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| Episode of Care and Course of Treatment Derivation Rules |
| 2022-23 |
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Contents

[About this document 2](#_Toc114503158)

[Forensic client definition 2](#_Toc114503159)

[Part 1: Course of Treatment (COT) 4](#_Toc114503160)

[A. Service events funded using the COT funding unit 4](#_Toc114503161)

[Part 2: Episode of Care (EOC) 4](#_Toc114503162)

[A. Service events funded using EOC funding unit 4](#_Toc114503163)

[B. Significant goal achieved criteria for EOC funding unit 5](#_Toc114503164)

[C. Certain youth service events funded using EOC 5](#_Toc114503165)

[D. Note on reporting requirements for forensic EOC activity 5](#_Toc114503166)

[Part 3: Commonwealth and PHN funded activities 6](#_Toc114503167)

[EOC and COT Derivation Rules 2022-23 – Change log 6](#_Toc114503168)

[Appendix A – Service event funding sources and funding units (VADC Specifications 2022-23) 7](#_Toc114503169)

# About this document

This document describes the closed Episode of Care (EOC) and Course of Treatment (COT) derivation rules for 2022-23. These rules are used by the department to determine how EOC and COT are attributed for state-funded service events delivered by alcohol and other drug (AOD) treatment service providers.

The EOC or COT is the funding unit for non-recommissioned state funded AOD services, primarily youth and Aboriginal non-residential treatment services. State funded residential and recommissioned services use the Drug Treatment Activity Unit (DTAU). A separate document has been produced to describe how funding units are counted for these services.

An activity will only be allocated EOC or COT if it is reported with the correct service stream code and funding source code combination. A list of the code combinations is included at **Appendix A.**

Refer to Part 2 and 3 of the Alcohol and Other Drugs Program Guidelines for information about the specifications for each program and service (available at <https://www.health.vic.gov.au/aod-service-standards-guidelines/alcohol-and-other-drug-program-guidelines>).

## Forensic client definition

Refer to the *Forensic AOD Client Definition Policy 2022-23* available at <https://www.health.vic.gov.au/aod-treatment-services/forensic-services>

Services delivered to forensic clients will contribute towards the service provider’s forensic performance targets.

### Defining characteristics of a forensic AOD client

Forensic clients are people who access AOD treatment as a result of their contact with the criminal justice system. Most forensic clients are mandated to attend treatment as a condition of their order or diversion. However, some are referred voluntarily via ’Other Diversion’ pathways.

The department considers a forensic client as having one or more of the following defining characteristics:

* Client has judicial direction to undertake assessment/treatment
* Clients assigned a Justice Case Manager
* Clients receiving treatment as a diversion from the criminal justice system
* Clients with an ACSO COATS identifier code / in Penelope / has a TCA and/or
* Clients with current or future matters (i.e. court date pending, rather than past involvement) in the criminal justice system

### Accepted forensic client types

#### 1. ACSO COATS clients

The Australian Community Support Organisation’s (ACSO) Community Offenders Advice and Treatment Service (COATS) undertakes the majority of forensic intake and assessment services for forensic clients.

The following client types assessed by ACSO meet the department’s definition for a forensic client:

* Clients on Community Corrections Orders (CCO), including those on a combined CCO/imprisonment order, and those on parole
* Step Out program participants and
* Family Drug Treatment Court program participants

#### 2. Youth Justice referral clients

Clients on Youth Justice Community Based Orders meet the department’s definition for a forensic client.

#### 3. ‘Other Diversion’ referral clients

Catchment-based intake services provide intake, assessment and brief intervention services for voluntary diversion clients. These clients are voluntary as they are not mandated to attend AOD treatment.

