

Department of Health

health

Victoria's alcohol and drug workforce framework

Implementation plan 2012–15

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Minister's foreword

Victoria's alcohol and drug workforce performs a critical role in providing effective, safe and high-quality alcohol and drug treatment. The alcohol and drug workforce is passionate, dedicated and committed to making a difference for people using services, but they are working within a fragmented system that can sometimes make it difficult to provide the best quality care. Building and sustaining a skilled and capable alcohol and drug workforce is a high priority for the Victorian Government.

Following a comprehensive review of alcohol and drug treatment services, work is now underway to reshape service delivery, enrich the workforce and better meet the needs of people and families grappling with their alcohol and drug use.

In June 2012, the Victorian Government released its policy statement *New directions for alcohol and drug treatment services: a roadmap*, which sets out a reform agenda for Victoria's alcohol and drug treatment system. The future system is person-centred, family and culturally inclusive and oriented towards helping people to recover, to reconnect with their families and to reintegrate into their communities.

These important reforms will change the way we work, both in government and in the community sector, to better meet the needs of individuals and their families. Learning from international experience, we know that real reform requires energy and commitment in the long term.

The government's 10-year strategy for change is set down in *Victoria's alcohol and drug workforce framework: strategic directions 2012–22*. This implementation plan is a companion document to the workforce framework. It builds on the existing strengths of the treatment system and identifies the priority activities to be undertaken over the next three years to strengthen the foundation for ongoing reform.

Some of these priorities include equipping the workforce with the necessary competencies, creating work settings and workplace cultures that support and reinforce practice change, and integrating alcohol and drug treatment services within the broader health and welfare sector so that people with complex needs can get the full range of services they need when they seek help with their alcohol and drug issues.

Building the alcohol and drug workforce to meet this vision will take time and commitment from everyone involved in the drug and alcohol treatment sector. By coming together to take action on this workforce plan, service providers, government, professional associations, consumer organisations, individuals and families will create a treatment system that people want to work in and that will recognise and reward them for the value of the work they do.

