New intake and assessment arrangements for alcohol and other drug services
Information for statewide and non-recommissioned services

What changes are happening?
In December 2016, the Victorian Government announced changes to the alcohol and other drug system to make accessing treatment simpler and easier for clients.

Consistent with directions identified in the Independent review new arrangements for the delivery of mental health community support services and drug treatment services (the Aspex Review) and following extensive sector and community consultation, responsibility for conducting comprehensive assessment and treatment planning for voluntary clients will move from intake providers to treatment providers.

Intake services will continue to be the primary point of entry to the state-funded Victorian alcohol and other drug treatment system.

These changes will mainly affect recommissioned service providers, however treatment services that were not recommissioned are expected to collaborate closely with intake services and operate in accordance with the new assessment arrangements.

New intake and assessment arrangements will commence on 1 July 2017 (see Figure 1 below).

What are the benefits of the change?
A key reason for transitioning to the new arrangements is to ensure that accessing treatment is simple and easy, no matter which pathway a client chooses.

Under the new arrangements, the initial intake and triage will be streamlined. The new assessment arrangements will allow treatment providers to develop therapeutic relationships with clients earlier. This will improve client experiences by improving engagement and reducing the number of times they have to tell their story.

Retaining catchment-based intake ensures a consistent statewide approach for clients experiencing alcohol and other drug issues. This enables greater oversight of options for treatment, providing clients with clear choices and a greater capacity for a high-quality, joined-up service response.

This factsheet is directed at statewide and non-recommissioned alcohol and other drug services including:
- statewide specialist services
- residential services
- youth-specific services
- Aboriginal-specific services
- Commonwealth-funded providers.

It explains some of the changes that are happening in the treatment system. These changes are designed to benefit clients and shouldn’t disrupt their recovery journey.

Read on to find out what the new arrangements are, and where you can go for more information.
How will services work together under the new arrangements?

Strong integration between services in the alcohol and other drug treatment system and other sectors is critical to ensure that a client’s holistic needs are being met and that their continuing care can be carried out effectively.

**Catchment-based intake services**

Catchment-based intake services are the critical point of entry into the alcohol and other drug treatment system. They provide local knowledge to support client pathways to all Victorian services.

**Intake, triage and referral**

Intake services work closely with the statewide screening and referral service, DirectLine, and other treatment providers to facilitate client intake, triage, and referral to treatment, including the use of brief interventions and bridging support as required. They also support families and significant others of people with alcohol and other drug issues.

Using clinical judgement, and supported by the Department of Health and Human Services-endorsed standardised intake tool, intake services identify a person’s level of risk and need in order to determine appropriate treatment pathways. Referrals are made according to client need and service availability, rather than being based on relationships between service providers.

See **key contacts** for more information about catchment-based intake services across Victoria.

**System oversight**

Intake services maintain records of client flow across each catchment, within relevant legislative obligations, in order to understand service capacity in the catchment and inform the pattern and volume of referral from intake to treatment and support services.

With the consent of the client, catchment-based intake services will provide a client’s intake information to the receiving treatment provider. In turn, **all treatment services should collaborate to facilitate information transfer about clients and advise local intake services of the movement of clients into and out of their services.** Local protocols and agreements between intake service providers and treatment service providers support this process.

**Assessment**

From 1 July 2017, adult community-based alcohol and other drug treatment providers (recommissioned services) will provide comprehensive assessment and treatment planning for clients.

Assessment is used to determine the level and type of treatment and support required by presenting clients. Those providing assessment use the department-endorsed comprehensive assessment tool and clinical judgement. Optional assessment modules provide a detailed understanding of particular strengths, issues or experiences that may have been flagged at intake, or that may require further consideration.

Assessment is conducted by treatment providers to enable therapeutic treatment relationships to begin at the point of assessment. Where possible, the assessment should be conducted by a clinician who is appropriate for the client’s ongoing treatment to reduce ‘extra steps’ in a client’s treatment journey.

Practitioners providing assessment develop an initial treatment plan for all clients that forms part of a package of referral information provided to services engaged in the client’s treatment pathway.

**Referring to non-recommissioned alcohol and other drug services**

**Statewide specialist services**

Any health and human service provider can contact DirectLine for information and advice. Calls that require specialist medical advice are referred to drug and alcohol clinical advisory service (DACAS) consultants who are addiction medicine or psychiatry specialists.

