



**EJD Consulting & Associates**

**FINAL REPORT**

**NADA**  
**PRACTICE ENHANCEMENT**  
**PROGRAM**  
**- Independent Evaluation -**

for  
**Network of Alcohol and Drug Agencies**

**October 2012**  
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*Sincere thanks to staff in the grant funded organisations and other stakeholders who participated in interviews.*

*Thanks also to NADA staff, especially Ciara Donaghy and Heidi Becker, for providing valuable background information and other input to the review.*

*Edwina Deakin  
Principal, EJD Consulting & Associates  
October 2012*

## EXECUTIVE SUMMARY

In late 2012 EJD Consulting & Associates - an independent social policy research firm - concluded an independent evaluation of the Practice Enhancement Program (PEP) implemented by the Network of Alcohol and Drug Agencies (NADA).

The two year Program commenced in mid 2010 and concluded at the end of 2012. It was funded by the NSW Ministry of Health.

The Program aimed to build the capacity of drug and alcohol (D&A) non government organisations (NGOs) in NSW and the ACT to respond to the needs of clients with both D&A issues and other complex needs such as an intellectual disability, acquired brain injury (ABI), or involvement in the criminal justice system (including court ordered treatment). Specifically PEP was intended to:

- identify the service practice development needs and barriers of D&A NGO services in relation to responding to clients with complex needs
- implement projects and activities to build the capacity of the NGO D&A sector to respond to D&A clients with complex needs
- evaluate the outcome of capacity building projects and related activities to inform ongoing workforce, organisational development and provision of treatment
- improve the engagement of D&A NGOs with clients with complex needs and improve treatment outcomes for this population where service practice grants are provided.

The EJD evaluation found NADA had been both successful and highly productive against each of the above Program objectives.

Based on a thorough research and consultation process, involving input from an extensive range of government, non government and academic experts, NADA established a firm evidence base for the type and content of PEP resources and training delivered through the Program. This included the:

- production and distribution of **seven major PEP resources and publications** including a substantial literature review and a new resource for the D&A sector entitled *Complex Needs Capable*
- hosting **three Practice Enhancement Forums** involving expert presentations and group discussions attended by over 130 individuals, the majority of whom were staff and managers from D&A services

- provision of **10 specialist PEP Training Workshops** covering topics such as ABI, Fetal Alcohol Spectrum Disorder (FASD), working with criminal justice clients, and personality spectrum disorder (PSD). In total 246 individuals attended these events held at different locations across Sydney and in Newcastle
- administration of two targeted grants programs resulting in:
  - **10 D&A services hosting substantial practice enhancement initiatives** over a 12 month period. These led to major improvements in staff knowledge, skills and capacity in working with clients with specific types of complex needs, as well as enhanced engagement practices
  - the delivery of **15 practice enhancement in-house training** sessions across NSW covering topics such as ABI, FASD, triple co-morbidity issues, and case reviews of clients with PSD. A total of 152 individuals received training through this process.

In addition, NADA prepared numerous reports and presentations on PEP plus substantially enhanced the information available via the **NADA website**. It contains, amongst other things, key references, linkages to expert organisations, and listings of upcoming training events.

The review concluded that based on these substantial outputs NADA succeeded in fulfilling all Program objectives. The review also found PEP had had very positive impacts on Program participants on each key performance measure. For example, 75% or more of all Program participants (including participants in PEP training, PEP forums and PEP grant projects) reported improvements in their:

- awareness of the needs of clients with complex needs
- knowledge of options to improve outcomes for clients with complex needs
- confidence to work with clients with complex needs
- knowledge about where further information on working with clients with complex needs is available
- overall capacity to work with clients with complex needs.

The review identified three success factors that had underpinned NADA's accomplishments through PEP, namely the organisation's:

1. experience in quality project management
2. proactive engagement and consultation with key organisations and groups with expertise in clients with complex needs
3. adoption of a multi-pronged approach to implementing PEP, incorporating individual, organisational as well as sector-wide initiatives.



The review identified there was a strong demand to build on the achievements of PEP, especially given the growing prevalence of clients with complex needs and the strong interest of the D&A NGO sector to further develop their practice in terms of client engagement. Priorities identified included:

- access to a rolling program of quality staff training in different aspects of working with clients with complex needs
- additional resources and evidence based tools to assist staff to engage with clients with complex needs
- ongoing partnerships between the D&A sector and other services and experts involved in complex needs issues, plus
- advocacy for NGO service system enhancements and reform in recognition of the number of clients that require more than one specialist intervention or service and support option.