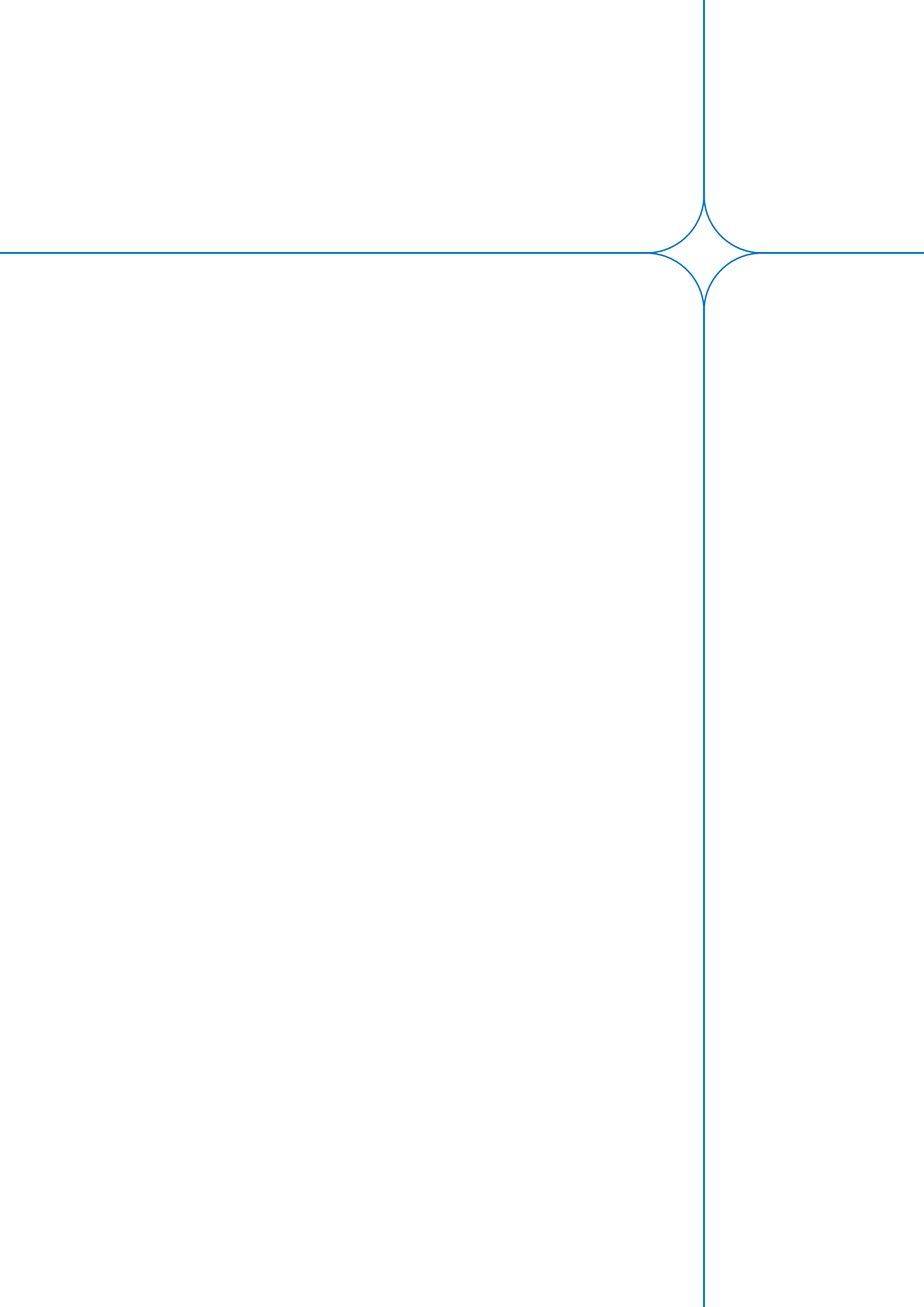


The Hon. Mary Wooldridge MP

Minister for Mental Health,
Women's Affairs and Community Services

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Purpose

The purpose of this Implementation Plan is to set out the priority implementation activities which need to be undertaken over the next three years to progress the vision and objectives of *Victoria's Alcohol and Drug Workforce Framework: Strategic Directions 2012–22*.

The plan builds on the strategic directions of the workforce framework and is based on a systematic analysis of priorities within each of the four key domains of workforce planning and development: **people, place, environment and performance**. Each domain has a clearly defined goal, a number of objectives and specific strategies that respond to the critical challenges and opportunities facing the workforce and the service system.

It is important to note that not all the objectives identified in the 10-year framework have actions allocated against them in this first three-year phase of implementation – these objectives will be considered in subsequent implementation planning.

The activities identified in this plan build on the existing strengths and innovations in the alcohol and drug workforce and establish the building blocks for a new approach to workforce development for Victoria's alcohol and drug treatment sector.

Together, the 10-year framework and this plan provide a vision and focused effort to ensure Victoria has a competent and sustainable alcohol and drug workforce that is well positioned to deliver high quality recovery-oriented services in a rapidly changing environment.

The framework at a glance

Victoria's alcohol and drug workforce framework: strategic directions 2012–22 sets the direction for future alcohol and drug workforce planning and development in Victoria. It provides a 10-year vision and strategy for the development of the workforce to ensure that it is well positioned to meet the needs of people with alcohol and drug issues and their families, now and into the future.

The framework focuses on the workforce and the central role that workers play in helping people to stop or reduce harms associated with their alcohol and drug use. It recognises that the treatment journey is unique and personal for every person seeking help, and for their family and support network. Ultimately the alcohol and drug treatment system aims to improve the health, wellbeing and social connectedness of people with substance use issues and their families.

The framework responds to and supports the government's reform strategy *New directions for alcohol and drug treatment services: a roadmap*, which will guide the redevelopment of the Victorian alcohol and drug treatment sector over the next decade. It also aligns with other important government reforms in human services delivery, such as Services Connect.

Reform of the alcohol and drug treatment system will make significant demands on alcohol and drug workers and organisations over the coming years. They will be leading and driving the transformation to a more person-centred, family and culturally inclusive system that is oriented towards helping people to recover, to reconnect with their families and to reintegrate into their communities.

Feedback from alcohol and drug treatment providers, as well as other key stakeholders, was central in identifying the key challenges facing the workforce and developing the strategies to address them.

The Victorian Government through the Department of Health will continue to work in partnership with individuals and families, service providers, training organisations, peak bodies and other government agencies to implement the framework and realise its vision.

Victoria's alcohol and drug workforce framework: strategic directions 2012–22, is located at www.health.vic.gov.au/aod/workforce.

A vision for Victoria's alcohol and drug workforce

Victoria will have a competent and sustainable alcohol and drug workforce

Victoria's workforce has the necessary knowledge, attitudes, values and skills to deliver high-quality treatment and care that meets the needs of people with alcohol and drug issues and their families, now and into the future.

A new approach

Victoria's alcohol and drug treatment workers are highly valued, dedicated and skilled people who are motivated by making a difference to the lives of people impacted by alcohol and drug use. They are a major strength of our system.

While there are significant professional rewards for working in the alcohol and drug treatment sector, it is not without its challenges. Service delivery occurs in an ever-changing environment, and it can be hard work keeping up. Workers must shift and move with changes in the needs of individuals and families, new policy, program and funding directions, emerging evidence about effective practice and new technologies.

In order to ensure that Victoria's alcohol and drug workforce has the capability, capacity and support to meet these challenges, new thinking about workforce planning and development is required.

Victoria's alcohol and drug workforce framework: strategic directions 2012–22 sets out a new approach to workforce planning and development in the alcohol and drug treatment sector that is reflective of evolving population demographics, the needs of individuals and families, and policy and funding directions.

This approach moves away from the traditional focus on the needs and development of the individual worker. Instead, it seeks to support workers, teams, organisations and the sector to maximise their capacity to deliver high-quality treatment and care and more positive outcomes for individuals and families.

It takes into account the unique challenges facing rural and regional services, which include the distance between communities and the difficulties in practising in isolation.

It seeks to be more responsive to generational changes in the labour market, meaning that many workers will not be working the same hours or practising in the same way as their predecessors.