Catchment-based intake services liaise with statewide specialist service providers, such as the statewide neuropsychology service, to support smooth access and clear pathways for clients to and from these services and other services including primary care, housing, mental health, family and LGBTI services.

Any service provider referring clients to statewide specialist services may refer clients directly to that service, provided the catchment-based intake service is notified of the referral. As these services provide specialist assessments, clients are not required to have been comprehensively assessed using the department-endorsed tool prior to their referral. However, if a client
has previously been comprehensively assessed, this information should journey with the client to the specialist provider to minimise duplication.

**Residential services**

Any alcohol and drug treatment service provider can refer clients directly to residential services across Victoria, provided they have been comprehensively assessed.

Pathways into residential treatment services include catchment-based intake referral, same-service referral (i.e. from another stream within the same treatment service), or referral from another alcohol and other drug treatment service (including Aboriginal Community Controlled Health Organisations).

Residential services should provide, with the appropriate consent, client summaries to the original referral source and the relevant catchment-based intake service as well as to the services the client is linked with at the completion of treatment.

**Youth and Aboriginal-specific services**

Youth and Aboriginal-specific services accept referrals from catchment-based intake services, as well as self-referrals and direct referrals from other services or through DirectLine.

Catchment-based intake services should be familiar with pathways to population-specific service responses such as those offered by the Youth Drug and Alcohol Advice (YoDAA) platform.

Clients accessing youth or Aboriginal-specific services only are not required to be comprehensively assessed using the department-endorsed tools. These services may utilise other tools as clinically appropriate. If these clients subsequently access other alcohol and other drug services and comprehensive assessment is required, previous assessment information should journey with the client to their new treatment provider to reduce duplication.

Youth and Aboriginal-specific services may refer clients directly to other alcohol and other drug treatment services. Agreed processes for informing intake of direct youth and Aboriginal client referrals should be negotiated between those services and the local catchment-based intake provider.

**Pharmacotherapy services**

Any service may contact DirectLine on behalf of clients to obtain information about pharmacotherapy providers and specialist pharmacotherapy consultative services.

Clients seeking a pharmacotherapy referral will only require intake at catchment-based intake services where additional alcohol and other drug treatment is sought.

**Commonwealth-funded services**

Catchment-based intake services are mindful that some Commonwealth-funded alcohol and other drug services are required to deliver assessment as part of their funded model of care.

Intake services and Commonwealth-funded providers should work together to minimise the assessment burden on clients. Catchment-based intake services may provide intake and refer the client directly to the Commonwealth-funded service where appropriate.

**Alternative pathways**

**Direct intake (where urgent need exists)**

It is expected that local services will work together to agree on options for facilitating access to intake services for clients that present directly to treatment services.

Flexibility remains for treatment providers to conduct direct intake or deliver a brief intervention for clients requiring an immediate face-to-face service, or where urgent need exists. Where intake is conducted by treatment providers, this information should be shared with the catchment-based intake provider.

**Pathways between services**

Person-centred treatment is a governing principle in the alcohol and drug treatment service system. Clients may choose to seek intake services outside their residential catchment. There may also be cases where a client requires or prefers ongoing treatment to be delivered by a provider who is not their existing treatment provider. In order to refer a client appropriately, treatment providers should work with the client and intake services to understand the range of treatment options available to meet the client’s needs.

Clients seeking additional treatment beyond a current course are not required to access the catchment-based intake service. In most cases, the existing treatment provider can facilitate access to further treatment and inform the catchment-based intake service of the new course of treatment or episode of care.

Clients may be referred for re-assessment if a significant change in need or life complexity suggests that this is warranted.
Where do I go for more information?

If you have any questions about the transition to new intake and assessment arrangements, please:

- speak with the catchment-based intake service in your relevant catchment
- call DirectLine on 1800 888 236 or go to <www.directline.org.au>.


New Alcohol and other drugs program guidelines were released in April 2017. They consolidate and refresh existing advice from the department in three parts:

- **Part 1** outlines the broad approach the department takes in relation to prevention, harm reduction and treatment.
- **Part 2** outlines the service specifications for particular programs and services.
- **Part 3** outlines key regulation and reporting requirements.

The guidelines have been updated to describe the objectives and functions of the treatment system under the new arrangements, and are available for download from the department’s website <www2.health.vic.gov.au/alcohol-and-drugs/aod-service-standards-guidelines/aod-program-guidelines>.