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# REPORT

## 1. INTRODUCTION

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This report contains a final evaluation of the Practice Enhancement Program (hereafter PEP or the Program) for the Network of Alcohol and Drug Agencies (NADA). The aim of PEP was to assist drug and alcohol (D&A) non government organisations (NGOs) to better respond to the needs of clients who also present with drug and alcohol or co-existing drug and alcohol and mental health issues and complex needs such as cognitive impairment including acquired brain injury, and intellectual disability and/ or involvement in the criminal justice system.

The PEP initiative ran over two years (2010–2012) and was hosted by NADA (*see description of NADA below*). It was funded by the NSW Ministry of Health, Mental Health Drug and Alcohol Office (MHDAO).

The evaluation was conducted by EJD Consulting & Associates, an independent social policy evaluation firm.

The aim of the PEP evaluation is to independently assess the achievements of the Program against its stated aims and objectives (*see Section 2.2 below*). In addition, the evaluation reviews the implementation and management processes used by NADA, and identifies options for further capacity building for the D&A sector in NSW.

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## **2. BACKGROUND**

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### **2.1 *About NADA***

The Network of Alcohol and Drug Agencies (NADA) is the peak organisation for the non government D&A sector in New South Wales. It also has member agencies located in the Australian Capital Territory.

NADA represents over 100 organisational members that provide a broad range of services including D&A health promotion, early intervention, treatment, and after-care programs. These community based organisations operate throughout NSW. They comprise both large and small services that are diverse in their structure, philosophy and approach to drug and alcohol service delivery.

NADA's goal is to advance and support non government D&A organisations to reduce the drug and alcohol related harm to individuals, families and the community.

NADA provides a range of programs and services that focus on sector representation and advocacy, workforce development, information management and data collection, governance and management support, plus a range of capacity building initiatives.

### **2.2 *Origins and Purpose of the Program***

NADA has for many years recognised that many D&A clients frequently present with issues and challenges in addition to their substance use problems. While clients with dual diagnosis (namely D&A and mental health issues) have been the subject of various initiatives over recent years, supporting clients with other types of complex needs was identified by the sector as requiring further attention.

In June 2010 NADA received one year funding from MHDAO to undertake a sector development initiative focused on supporting D&A non government services to work with clients with complex needs.

In July 2010, NADA identified the need to amend a number of aspects of the Program Plan, including the original Program aims and timeframes<sup>1</sup>. This decision was based on a desire to better match the Program resources to the NGO sector needs and capacity.

In October 2010, following various negotiations - with MHDAO, the Program aim was amended to read:

*PEP aims to build capacity within drug and alcohol NGO through addressing staff skills, knowledge and confidence, as well as organisational capacity in responding to the needs of clients with drug and alcohol issues who also present with complex needs such as intellectual disability, acquired brain injury, and involvement with the criminal justice system (including court ordered treatment).*

The negotiations with MHDAO also focused on ensuring the performance indicators were realistic and measurable<sup>2</sup>, and that the timeframe would be extended to two years.

In addition, in the early stages of the Program the definition of 'complex needs' was adjusted to read as follows:

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<sup>1</sup> The original working of the Program aim read:

"To develop and implement a practice enhancement program for the non government drug and alcohol sector in NSW. The program aims to build capacity within drug and alcohol NGOs through addressing staff skills, knowledge and confidence, as well as organisational capacity in responding to the needs of clients with drug and alcohol issues who also present with complex needs such as intellectual disability, acquired brain injury, mental health (including forensic mental health clients) and involvement with the criminal justice system."

<sup>2</sup> For example, it was agreed the performance indicators relating to Objectives 3 and 4 (see Section 2.3.1) would apply only to the *Service Practice Enhancement Seeding Grants* and not to the broader Practice Enhancement Program.

**- Definition of Complex Needs -**

*Within the context of PEP clients with complex needs are clients, who, in addition to their D&A or co-existing D&A and mental health issues also:*

- *present with cognitive impairment such as:*
  - *intellectual disability or*
  - *acquired brain injury (ABI) and/or*
- *are involved with the criminal justice system.*

The Program funding, totalling \$767,647, was to be used by NADA consistent with the Funding and Performance Agreement signed with MHDAO. It was to be expended between July 2010 and June 2012.