‘Other Diversion’ clients will meet the department’s definition for forensic client if they:

1. are not on an existing Justice order or caution; AND
2. meet one or more of the following diversion referral types:
* Koori Court
* Magistrates Court, including Drug Court, Court Integrated Services Program (CISP), CISP Remand Outreach Program (CROP), Court Referral and Evaluation for Drug Intervention and Treatment (CREDIT) and Bail Support Program, Neighbourhood Justice Centre, Assessment and Referral Court (ARC) List and First Offender’s Court Intervention Service (FOCiS)
* County Court
* Family Court
* Drink and Drug Driver programs
* Child Protection Services
* Referral from Custodial Health Alcohol and Drug Nurse
* Referral from solicitor
* Referral from Victoria Police, including Drug Diversion Assessment Line (DDAL) and the Cannabis Cautioning Program
* Referral from Salvation Army Chaplain
* Self-referral, only in cases where the client meets the defining characteristics for a forensic AOD client as stated in this policy

### Excluded clients

The following clients do not meet the definition for a forensic client:

* Clients with a Family Reunification Order
* Clients with an Intervention Order

### Reporting forensic service delivery in the VADC

The department identifies forensic activity where the service event is reported with Referral ‘IN’ (see 5.7.2 Referral – direction in the *VADC Data Specification 2022-23*) & the client’s ACSO identifier code (see *5.7.1 Referral—ACSO identifier – N(7)* in the *VADC Data Specification 2022-23*) or where a specific funding source code is reported.

Refer to Note on reporting requirements for forensic EOC activity

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### Review of forensic client definition policy for 2022-23

The review of the forensic client definition policy planned to take place over the last two years was placed on hold due to the prioritisation of work relating to the COVID-19 pandemic and forensic demand issues. To ensure the future sustainability of forensic AOD service delivery, this review has recommenced and will be reconsidered in conjunction with relevant stakeholders across the Justice system in the context of Mental Health Royal Commission recommendations.

## Part 1: Course of Treatment (COT)

A COT is allocated for all error free service events that meet the following criteria:

## Service events funded using the COT funding unit

This rule is used for service events that are only funded using the COT funding unit. These events are those with a funding source code and service event code combination that is marked with “C” in the *Service event funding sources and funding units* table (see Appendix A).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **If funding source and service event combination intersect at:** | **AND** | **If at least one contact has a relationship to client:**  | **AND** | **If at least one contact has a duration of** | **THEN** | **COT** |
| “C”**Note:** excludes funding source codes *500 – Commonwealth (non-PHN)* and *502 –507 Commonwealth PHN* as the above rule only applies to state funded services. |  | 0 – self (person of concern)1 – spouse/partner2 – parent/stepparent3 – child/stepchild4 – sibling5 – friend/neighbour |  | > 0 mins |  | 1 |

## Part 2: Episode of Care (EOC)

An EOC is allocated for all error free and closed service events that meet the following criteria:

## Service events funded using EOC funding unit

This rule is used for service events that are only funded using the EOC funding unit. These events are those with a funding source code and service event code combination that is marked with “E” and “E[S]” in the *Service event funding sources and funding units* table (see Appendix A).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **If funding source and service event combination intersect at:** | **AND** | **If at least one contact has a relationship to client:**  | **AND** | **If at least one contact has a duration of** | **THEN** | **EOC** |
| “E”, or“E[S]”**Note:** excludes funding source codes *500 – Commonwealth (non-PHN)* and *502 –507 Commonwealth PHN* as the above rule only applies to state funded services. |  | 0 – self (person of concern)1 – spouse/partner2 – parent/stepparent3 – child/stepchild4 – sibling5 – friend/neighbour |  | > 0 mins |  | 1 |

## Significant goal achieved criteria for EOC funding unit

An EOC is allocated to all service events that meet the criteria described in Part 2A and the following:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **If funding source and service event code combination intersect at:** | **AND** | **If significant goal achieved is:** | **THEN** | **EOC:** |
| “E” |  | - |  | 1 |
| “E[S]” |  | 1 - client achieved a significant goal |  | 1 |

**Note:** The block funding codes are only applicable to agencies who have been notified in writing to use the block funding codes e.g. via the funded activity letter.