For further information about DACAS, visit <www.dacas.org.au> or call 1800 812 804.

For further information about YoDAA, visit <www.yodaa.org.au> or call 1800 458 685.

To receive this publication in an accessible format phone 9096 0000 using the National Relay Service 13 36 77 if required, or email aod.enquiries@dhhs.vic.gov.au

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**Figure 2 Alcohol and other drug treatment system components**

**Entry points**

Self-referrals and direct referrals from general or specialist health and community services

**Intake**

- DirectLine statewide screening and referral service
- Catchment-based intake services

**Assessment and treatment**

- Adult community-based services
  - Assessment
  - Counselling
  - Non-residential withdrawal
  - Residential withdrawal
  - Therapeutic day rehabilitation
  - Residential rehabilitation
  - Care and recovery coordination
  - Pharmacotherapy*

- Population-specific services
  - Youth AOD
  - Aboriginal AOD
  - Forensic AOD

**Additional support**

- AOD clinical advisory service (DACAS)
- Statewide neuropsychology service
- Victorian dual diagnosis initiative

- Women’s AOD service (WADS)
- Mother and baby residential withdrawal
- Compulsory drug withdrawal program

**Key**

- Orange: Client pathways
- Blue: Population-specific services
- White: Statewide specialist services
- Green: Adult community-based services

*Existing clients can be referred directly to a community-based pharmacotherapy provider.
## Key contacts

The DirectLine service finder is also accessible at [www.directline.org.au/service-finder](http://www.directline.org.au/service-finder).

<table>
<thead>
<tr>
<th>Provider / consortium</th>
<th>Contact</th>
<th>Local government area</th>
<th>Catchment</th>
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<tbody>
<tr>
<td>Bayside Integrated Services</td>
<td>1800 229 263 9690 9778</td>
<td>Cities of: Port Phillip, City of Glen Eira, Bayside, Stonnington, Kingston</td>
<td>Bayside</td>
</tr>
<tr>
<td>South Eastern Consortium of AOD Agencies (SECADA)</td>
<td>1800 142 536</td>
<td>Cities of: Greater Dandenong, Casey, Cardinia Shire</td>
<td>South East Melbourne</td>
</tr>
<tr>
<td>Frankston and Mornington Drug and Alcohol Services (FaMDAS)</td>
<td>1300 665 781</td>
<td>City of Frankston Mornington Peninsula Shire</td>
<td>Frankston-Mornington Peninsula</td>
</tr>
<tr>
<td>Eastern Health Turning Point AOD Consortium</td>
<td>1800 778 278</td>
<td>Cities of: Boroondara, Manningham, Whitehorse, Monash</td>
<td>Inner East</td>
</tr>
<tr>
<td>EACH SURE Consortium</td>
<td>1300 007 873</td>
<td>Cities of: Knox, Maroondah Shire of Yarra Ranges</td>
<td>Eastern Melbourne</td>
</tr>
<tr>
<td>UnitingCare ReGen and Odyssey House Victoria:</td>
<td>1800 700 514</td>
<td>Cities of: Moreland, Moonee Valley, Melbourne, Yarra</td>
<td>Inner North</td>
</tr>
<tr>
<td>North and West Metro Alcohol and Other Drug Service</td>
<td></td>
<td>Cities of: Whittlesea, Darebin, Banyule Shire of Nillumbik Cities of: Brimbank, Hume, Maribyrnong Shire of Melton Cities of: Hobsons Bay, Wyndham</td>
<td>North Melbourne North West Melbourne South West Melbourne</td>
</tr>
<tr>
<td>Barwon AOD Consortium</td>
<td>1300 094 187 Colac area: 1300 763 254</td>
<td>City of Greater Geelong Shires of Colac-Otway, Surf Coast Borough of Queenscliff</td>
<td>Barwon</td>
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</tbody>
</table>
Other important statewide contacts are listed below.

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<thead>
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<tr>
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<td>Turning Point Eastern Health</td>
</tr>
<tr>
<td>Youth Drug and Alcohol Advice (YoDAA)</td>
<td>1800 458 685</td>
<td>Youth Support and Advocacy Service (YSAS)</td>
</tr>
<tr>
<td>Family Drug Help</td>
<td>1300 660 068</td>
<td>Self Help Addiction Resource Centre (SHARC)</td>
</tr>
</tbody>
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