995 and received the Prime Minister's Award in 2009 for outstanding work in the field of drugs and alcohol.

Ian will facilitate the Roundtable session which includes:

- David Best (Turning Point/Monash University)
- Gino Vumbaca (ED, ANCD)
- David Templeman (CEO, ADCA)
- David Crosbie (CEO, CCA)
- Frank Quinlan (CEO, MHCA)
- Michael Thorn (CEO, FARE)
- Barry Evans (Chair, ATCA)
- Jackie Long (ATCA, NZ)

This session will explore the ways in which we can address issues of concern and move together 'with one voice' in relation to AOD and MH treatment.

Time	Session	Chair	Speaker	
8.30am-9.00am	Registrations & coffee			
9.00am-10.00am	<b>OPENING SESSION</b>			
	Welcome	<b>Barry Evans, Chair ATCA Board of Directors</b>		
	Welcome to Country	<b>Gadigal Elder</b>		
	Choir presentation	<b>Gerard Byrne</b>	<b>Capt Vanessa Garven – Selah Soul Sisters</b>	
	Conference opening		<b>The Hon. Kevin Humphries, MP, NSW Minister for Mental Health, Minister for Healthy Lifestyles</b>	
10.15am – 11.00am	<b>PLENARY SESSION</b>	<b>Barry Evans</b>	<b>Dr David Best, Associate Professor in Addiction Studies at Turning Point and Monash University. <i>Implementing recovery in a treatment system.</i></b>	
11.00am-11.20am	<b>MORNING TEA</b>			
Time	Venue Chair	Stream 1	Facilitator	Stream 2
11.20am – 12.00noon	<b>James Pitts</b>	<b>Ms Sue Hailstone, NSW Ministry of Health Project Team, National Drug And Alcohol Population Based Service Planning Model - The DA-CCP Model – what does it mean for AOD treatment in Australia?</b>	<b>Rebecca Davey</b>	<b>Auditor Training – ATCA Standards for Therapeutic Communities.</b> The ATCA Standards are now being implemented across Australia. This Workshop will train TC staff in the auditing process, building a pool of peer support to assist TCs in the self- and peer-review process as part of their ongoing quality development  Bookings essential for this workshop
12.00noon-12.20pm	<b>James Pitts</b>	<b>Garth Pople, CEO WHOS &amp; President IFNGO – TC treatment in the 21<sup>st</sup> Century – a statement prepared by the WFTC Genoa Institute 2010</b>		
12.20pm – 1.00pm	<b>AGM &amp; election of ATCA Board – Poster presentations</b>			
1.00pm – 1.45pm	<b>LUNCH – Poster presentations continue</b>			
Time	Venue Chair	Stream 1	Facilitator	Stream 2
1.45pm – 2.15pm	<b>Barry Evans</b>	<b>Ms Gayle Anderson, Assist. Secretary, DoHA, Substance Misuse and Indigenous Wellbeing Branch – Future Directions for AOD. Where do TCs fit in the picture?</b>	<b>Rebecca Davey</b>	<b>Auditor Training – ATCA Standards for Therapeutic Communities (Contd).</b>
2.15pm-3.45pm	<b>Emeritus Professor Ian Webster AO</b>	<b>The Changing Landscape in Health Care – Roundtable.</b> David Best (Turning Point/Monash University), Gino Vumbaca (ED, ANCD), David Templeman (CEO, ADCA), David Crosbie (CEO, Community Council of Australia), Prof Allan Fels AO (Chair, MH Commission), Frank Quinlan (CEO, MHCA), Michael Thorn (CEO, FARE), Barry Evans (Chair, ATCA), Jackie Long (ATCA Director, NZ)		Participants in the Auditor Training will expect to gain some understanding of the processes involved in being part of a team conducting the external peer review. The training will also assist participants in providing support to their own TCs as they commence the self-review process, which is a necessary step in becoming ready to undertake the final external review as part of a quality improvement process.
3.45pm – 4.05pm	<b>AFTERNOON TEA</b>			
4.05pm – 4.30pm	<b>Lynne Magor-Blatch</b>	<b>ATCA Board – Moving into the Future.</b> Introduction of 2012 Board of Directors. Challenges and directions for the year ahead		
4.30pm	<b>CLOSING AND INVITATION TO TASMANIA IN AUGUST 2012</b>			

# A COMMON VOICE – THE SHAPE OF FUTURE SERVICE DELIVERY

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## The Challenges

We are in dynamic times within the AOD and wider health field. The landscape is changing with the establishment of a major health reform agenda to address significant challenges within the health system. As the population ages we will increasingly see people living for many years with chronic health conditions, many of which are largely preventable and can be attributed to modifiable risk factors such as smoking, excessive alcohol and other drug use, obesity and lack of physical exercise.

## Health Reform Agenda

The three major reports, commissioned by the Australian Government, which provide a guide to the health reform agenda are:

- National Health and Hospitals Reform Commission – A healthier future for all Australians
- Draft National Primary Health Care Strategy – Building a 21st Century primary health care system
- National Preventative Health Taskforce – Australia: The healthiest country by 2020

The first two reports include the following goals:

1. Addressing major equity and access issues that affect health outcomes for people
2. Redesigning the health system so that it is positioned to respond to emerging health challenges
3. Creating an agile and self-improving health system for long-term sustainability
4. Improving access and reducing inequity
5. Better management of chronic conditions
6. Increasing the focus on prevention
7. Improving quality, safety, performance and accountability

While priority areas set by the National Preventative Health Taskforce are: a) Obesity; b) Tobacco and c) Alcohol.