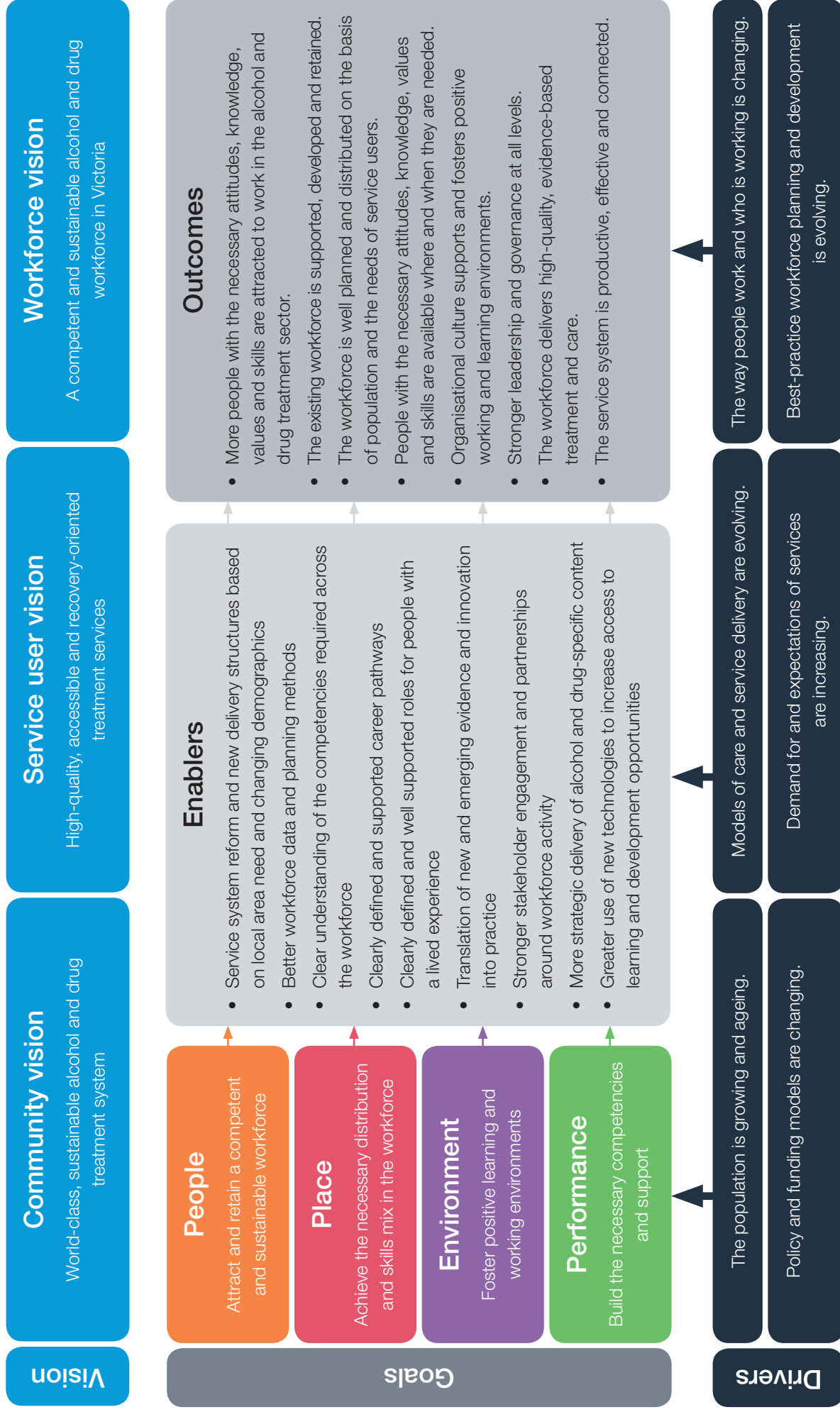
It calls for a closer partnership between the sector and government to enable more flexibility and responsiveness in workforce investments.

It will align with the Victorian Government's Services Connect initiative by ensuring learning and development activities support new ways of working and learning across professionals, teams and services.

Over the next three years this new approach will support the alcohol and drug workforce to realise its full potential through:

- stronger supports within work settings and across the sector
- better working environments
- easier access to high-quality, evidence-based learning and development opportunities
- promoting and rewarding cultures of excellence and continuous learning
- a greater sense of pride and professional identity in alcohol and drug work
- a stronger cross-system focus that supports new ways of working and learning across professions, teams and services.

A framework for change



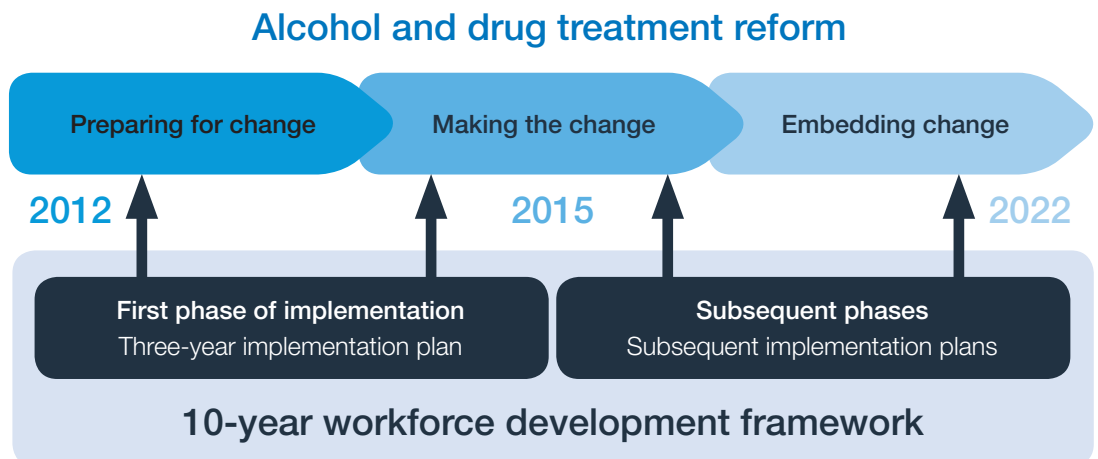
Priorities for action

The following section describes the priority actions to be undertaken over the next three years to further support and develop the alcohol and drug workforce. These actions have been identified as priorities through forecasting exercises undertaken with thought leaders in the drug and alcohol treatment sector, as well as systematic analysis of the objectives and strategies within each of the four domains of workforce planning and development. They have also been informed by feedback from alcohol and drug treatment service providers, as well as other key stakeholders.