The agreed aim of the PEP funding was to build capacity within D&A NGOs through addressing staff skills, knowledge and confidence, as well as organisational capacity in respect to clients with complex needs.

This aim directly links to the NADA Strategic Plan's first outcome aimed at strengthening the D&A NGO sector in NSW and the ACT.

### **2.3 Program Objectives & Deliverables**

To refine how to best meet the PEP aim, NADA undertook a number of consultations and research exercises throughout the second half of 2010. These resulted in the development of a revised Project Plan that specified the Program objectives, how NADA would allocate the PEP funding, and what products and services would be delivered.

### 2.3.1 Objectives

There were four PEP objectives:

1. Identify the service practice development needs and barriers of D&A NGO services in relation to responding to clients with complex needs.
2. Implement projects and activities to build the capacity of the NGO D&A sector to respond to D&A clients with complex needs.
3. Evaluate the outcome of capacity building projects and related activities to inform ongoing workforce, organisational development and provision of treatment.
4. Improve the engagement of D&A NGOs with clients with complex needs and improve treatment outcomes for this population where service practice grants are provided.

### 2.3.2 Deliverables

The agreed Program deliverables were:

- **Literature review** and scoping exercise to identify best practice in working with people with D&A issues who also present with complex needs.
- **Practice Enhancement Workshops** available to NADA members' staff interested in improving their skills and knowledge in working with clients with complex needs.
- **Practice Enhancement Training Grants** to assist NADA members' staff to participant in professional development opportunities that focus on clients with complex needs. This includes funding for individual training and organisational training on-site.
- **Practice Enhancement Seeding Grants**, allocated on a competitive basis, to ten NADA member organisations to implement a project focused on improving their service's capacity to work with clients with complex needs.

A total of \$350,000 was allocated to this initiative, the largest proportion of PEP funding.

Section 4 of the report contains a summary of the inputs, outputs and outcomes of each of these grants.

- **Resource development and distribution.** Note: The scope and type of resources developed through the Program was directed by the NADA membership and stakeholders (see Section 3.1.5).

PEP funding was also allocated to independently evaluating the Program and for this final report to be prepared.

An analysis of each of these Program components is included in Section 3.

## **2.4 About the Evaluation**

### **2.4.1 Methodology**

In 2010 NADA commissioned the development of a PEP Evaluation Framework. This was undertaken by the social policy research firm EJD Consulting & Associates, who were also contracted to conduct this independent evaluation.

The PEP Evaluation Framework specified that the evaluation would first and foremost assess the success of the Program against the Program objectives (see Section 2.3.1).

Within each of these objectives, a number of key effectiveness measures were developed and agreed to (see listing at Attachment 1). These measures informed the design of all data gathering instruments used in the evaluation.

As per the agreed framework, the evaluation methodology utilised a range of data gathering techniques. Some of this data was gathered by NADA in the course of managing PEP, with other data collected by the independent evaluators (*see below*).

Key data sources included:

- Review of all Program documentation including:
  - Program establishment papers and contract agreement
  - grants funding material and correspondence with member organisations
  - consultation reports and research documents
  - all tools and resources developed through the Program

- Literature review (*conducted separately by Ian Flaherty, Community Sector Consulting*) and member consultation (*conducted by Ian Flaherty, Community Sector Consulting and Ciara Donaghy, NADA Project Officer*)
- Written feedback gathered at the end of all Practice Enhancement forums and NADA PEP training workshops<sup>3</sup>
- Written feedback from Training Grant questionnaires<sup>4</sup>
- PEP Seeding Grants reports, submitted at end of first six months and also on completion, using a comprehensive reporting template provided by NADA. Elements of these reports have been used to inform the information included at Section 4
- Interviews with:
  - key contacts from each seeding grant organisation (10)
  - other stakeholders involved in the planning or implementation of the Program (14).

See Attachment 2 for a listing of all those interviewed as part of the evaluation

- Qualitative feedback provided via a facilitated workshop with NADA members attending a PEP Forum held on 20 - 21 June 2012. (Approximately 60 individuals attended the workshop)
- Verbal and written feedback from NADA staff directly responsible for overseeing PEP (2).

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<sup>3</sup> Standardised questionnaires were administered with all results consolidated by NADA with the data provided to the evaluators.

<sup>4</sup> Training Grants results data consolidated and provided by NADA.