## Certain youth service events funded using EOC

This rule is used for certain youth alcohol and other drug treatment services that are EOC funded but are unable to be reported using the above rule in Part 2: A or B. Note: These EOC funded activity are not shown in *Service event funding sources and funding units* table (Appendix A).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **If funding source:** | **AND** | **If service stream:** | **AND** | **If target population:** | **THEN** | **EOC:** |
| 100 – General;  |  | 11 – Non-residential withdrawal; OR20 – Counselling |  | 6 - Youth |  | 1 |
| 102 – Drug Diversion Appointment Line |  | 20 - Counselling |  | 6 - Youth |  | 1 |

## Note on reporting requirements for forensic EOC activity

Where funding letters stipulate forensic targets, EOC activity will be counted toward a forensic target when the following reporting requirements are met:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **If EOC:** | **AND** | **If referral direction:** | **AND** | **If Referral—ACSO identifier:** |
| Meets the rules in Part 2: A or B |  | 1 – referral in |  | Not null or 9999999 |

#### Obtaining an ACSO identifier code

**ACSO COATS clients**

Clients that are assessed by ACSO COATS and referred to a service provider for treatment will have an existing service file and ACSO identifier code in Penelope – ACSO’s client management software.

**Youth Justice clients**

Youth Justice Case managers may refer clients on a Youth Justice Community Based Order in one of two ways: to ACSO COATS, or directly to a service provider for intake and assessment. Service providers are required to notify ACSO COATS using the Youth Justice Referral Form (<http://coats.acso.org.au/forms-referrals/youth-justice-referral-form/>) when they are referred a Youth Justice client for treatment. This will create a service file and ACSO identifier code for the client in Penelope.

**‘Other Diversion’ referral clients**

If the client is not referred by ACSO COATS (i.e. is an ‘Other Diversion’ referral), the service provider will need to apply to ACSO COATS to have a service file and identifier code created. For information about obtaining an ACSO identifier code for diversion referrals, visit <http://coats.acso.org.au/forms-referrals/diversion-referral-form/>.

## Part 3: Commonwealth and PHN funded activities

Funding source code 500 – Commonwealth (non – PHN) and 502-507 – Commonwealth PHN funded activities does not contribute to Victorian Department of Health performance but may be included in information provided to the Commonwealth, for example the annual alcohol and other drug treatment services national minimum data set (AoDTS NMDS) submission.

# EOC and COT Derivation Rules 2022-23 – Change log

|  |  |  |
| --- | --- | --- |
|  | **Detail of change** | **Date** |
| **1** | **COT and EOC rules –** a separate heading for COT and EOC with the list of rules specific to the funded activity. | 1 Aug 2022 |
| **2** | **New DTAU funded activity** – Service stream 52- Bridging Support and funding source 127-Vic State Gov-Aboriginal-specific facility rehabilitation, will be counted as a DTAU funded activity. Refer to Appendix A. | 1 Aug 2022 |
| **3** | **Forensic EOC activity –** forensic targets will exist if it is stipulated in the funded activity letter | 1 Aug 2022 |
| **4** | **Commonwealth and PHN activities – these activities are not included in the Victorian Department of Health performance reports but is included in information provided to the Commonwealth.** | 9 Aug 2022 |