Our priorities will evolve as economic, policy, service delivery and workforce parameters shift over time, so there needs to be flexibility in the planning and prioritisation of resources.

The first phase of implementation will firmly establish the building blocks for reform. The priority actions identified in this plan build on the existing strengths of the workforce, support early reform of the alcohol and drug treatment sector and lay the foundation for a new approach to workforce development for Victoria's alcohol and drug treatment sector.

Not all the objectives identified in the 10-year framework have actions allocated against them in this first three-year phase of implementation. At a later stage further consideration will be given to additional priorities to be progressed over the framework's 10-year lifespan and as the alcohol and drug treatment reform takes shape.



Monitoring and evaluation

Ongoing monitoring and evaluation is critical. It supports the continuous improvement of implementation activities and allows us to measure the effectiveness and efficiency of particular activities against the desired outcomes.

Evaluation works best when it is built into the workforce planning process from the beginning. For this reason a detailed evaluation plan will be developed to monitor implementation.

Evaluation will:

- track the use of allocated resources
- capture and disseminate successes and lessons learnt
- assess where to adjust strategies to better meet goals and objectives
- identify and respond to new issues and evidence as they arise.

Reporting

The evaluation plan will use the 10-year framework's strategic outcomes as the basis for a set of agreed performance indicators and measures for the priority activities within this three-year implementation plan.

The indicators and measures will align with the *Victorian innovation and reform impact assessment framework* developed by the Department of Health.

Qualitative and quantitative information will be collected to assess the extent to which these indicators are being met.

Working together for success

Implementing this framework is a complex challenge requiring a long-term outlook and whole-of-sector perspective. It will require a shared commitment from all stakeholders to collaborate in planning, design, implementation and evaluation. It will also take time.

The Victorian Government through the Department of Health will partner with the alcohol and drug treatment sector and other key stakeholders over the next three years to design and implement the activities identified in this plan.

People

Goal 1: Attract and retain workers with the necessary attitudes, knowledge, values and skills to maintain a competent and sustainable workforce.

For Victorian alcohol and drug treatment services to grow and develop, it is vital for them to recruit and retain a workforce with the necessary attitudes, knowledge, values and skills. Victorian service providers report significant challenges in attracting, recruiting and retaining workers across a range of roles and skills. There is a pressing need to support and strengthen existing workers and to attract new workers capable of delivering high-quality alcohol and drug treatment and care.

Note: Objectives 1.4 and 1.5 identified in the 10-year framework do not have actions allocated against them in this first three-year phase of implementation – these objectives will be considered in subsequent implementation planning.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 1.1 Plan for the development of a workforce that has the size, skill mix and distribution to meet projected population growth and need.</p>	<p>Expert working group Establish an expert working group to identify and advise the department on workforce reform and innovation, and to champion culture and practice change. Critical areas for early consideration may include:</p> <ul style="list-style-type: none"> • supporting, promoting and sustaining workforce solutions for alcohol and drug and mental health treatment reform • recovery-oriented practice in alcohol and drug and mental health services • registration or credentialing for the alcohol and drug treatment sector • redevelopment of the Minimum Qualification Strategy for the alcohol and drug treatment sector • review the role of the consumer/peer workforce • competency frameworks for the alcohol and drug and mental health sectors • effective workforce data collection. 	<ul style="list-style-type: none"> • Gather comprehensive workforce intelligence to inform and drive policy and reform directions. • Develop effective solutions to common problems across sectors in an integrated and systematic way to drive culture and practice change. • Forge links with human services reforms such as Services Connect. • Connect with human services workforces and share workforce learning and development opportunities. 	<ul style="list-style-type: none"> • Department of Health in collaboration with key sector partners and Services Connect 	<ul style="list-style-type: none"> • Establish the expert working group. • Develop and implement a workplan. • Review activity.