### 2.4.2 Stakeholders

Individuals and organisations that provided feedback and data via the above sources included:

- NADA member organisations and individual staff who received PEP grants or participated in PEP funded activities.
- Other NADA member organisations involved in the Program, including those who attended the Program Forums (see *Table 1*) or who participated in the needs analysis conducted in the first half of 2011 by Community Sector Consulting and NADA.
- NADA Program staff.
- MHDAO, NSW Ministry of Health (as funding body) representative.
- Various key external stakeholders (See *Attachment 2*).

Included at Attachment 2 is a list of all those who participated in semi-structured interviews (though not including workshop participants).

### 2.4.3 Report Structure

The findings section that follows addresses each of the Program objectives and measures and also includes an analysis of other aspects of the Program's administration, covering topics such as:

- Program planning and management arrangements
- governance and engagement with stakeholders
- communication strategies with NADA members and other external stakeholders.

With the exception of the seeding grant respondents, all stakeholder feedback was provided anonymously. As such, while stakeholder quotes are included in *italics* no individual or organisation is named.

\* \* \* \*

### **3. FINDINGS**

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#### **3.1 *PEP Outputs and Deliverables***

##### **3.1.1 PEP Planning Workshops and Outcomes Forums**

Over the two years of PEP, NADA facilitated a total of four PEP forums or workshops related to the Program as a whole, plus one open to grant recipients only. The first two workshops were convened in the first six months of the Program and were designed to assist NADA to scope the direction of PEP. They were held in Sydney on:

- 18 November 2010
- 24 November 2010.

A total of 38 individuals participated in these events from a range of government, academic and non government organisations. Each participant was an expert in one or more areas related to clients with complex needs (*see definition on page 3*).

Both these events were facilitated by an independent facilitator<sup>5</sup>, who was also responsible for preparing a report on discussion and directions arising. This feedback was used to finalise each of the components of PEP.

Feedback from stakeholders indicated both these events were very effective in terms of the Program planning and stakeholder engagement. They also indicated they provided valuable opportunities to network. Many of these same individuals continued involvement throughout the Program, providing feedback on documents or in other ways providing NADA staff or NADA members with advice and information.

As documented in Table 1 below, in February 2011 NADA held the first open PEP forum to launch the initiative. It also served to publicise the grants program. In October, another forum was held solely for grant recipients.

In June 2012, at the conclusion of the Program, NADA held a final open forum. As summarised in Table 1, this event attracted over 65 individuals.

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<sup>5</sup> Edwina Deakin, Principal, EJD Consulting & Associates.

Excluding the two planning workshops, the combined audience for the three PEP forums was 130 individuals, the majority from NGO D&A services, though also including various guest speakers and participants from other key sectors, including experts in criminal justice, mental health, FASD, ABI and Intellectual Disability.

Feedback from each of these events indicated that they were highly valued by the participants. Verbal and written feedback provided from each has been used to inform other sections of the findings below (see Sections 3.2 in particular).

**Table 1. Practice Enhancement NADA Forums**

<b>Date &amp; Location</b>	<b>Topic and Summary</b>	<b>No. of Attendees</b>
24 February 2011 Sydney	<p><b>Practice Enhancement Forum: Working with Complex Needs Clients</b></p> <p>This forum included specialist speakers focusing on working with clients who present with complex needs such as intellectual disability, ABI, and have contact with the criminal justice system. It was followed by the launch of the <i>No Bars</i> website.</p>	35
27 October 2011 Sydney	<p><b>Practice Enhancement Forum: Working with Complex Needs Clients</b></p> <p>This forum was open to PEP seeding grant recipients (see <i>Table 4</i>) and other interested stakeholders. Including specialist speakers*, it offered attendees an opportunity to learn about relevant programs and skills related to working with clients with complex needs.</p> <p>All grant recipients were provided with a Forum bag containing a range of useful resources and contact information.</p>	30
20 & 21 June 2012 Sydney	<p><b>PEP Working with Complex Needs Forum</b></p> <p>This forum marked the conclusion of the two year PEP NADA initiative. It provided an opportunity to showcase the outcomes of each of the ten PEP seeding grant projects (see <i>Table 4</i>), together with a range of other expert speakers in the field of complex needs#.</p>	65
<b>Total Forum Attendees:</b>		<b>130</b>

Source: EJD Consulting with material supplied by NADA

\* Speakers included representatives from arbias, Justice Health Connections Project, NSW Council of Intellectual Disability and Corrections NSW.