# Appendix A – Service event funding sources and funding units (VADC Specifications 2022-23)

| **Funding Source code** |  |  |
| --- | --- | --- |
|  | 10- Residential Withdrawal | 11-Non-Residential Withdrawal | 20-Counselling | 21-Brief Intervention | 22-Ante & Post Natal Support | 30-Residential Rehabilitation | 31-Therapeutic Day Rehabilitation | 33 – Residential pre-admission engagement  | 50-Care & Recovery Coordination | 51-Outreach | 52-Bridging Support | 60-Client education program | 71-Comprehensive assessment | 80-Intake | 81-Outdoor Therapy (Youth) | 82-Day Program (Youth) | 83-Follow up | 84-Supported Accommodation |
| 0 –Not funded | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| 1- Blocked funded Funding unit unspecified | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| 2- EOC Block funded |  | E[S] | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 3- DTAU Block funded | D | D[L] | D[L] |  |  | D | D |  | D |  |  |  | D | D |  |  |  |  |
| 100-Vic State Gov – General | D | D[L] | D[L] |  | E[S] | D | D |  | D | E[S] |  | C | D | D | E[S] | E[S] |  | E[S] |
| 102-Vic State Gov- Drug Diversion Appointment Line (DDAL) |  |  | D | D |  |  |  |  |  |  |  |  | D |  |  |  |  |  |
| 103-Vic State Gov-Aboriginal Metro Ice Partnership |  |  | E[S] |  |  |  |  |  | E[S] |  |  |  |  |  |  |  |  |  |
| 104-Vic State Gov-Pharmacotherapy Outreach |  |  | E[S] |  |  |  |  |  |  | E[S] |  |  |  |  |  |  |  |  |
| 105-Vic State Gov-Specialist Pharmacotherapy Program |  |  | E[S] |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 106-Vic State Gov-Slow Stream Pharmacotherapy |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 107-Vic State Gov-ACCHO Services-Drug Services |  |  | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 108-Vic State Gov-ACCHO-AOD Nurse Program |  | E[S] | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 109-Vic State Gov-Low Risk Offender Program |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 111-Vic State Gov-Residential dual diagnosis  |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 112-Vic State Gov-8 hour individual offender  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 113-Vic State Gov -15 hour individual offender  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 114-Vic State Gov -24 hour group offender  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 115-Vic State Gov -42 hour group offender  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 116-Vic State Gov-Small Rural Health funding |  | D[L] | D[L] | D |  |  | D |  | D | E[S] | D |  | D |  |  | E[S] |  |  |
| 117-Vic State Gov-Sub-acute withdrawal  | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 118-Vic State Gov-Three-stage withdrawal stabilisation program  | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 119-Vic State Gov-Mother/baby withdrawal program  | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 120-Vic State Gov-Youth-specific facility withdrawal | D |  |  |  |  |  |  | D |  |  | D |  |  |  |  |  |  |  |
| 121-Vic State Gov-Residential Withdrawal (general) | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 123-Vic State Gov-6-week rehabilitation program |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 125-Vic State Gov-Family beds program |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 126-Vic State Gov-Youth-specific facility rehabilitation |  |  |  |  |  | D |  | D |  |  | D |  |  |  |  |  |  |  |
| 127-Vic State Gov-Aboriginal-specific facility rehabilitation |  |  |  |  |  | D |  | D |  |  | D |  |  |  |  |  |  |  |
| 128-Vic State Gov-Residential Rehabilitation (general) |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 129-Vic State Gov-Stabilisation model |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 130-Vic State Gov-Bridging support- Post-residential withdrawal  |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 131-Vic State Gov-Bridging support- Post-residential rehabilitation  |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 132-Vic State Gov-Bridging support -intake |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 133-Vic State Gov-Bridging support- assessment |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 134-Vic State Gov-Brief intervention- intake |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 135-Vic State Gov-Brief intervention- assessment |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 136-Vic State Gov-Brief intervention-counselling |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 137- Vic State Youth specificCommunity treatment |  | E[S] | E[S] |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 500-Commonwealth (non PHN) | E[S] | NA | E[S] | NA | NA | E[S] | NA | NA | NA | E[S] | NA | NA | NA | NA | NA | NA | NA | E[S] |
| 502- PHN North Western Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 503- PHN Eastern Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 504- PHN South Eastern Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 505- PHN Gippsland |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 506-PHN Murray |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 507- PHN Western Victoria |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 999-Unknown | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |

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