Objectives	Strategies	Aims	Responsibility	Actions
	<p>Workforce planning program</p> <p>Establish a workforce planning program that is responsive to changing system and local needs, service delivery and treatment approaches.</p> <p>Develop an agreed method for workforce planning that comprises:</p> <ul style="list-style-type: none"> • a standardised minimum workforce dataset • guidelines and tools to support workforce planning and data collection • data collection undertaken every two years • supply and demand modelling. 	<ul style="list-style-type: none"> • Plan for and respond to the changing needs of people with alcohol and drug issues. • Inform service and workforce design and the development of new treatment models consistent with reform. • Plan for the future requirements of the alcohol and drug workforce. • Identify opportunities for partnership with Services Connect. 	<ul style="list-style-type: none"> • Service providers • Victorian Alcohol and Drug Association • Department of Health central office and regions • Services Connect 	<ul style="list-style-type: none"> • Develop a method for workforce planning. • Establish standardised minimum workforce data collection practices for the alcohol and drug workforce. • Undertake a census of the alcohol and drug workforce. • Strengthen data collection practices for the alcohol and drug workforce and develop guidelines and tools to support planning. • Undertake cross-sector supply and demand modelling.
<p>Objective 1.2</p> <p>Engage with local and national workforce planning agencies to ensure that the long-term requirements of the alcohol and drug workforce are considered.</p>	<p>National profile for Victorian alcohol and drug workforce planning</p> <p>Engage national workforce policy and planning committees and organisations and build a case for the inclusion of the alcohol and drug workforce in national structures and initiatives.</p>	<ul style="list-style-type: none"> • Maximise opportunities to engage in and influence existing and new national workforce investment activities. • Ensure that both local and national workforce planning responds to the long-term requirements of the alcohol and drug treatment sector. 	<ul style="list-style-type: none"> • Department of Health 	<ul style="list-style-type: none"> • Build and strengthen relationships with national policy and workforce planning committees and organisations.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 1.3</p> <p>Improve the attraction and recruitment of students and new graduates.</p>	<p>Alcohol and drug student placements</p> <p>Support and improve the experience of student placements within the alcohol and drug treatment sector by expanding the Eastern Metropolitan Region student placement model with a view to statewide rollout.</p>	<ul style="list-style-type: none"> Attract new entrants and provide a positive first experience of drug and alcohol work. Well supported student placements that expose students to a range of experiences and work settings is paramount if the alcohol and drug treatment sector is to become a career of choice. 	<ul style="list-style-type: none"> Department of Health Eastern Metropolitan Region Rural service providers Department of Health Hume Region Department of Health central office 	<ul style="list-style-type: none"> Expand the model developed in the Eastern Metropolitan Region and pilot it in the Hume Region to test feasibility in a rural setting. Develop implementation guidelines for the design and delivery of a statewide model. Implement the model across the alcohol and drug treatment sector in line with Clinical Placement Network activities. Review for ongoing implementation.
<p>Objective 1.6</p> <p>Strengthen the design and delivery of consumer leadership, carer leadership and peer support roles.</p>	<p>Consumer workforce</p> <p>Undertake a review of the roles and functions of the consumer workforce.</p>	<ul style="list-style-type: none"> There is limited data available on the composition, skills, knowledge, attitudes and training needs of the consumer workforce. Review the workforce with a view to more strongly aligning it with changing expectations of service users and their families and with new directions in service delivery. 	<ul style="list-style-type: none"> External contractor Department of Health Association of Participating Service Users 	<ul style="list-style-type: none"> Undertake a scoping exercise to identify existing roles and functions of the consumer workforce and to identify gaps in workforce participation. Develop consumer workforce role definitions to clearly specify the accountabilities, required competencies, training requirements and support mechanisms for these roles. Develop and implement a workforce program for the alcohol and drug consumer workforce.

Place

Goal 2: Achieve the necessary distribution and skills mix in the workforce so that people can access the kind of care they need in their communities.

Access to quality services relies on workers appropriate skills to provide alcohol and drug treatment and care across Victoria, regardless of location or setting. Workforce supply problems are felt more strongly in rural and regional Victoria where recruitment and retention problems are significant. More innovative and effective ways of working and learning must be explored in order to meet the community's needs for quality services.

Note: Objectives 2.2 - 2.5 identified in the 10-year framework do not have actions allocated against them in this first three-year phase of implementation – these objectives will be considered in subsequent implementation planning.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 2.1</p> <p>Increase efficient work practices and innovative ways of working in rural and regional Victoria.</p>	<p>Rural workforce innovation program</p> <p>Establish an innovation program that explores, identifies and trials (where appropriate) innovations that improve the efficiency and effectiveness of the alcohol and drug workforce in rural and regional Victoria.</p>	<ul style="list-style-type: none"> Identify solutions to existing and projected workforce challenges. Identify strategies that support sustainable practice and organisational change. Identify innovative ways to work in an integrated way with Services Connect. 	<ul style="list-style-type: none"> Rural service providers Department of Health regions Department of Health central office Services Connect 	<ul style="list-style-type: none"> Strengthen innovative approaches to workforce development in the rural and regional alcohol and drug workforce. Review for ongoing implementation.
	<p>Regional workforce conference</p> <p>Convene a regional conference on a biannual basis to showcase and celebrate regional workforce innovation, leadership and achievement.</p>	<ul style="list-style-type: none"> Recognise, promote and celebrate the achievements in alcohol and drug workforce innovation and reform. Increase access to information, knowledge sharing and expertise. Support evidence-based ways of working. Promote and support cultures of continuous improvement and leadership. 	<ul style="list-style-type: none"> Department of Health 	<ul style="list-style-type: none"> Establish innovation program. Convene conference to celebrate rural alcohol and drug workforce innovation.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 2.6 Increase the use of area-based workforce planning and development to improve responsiveness to local need and build workforce capability in areas of high demand.</p>	<p>Area-based workforce planning and development Establish a process to work with service providers, regions and other partners to develop area-based workforce development plans to support reform of the alcohol and drug treatment sector.</p>	<ul style="list-style-type: none"> • Support reform of the alcohol and drug treatment sector. • Base workforce planning and development on local need and context, and feed local planning into broader planning processes. • Enhance workforce planning capacity across the alcohol and drug sector. • Identify locally responsive ways to work collaboratively with Services Connect. 	<ul style="list-style-type: none"> • Department of Health central office and regions with local partners • Services Connect 	<ul style="list-style-type: none"> • Work with regions to explore existing area-based workforce planning models and approaches. • Scope new models and approaches and undertake an analysis of their applicability to Department of Health regions. • Develop a method and tools to undertake area-based workforce planning in partnership with service providers and Department of Health regions. • Implement area-based workforce plans for each Department of Health region.