# Experts covered areas including intellectual disability, criminal justice, ABI, neuropsychology and personality spectrum disorder.

### 3.1.2 Practice Enhancement Training Sessions and Workshops

As noted in Section 2.2, one of the core deliverables of PEP was coordinating the delivery of training workshops for staff working in D&A NGOs.

**Table 2. NADA Practice Enhancement Training Workshops**

<b>Date &amp; Location</b>	<b>Topic and Summary</b>	<b>No. of Services</b>	<b>No. of Participants</b>
27 August 2011 Sydney	<b>Introduction to Brain Injury</b> This workshop was presented by Brain Injury Australia NSW (BIA NSW) and provided an introduction to brain injury and how to work with affected individuals.	19 services	22
22 Feb 2011 Sydney	<b>Introduction to FASD</b> These training sessions provided by Training Connections Australia (TCA) and Russell Family Fetal Alcohol Disorders Association (rffada) provided an introduction to FASD and working with adults affected by FASD.	15 services	24
3 August 2011 Newcastle			
22 March 2011 Newcastle	<b>NO BARS: Supporting D&amp;A services to work with criminal justice clients</b> These sessions provided an overview of the criminal justice system in NSW, information on issues and challenges facing people imprisoned, and what can be done to assist individuals overcome these challenges. The training was delivered by Community Restorative Centre facilitators.	23 services	47
3 May 2011 Rooty Hill			
5 May 2011 Surry Hills			
4 July 2012 Newcastle	<b>Networking for Court Support: Collaboration, Confidence, Court Support and Case Notes</b> NADA, in partnership with Legal Aid NSW and Turning Point Alcohol and Drug Centre, Victoria presented three free information and networking forums across NSW to support drug and alcohol workers in navigating the court system with their clients. The forums were jointly funded by PEP and a small grant provided by the Foundation for Alcohol Research and Education.	49 services	117
17 July 2012 Sydney			
24 July 2012 Sydney			

<b>Date &amp; Location</b>	<b>Topic and Summary</b>	<b>No. of Services</b>	<b>No. of Participants</b>
29 August 2012 Sydney	<p><b>Personality Spectrum Disorders Workshop*</b></p> <p>This workshop was jointly presented by NADA, and Project Air - A Personality Disorders Strategy based at the Illawarra Health and Medical Research Institute, University of Wollongong.</p> <p>The workshop provided an introduction to working with personality spectrum disorders (PSD) within a drug and alcohol non government organisation.</p>	20 services	46
<b>Total Workshop Attendees:</b>			<b>246</b>

Source: EJD Consulting with material supplied by NADA

\* Also see the in-house PSD case review session described in Section 3.1.3

As documented in Table 2, over the two years of the Program, NADA facilitated a total of 10 practice enhancement training events<sup>6</sup> that were open and free to all staff from NADA member organisations.

Over 245 individuals, from a broad cross section of metropolitan, regional and rural services attended these events, with between 15 and 49 services benefitting from staff attending each topic. *(Note: These figures exclude the public forums listed in Table 1 and also the in-house PEP training discussed at Section 3.1.3).*

In order to encourage attendance from D&A staff located outside of metropolitan centres, NADA provided training and accommodation grants to assist staff to attend<sup>7</sup>. A total of 29 grants were provided for this purpose in 2010–12.

In addition to running these events, NADA identified and promoted various providers and organisations who could assist organisations working with clients with complex needs. While a comprehensive listing was included on the NADA website and listed

<sup>6</sup> Another Introduction to Brain Injury, run by BIA NSW was scheduled for Newcastle, and a Networking for Court Support event was scheduled for Coffs Harbour however both were cancelled due to low registration numbers.

<sup>7</sup> These were available to all NADA member organisations that were located over 100 km from the PEP training or forum.

in NADA's Training Options Handbook (see Section 3.1.5 below), NADA specifically partnered with and promoted four PEP related providers or experts:

- Brian Injury Association (BIA) NSW, specifically in relation to ABI
- arbias, specifically in relation to screening and assessment in ABI and their triple co-morbidity training, related to ABI, mental health and D&A
- Training Connections Australia, specifically in relation to their working with adults with FASD
- Consultant Dr Margaret Spencer, specialist in Intellectual Disability.

NADA also contracted the Community Restorative Centre NSW to develop and roll-out a training packaged to address practical skills related to working with clients with complex needs. Unfortunately, this contract was cancelled in November 2011 at the end of the pilot phase and prior to the finalisation of the package. NADA was able to utilise the material produced in the development of the *Complex Needs Capable* resource.