## National Health & Hospitals Network and Medicare Locals

The National Health and Hospitals Network Act 2011 was passed in July 2011, and represents the biggest changes to Australia's health and hospital system since the introduction of Medicare, and one of the most significant reforms. It provides that the National Health and Hospitals Network will be a nationally unified and locally controlled health system, and includes the establishment of The Australian Commission on Safety and Quality in Health Care. Under the agreement, the Commonwealth will take on 60% of the efficient cost, with hospitals managed by Local Hospital Networks, and 100% funding and policy responsibility for GP, primary care and aged care services. Medicare Locals will be established to coordinate services in local areas.

Medicare Locals will be primary health care organisations established to coordinate primary health care delivery and tackle local health care needs and service gaps. They will drive improvements in primary health care and ensure that services are better tailored to meet the needs of local communities. They will have a number of key roles in improving primary health care services for local communities, including identifying where local communities are missing out on services they might need and the coordination of services to address those gaps.

## Lead Clinicians Groups

In May 2010, the Australian Government also announced funding to improve clinical engagement in Australia, recognising that clinical leadership and engagement continues to be an essential part of a well integrated and functioning health system. Lead Clinicians Groups are therefore being

established to support clinicians to lead continuous improvement in effective and quality health care and to safeguard high standards of care.

At a national level, the National Lead Clinicians Group has been established. It is expected that it will report to and provide advice to the Minister for Health and Ageing on:

- prioritisation of the development, and strategies for implementation, of national clinical standards and guidelines as formulated by the National Health and Medical Research Council and the Australian Commission on Safety and Quality in Health Care;
- opportunities to improve the quality, effectiveness and efficiency of the Australian health system; and
- clinical matters as requested by the Minister for Health and Ageing.

### **National Drug Strategy 2010-2015**

Also at a national level, was the endorsement of the National Drug Strategy in February 2011, and the approval by the Council of Australian Governments (COAG) of a comprehensive reform plan for a new system of ministerial councils. These changes will see a fundamental shift towards a council system focused on strategic national priorities and new ways for COAG and its councils to identify and address issues of national significance. Standing councils on health and on police and emergency management will progress priority issues relevant to their portfolio areas.

With the disbandment of the Ministerial Council on Drug Strategy, the Intergovernmental Committee on Drugs (IGCD), which includes health and law enforcement officials from all Australian jurisdictions and New Zealand, is tasked with managing the ongoing work of the National Drug Strategy. In addition to the four standing committees focusing on alcohol, tobacco, illicit drugs and pharmaceutical drug misuse, the IGCD has, and will continue to establish time-limited working groups during the life of the strategy.

The working groups will be given discrete, time-limited tasks which align with priority areas identified in the strategy. The three immediate priority areas are the development of the Aboriginal and Torres Strait Islander Peoples Drug Strategy, a national drug research and data strategy, and a national workforce development strategy.

The ATCA, through the Executive Officer, is represented on two of these – the Expert reference Group, established under the **National Drug And Alcohol Clinical Care and Prevention (DA-CCP) Model**, and the **National Workforce Development Strategy Working Group**.

### **Australian Government Mental Health and Drug Treatment Division (MHDTD)**

The Mental Health and Drug Treatment Division focuses on mental health, suicide prevention, social and emotional wellbeing and substance misuse treatment programs and comprises four branches:

- Mental Health Services Branch
- Mental Health Early Intervention and Prevention Branch
- Mental Health System Improvement Branch
- Substance Misuse and Indigenous Wellbeing Programs Branch – which will administer the Substance Misuse Service Delivery Grants Fund.

Of particular importance currently is the work being undertaken by KPMG to develop a national quality framework linked to an outputs- and outcomes-based funding model (also to be developed) to drive quality improvements in service delivery, focussing on non-government organisations funded under the NGOTGP and the Improved Services Initiative, but with the potential for possible broader application. The quality framework and funding model are intended to inform the next funding round for the two programs.

**ATCA 2011 SYMPOSIUM & ANNUAL GENERAL MEETING**

**TUESDAY 29 NOVEMBER 2011**

**“A COMMON VOICE – THE SHAPE OF FUTURE SERVICE DELIVERY ”**

**SALVATION ARMY, 140 ELIZABETH STREET, SYDNEY.**



**REGISTRATION FORM & TAX INVOICE**

Australasian Therapeutic Communities Association ABN: 41 893 350 365

**REGISTRATION DETAILS – Please use one registration per delegate**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Organisation: \_\_\_\_\_ State/Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**SYMPOSIUM FEES - Australian dollars (including GST)**

Registration Type (Please tick)	Cost AUD\$	Total AUD\$
Registration (ATCA Member)	\$90.00	_____
Registration (Non ATCA Member)	\$120.00	_____

Please tick the box if you are registering for the Standards Auditor training

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- 1. .... 2.....
- 3. .... 4. Name of person coming for free: .....

**POSTER PRESENTATION**

- 1. Are you intending to provide a presentation during the Poster Presentation session? Yes No
- 2. Indicate if this is a: Poster or Powerpoint Presentation. (Please note you will need to provide your own laptop computer)
- 3. Title of the presentation.....

**PAYMENT DETAILS**

Name of Cardholder: \_\_\_\_\_ **TOTAL PAYMENT AUD\$** \_\_\_\_\_

Card No: \_\_\_\_\_ Mastercard Bankcard Visa

Expiry date: \_\_\_\_\_ / \_\_\_\_\_ Signature: \_\_\_\_\_

Post registration with cheque made out to:  
ATCA Conference Account, and post to:  
Lynne Magor-Blatch, ATCA, PO Box 3075,  
Sangster Place, Wanniasa ACT 2903, Australia

Fax registration with  
credit card details to:  
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