Environment

Goal 3: Foster positive learning and working environments with strong leadership and a culture of collaboration.

To be most effective, workforce strategies need to be understood at the individual worker, team, organisation and sector levels. Organisational environments and culture play an important role in supporting quality practice and increasing worker satisfaction and morale. Effective and strong leadership is needed to create an organisational climate that supports the workforce to perform at its best.

Note: Objectives 3.2 and 3.5 identified in the 10-year framework do not have actions allocated against them in this first three-year phase of implementation – these objectives will be considered in subsequent implementation planning.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 3.1 Create a more positive perception of working in the alcohol and drug treatment sector.</p>	<p>Career of choice Develop and implement a plan to promote the alcohol and drug treatment sector as a career of choice for school leavers, new graduates and experienced workers from other sectors.</p>	<ul style="list-style-type: none"> Negative perceptions of working in the alcohol and drug treatment sector can compound attraction problems. Promote the alcohol and drug treatment sector at all levels as a dynamic and innovative place to work. New talent and experienced workers in other settings may consider the professional opportunities on offer. 	<ul style="list-style-type: none"> Department of Health central office Department of Health regions 	<ul style="list-style-type: none"> Scope existing projects and approaches. Develop and implement a plan to promote the alcohol and drug treatment sector as a career of choice.
<p>Objective 3.3 Build the competency of the alcohol and drug workforce to provide high-quality clinical and organisational leadership.</p>	<p>Leadership and management program Develop leadership and management capability and capacity across the alcohol and drug workforce for current and emerging leaders.</p>	<ul style="list-style-type: none"> Build the leadership and management capability of the sector to lead and drive reform in order to create organisational, practice and culture change. 	<ul style="list-style-type: none"> External providers 	<ul style="list-style-type: none"> Review existing leadership and management programs and activities. Develop a leadership and management program. Pilot leadership and management program. Implement program across the alcohol and drug treatment sector.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 3.4 Support workplace cultures that are responsive to diversity.</p>	<p>Aboriginal workforce development program Establish a workforce development program to support and extend the capability and capacity of the Aboriginal alcohol and drug workforce in partnership with alcohol and drug treatment service providers, including Aboriginal community-controlled health organisations (ACCHOs). This may include:</p> <ul style="list-style-type: none"> • further supervision and support • increased access to culturally appropriate learning and development opportunities • communities of practice. 	<ul style="list-style-type: none"> • Ensure that the alcohol and drug service system is safe and accessible for Aboriginal workers by developing a competent and well supported Aboriginal alcohol and drug workforce. • Provide workers with access to culturally appropriate learning and development, support and supervision, peer support and shared learning. 	<ul style="list-style-type: none"> • Service providers • ACCHOs • Telkaya Network¹ • Victorian Aboriginal Controlled Health Organisation • External providers • Department of Health 	<ul style="list-style-type: none"> • Work with stakeholders to identify learning and development priorities for the Aboriginal workforce. • Develop and implement a workforce program that will build the capability and capacity of the workforce. • Provide ongoing support for the Telkaya Network. • Evaluate and review.
	<p>Cultural competence learning and development program Develop a learning and development program to enhance the knowledge, awareness and capability of alcohol and drug treatment services to provide culturally appropriate and safe treatment and care for Aboriginal people and people from a culturally and linguistically diverse background, including newly arrived people.</p>	<ul style="list-style-type: none"> • Provide the workforce with cultural competence and appropriate clinical, management and community development skills to deliver culturally appropriate and safe treatment and care. 	<ul style="list-style-type: none"> • External provider(s) 	<ul style="list-style-type: none"> • Establish and commence delivery of a cultural competence learning and development program for the alcohol and drug workforce in targeted locations. • Evaluate and review.
	<p>Support for alcohol and drug nurses working in ACCHOs Develop and deliver a professional development and support program for nurses working within alcohol and drug programs provided by ACCHOs.</p>	<ul style="list-style-type: none"> • Provide nurses working in alcohol and drug programs in ACCHOs with access to the opportunities and supports they need to optimise their work practice and ongoing professional development. • Improve retention of alcohol and drug nurses within ACCHOs. • Increase the medical and health support available for Aboriginal people who have alcohol and drug problems. 	<ul style="list-style-type: none"> • Department of Health central office • Department of Health regions • ACCHOs 	<ul style="list-style-type: none"> • Work with stakeholders to develop and deliver a professional development and support program for alcohol and drug nurses in ACCHOs. • Develop and implement the professional development and support program. • Evaluate and review.

Performance

Goal 4: Equip the workforce with the necessary competencies and support to deliver recovery-oriented, best-practice care.

The provision of high-quality specialist alcohol and drug treatment services depends on the availability of workers with the necessary knowledge, attitudes, values and skills to meet the needs of people with alcohol and drug issues, and of their families, particularly dependent children. This is achieved by aligning the core competencies of alcohol and drug practice with consumer and program outcomes and by ensuring that effective opportunities for building and maintaining these competencies are provided across the workforce.

Note: Objectives 4.3 and 4.4 identified in the 10-year framework do not have actions allocated against them in this first three-year phase of implementation – these objectives will be considered in subsequent implementation planning.

Objectives	Strategies	Aims	Responsibility	Actions
<p>Objective 4.1 More strongly align what individuals are expected to do at work with core competencies and desired outcomes for service users.</p>	<p>Competency framework Develop a competency framework that articulates the necessary skills, knowledge, values and attitudes of the workforce. Align the framework with existing competency and capability frameworks and where possible build on and contribute to similar work being undertaken by other programs and jurisdictions, including Services Connect. Involve people with alcohol and drug issues and their families in the development of the framework.</p>	<ul style="list-style-type: none"> Enhance the adaptability, flexibility and competency of the current and future workforce. Identify vertical and horizontal career structures to facilitate a more flexible workforce. Design the competencies to reflect the needs of people with alcohol and drug issues and their families. 	<ul style="list-style-type: none"> Department of Health central office Department of Health regions Expert sector advisers External contractor Association of Participating Service Users Victorian Alcohol and Drug Association Services Connect 	<ul style="list-style-type: none"> Undertake consultation with the alcohol and drug sector to scope the project. Develop a competency framework for the alcohol and drug workforce, with an early focus on reform priorities such as dual diagnosis, family inclusive practice, working with people in forensic services and cultural competence. Design tools to assist services to implement the competency framework. Test competency framework with the alcohol and drug workforce. Pilot the tools with a limited number of services. Make tools available across the alcohol and drug treatment sector.

Objectives	Strategies	Aims	Responsibility	Actions
	<p>Job analysis</p> <p>Map and analyse particular roles across the workforce in order to establish a clear understanding of the functions undertaken by particular roles and the context in which these roles operate.</p> <p>Use the findings to inform the development of the competency framework.</p>	<ul style="list-style-type: none"> • Better understand the functions and responsibilities of particular roles within the workforce. • Inform competency-based workforce design and development. • Support the development and delivery of appropriate learning and development activities that are focused on achieving the necessary competence across the workforce. 	<ul style="list-style-type: none"> • External contractor • Department of Health 	<ul style="list-style-type: none"> • Design a methodology to undertake the job analysis and determine initial scope. • Undertake job analysis of particular roles within the alcohol and drug workforce, with an early focus on reform priorities.
<p>Objective 4.2</p> <p>Strengthen methods of translating evidence, knowledge, legislation and policy into routine practice.</p>	<p>Change agent network</p> <p>Design and implement a change agent network that develops and empowers leaders in the alcohol and drug treatment sector to drive culture and practice change.</p> <p>Develop a cohort of change agents and clinical champions by providing learning and development opportunities linked to communities of practice.</p>	<ul style="list-style-type: none"> • Increase knowledge sharing, connection and collaboration between peers and experts. • Build the capacity and capability of leaders to drive and support culture and practice change. • Increase advanced clinical skills of existing and emerging leaders. • Facilitate the translation of evidence, knowledge, legislation and policy into practice. • Grow leaders and clinicians. • Provide opportunities for career development. 	<ul style="list-style-type: none"> • Eastern Health • Turning Point • Department of Health • External providers 	<ul style="list-style-type: none"> • Develop and implement the change agent network model which will include: <ul style="list-style-type: none"> - a leadership and change management program - an advanced clinical skills program - communities of practice - piloting the model - assessment and review - implementing the change agent network

Objectives	Strategies	Aims	Responsibility	Actions
	<p>Screening and assessment capability Develop and implement a standardised screening and assessment tool to improve access to treatment and treatment pathways for people with alcohol and drug issues.</p>	<ul style="list-style-type: none"> • Improve evidence-based screening and assessment capability across the alcohol and drug workforce. • Prepare the workforce to adapt to the changes that will arise from reform of the alcohol and drug treatment sector. • Build the capacity of other workforces to screen and assess for alcohol and drug issues. 	<ul style="list-style-type: none"> • Service providers • External providers • Department of Health • Services Connect 	<ul style="list-style-type: none"> • Develop and promote the tool. • Develop and deliver training to the alcohol and drug treatment sector to support uptake of the tool. • Roll out the tool with learning and development across key workforces referring people into the alcohol and drug treatment system.
<p>Objective 4.5 Increase availability of and access to learning and development opportunities that are aligned with core competencies.</p>	<p>Learning and development platform Further develop and grow a sustainable and responsive cross-sector platform that supports the coordinated delivery of evidence-based learning and development activities across the clinical mental health, psychiatric disability rehabilitation and alcohol and drug workforces. Identify area-based and statewide workforce development needs and coordinate a learning and development program that responds to these needs.</p>	<ul style="list-style-type: none"> • Improve brokerage, coordination and delivery of learning and development opportunities. • Reduce duplication, increase efficiencies and cost effectiveness. • Provide more consistent and integrated learning and development opportunities across the clinical mental health, psychiatric disability rehabilitation and alcohol and drug workforces. • Respond more strategically to both local and statewide training needs and address the common challenges and opportunities across the three workforces. • Create and better harness learning and development opportunities across alcohol and drug, mental health and human services workforces. 	<ul style="list-style-type: none"> • Victorian Alcohol and Drug Association • Service providers • External providers • VICSERV • Department of Health central office • Department of Health regions • Services Connect 	<ul style="list-style-type: none"> • Expand the mental health learning and development platform to include dual diagnosis learning and development activities. • Build a cross-sector learning and development platform that includes the alcohol and drug, clinical mental health and psychiatric disability rehabilitation workforce. • Create and better harness learning and development opportunities with the human services workforces, particularly 'Services Connect'.

Objectives	Strategies	Aims	Responsibility	Actions
	<p>Family-inclusive practice</p> <p>Develop and deliver a learning and development program to support the implementation of the <i>Family-inclusive practice framework</i> (unpublished) across the alcohol and drug treatment sector.</p>	<ul style="list-style-type: none"> Build the capacity of the alcohol and drug workforce to more effectively respond to the needs of service users and their families, particularly the needs of vulnerable children. Promote a common practice framework that supports and enhances cross-sector integration. 	<ul style="list-style-type: none"> The Bouverie Centre 	<ul style="list-style-type: none"> Promote family-inclusive practice guidelines. Develop and deliver learning and development opportunities in family-inclusive practice for the alcohol and drug workforce. Embed family-inclusive practice learning and development opportunities across the alcohol and drug workforce and review.
	<p>Clinical supervision</p> <p>Develop and deliver a clinical supervision learning and development program to support the implementation of clinical supervision guidelines across the alcohol and drug workforce.</p>	<ul style="list-style-type: none"> Improve quality, consistency and evidence-based practice by ensuring clinicians and workers are able to access support and advice to more effectively meet the needs of people with alcohol and drug issues and their families. 	<ul style="list-style-type: none"> External provider(s) 	<ul style="list-style-type: none"> Promote clinical supervision guidelines. Deliver a clinical supervision learning and development program for the alcohol and drug workforce. Embed the clinical supervision learning and development program across the alcohol and drug workforce and review.
	<p>Dual diagnosis capability</p> <p>Design and develop a dual diagnosis workforce development program to enhance the capability and capacity of the alcohol and drug, mental health and other relevant workforces in working with individuals who have a dual diagnosis and other comorbidities.</p>	<ul style="list-style-type: none"> Create a critical mass of dual diagnosis capable staff to achieve sustainable cultural and practice change. Building capability and capacity in the alcohol and drug, clinical mental health, psychiatric disability rehabilitation and support services and other relevant workforces is to promote skills transfer to achieve sustainable organisational and practice change. 	<ul style="list-style-type: none"> External provider(s) 	<ul style="list-style-type: none"> Pilot a new cohort model of dual diagnosis learning and development opportunities across the alcohol and drug and mental health sectors. Develop an advanced dual diagnosis learning and development package for the alcohol and drug and mental health workforces. Continue to grow and strengthen the mental health learning and development platform and from January 2014 extend its remit to include the strategic development and coordination of dual diagnosis education and training activities for the clinical mental health, psychiatric disability rehabilitation and alcohol and drug workforces. Dual diagnosis capacity building will be fully integrated into the cross-sector learning and development platform that is responsible for coordinating learning and development opportunities across all three workforces.

Objectives	Strategies	Aims	Responsibility	Actions
	<p>Strengthening addiction psychiatry Increase the statewide availability of psychiatric advice and support for the assessment, treatment and management of people with a dual diagnosis.</p>	<ul style="list-style-type: none"> Provide access for dual diagnosis teams to appropriate clinical leadership and support. 	<ul style="list-style-type: none"> Service providers 	<ul style="list-style-type: none"> Continue the Strengthening Addiction Psychiatrist project. Evaluate and review.
	<p>Recovery-oriented practice Develop the capability and capacity of the alcohol and drug workforce in recovery-oriented practice.</p>	<ul style="list-style-type: none"> Increase the capability and capacity of the workforce to support and work with people with alcohol and drug issues to make choices about their treatment, including planning and decision making that is oriented towards their goals. Encourage a strengths and hope-based workforce culture that supports the active participation of service users and their families or significant others in treatment planning, delivery and after-care support. 	<ul style="list-style-type: none"> Department of Health Service providers Association of Participating Service Users Victorian Alcohol and Drug Association External providers 	<ul style="list-style-type: none"> Identify the skills, knowledge, values and attitudes required to inform policy development in recovery-oriented practice. Develop and implement learning and development opportunities in recovery-oriented practice for the alcohol and drug treatment sector. Undertake capacity-building activities at the organisational level to support implementation.
	<p>Forensic capability Develop the capability and capacity of the alcohol and drug workforce to work effectively with people in forensic services.</p>	<ul style="list-style-type: none"> Build the general competence of the workforce to deliver effective and evidence-based treatment to people in forensic services. Strengthen advanced competence of the specialist forensic alcohol and drug workforce to improve treatment outcomes for people in forensic services. 	<ul style="list-style-type: none"> External provider(s) Department of Health 	<ul style="list-style-type: none"> Design and deliver a learning and development program to build the competence of the alcohol and drug workforce in working with people in forensic services. Review.
	<p>Alcohol and drug accredited learning and development Deliver learning and development activities in alcohol and drug treatment service provision at the Certificate IV and Graduate Certificate levels for the alcohol and drug treatment sector.</p>	<ul style="list-style-type: none"> Provide opportunities for the workforce to meet the <i>Minimum Qualifications Strategy</i> and to build capability and competency in alcohol and drug work. 	<ul style="list-style-type: none"> External provider(s) 	<ul style="list-style-type: none"> Deliver learning and development in core units of competency in alcohol and drug work at Graduate Certificate, Certificate IV and Diploma level. Review. Implement the learning and development opportunities program.