While the development of the *NO BARS Change Management and Training Program*<sup>8</sup> – a joint initiative between NADA and the Community Restorative Centre focusing on assisting D&A services to work with criminal justice clients – precedes the PEP initiative, the ongoing training program fully complemented the PEP objectives and therefore was integrated into the PEP implementation plan.

All the above workshops were advertised and promoted through NADA's usual communication channels, including via the NADA website, e-bulletins and direct email distributions. While the majority of attendees were from NADA member organisations, a number of other government and non government organisation staff also participated.

Each of these events included a formal evaluation process. As discussed in more detail at Section 3.2.3 below, the combined results were very positive.

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<sup>8</sup> Evaluation Report on the Pilot of NO BARS Change Management and Training Package, 2010.

**Table 3. Practice Enhancement In-House Training Grants & Reviews**

<b>Date</b>	<b>Organisation</b>	<b>Training Topic</b>	<b>No. of Participants</b>
<b>Training Grants</b>			
23 November 2011	<b>Community Restorative Centre NSW</b>	An Introduction to ABI	17
18 March 2012	<b>Freeman House, St Vincent de Paul</b>	An introduction to FASD and working with Adults affected by FASD	10
27 March 2012		Screening and assessment of ABI and the triple co-morbidity – Drug and alcohol, mental health and ABI	12
7 December 2011	<b>Karralika Programs Inc</b>	An introduction to FASD and working with Adults affected by FASD	15
20 April 2012		Screening and assessment of ABI and the triple co-morbidity – Drug and alcohol, mental health and ABI	15
10 -11 November 2011	<b>The Lyndon Community</b>	An introduction to FASD and working with Adults affected by FASD	16
14 June 2012	<b>Newcastle Adult Accommodation Support Services Mission Australia</b>	Screening and assessment of ABI and the triple co-morbidity – Drug and alcohol, mental health and ABI	6
30 May 2012	<b>Namatjira Haven and Rekindling the Spirit</b> <i>(jointly applied and trained)</i>	Screening and assessment of ABI and the triple co-morbidity – Drug and alcohol, mental health and ABI	10
<b>Case Reviews *</b>			
October - November 2012	<b>PSD In-house Case Review Sessions (7)</b>	<i>Following an EOI process, 7 services were offered a 2 hour in-house review and training session run by Project Air Strategy for Personal Disorders, IHMRI</i>	51
<b>Total In-House Participants:</b>			<b>152</b>

Source: EJD Consulting with material supplied by NADA

### 3.1.3 Practice Enhancement Training Grants

In addition to PEP training programs facilitated by NADA, PEP also enabled NADA member organisations to run their own in-house training on topics related to working with clients with complex needs.

To facilitate this, in February 2011 NADA instigated and widely promoted an expression of interest process for Member services interested in participating in training in complex needs.

As documented in Table 3, a total of eight training sessions were funded via the Practice Enhancement Training Grants<sup>9</sup>. This enabled a total 101 staff to receive training across seven services, all located in regional NSW or ACT:

- five grants focused on ABI related training  
(three of these also included training on clients with co-existing D&A, mental health and ABI issues, on occasion referred to as the triple co-morbidity)
- three grants focused on FASD training.

In addition in August 2012, NADA ran a supplementary EOI process specifically related to PSD. This process offered NADA members the option to receive a free in-house case review and training session related to PSD run by Project Air.

A total of seven services were selected via this process, resulting in an additional 51 NGO staff being trained through PEP.

As discussed in more detail at Section 3.2.3 above, each of the above training activities were assessed as very positive by participants.

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<sup>9</sup> One additional applicant was referred to the NADA Workforce Development Training Grants as their application was ineligible for a PEP Training Grant.

**Table 4. NADA Practice Enhancements Seeding Grants Projects**

Organisation	Project / short title	Grant amount	Main client group	Complex needs focus	Main purpose of grant	Major benefits
<b>Drug and Alcohol Multicultural Education Centre</b>	Vietnamese SMART recovery	\$50,000	CALD (Vietnamese speaking)	Contact with the criminal justice system	SMART Recovery Group for Vietnamese prisoners and ex-prisoners	Offering a program to Vietnamese prisoners, and deeper partnership with corrective services
<b>Freeman House, St Vincent de Paul</b>	Accessibility review / partnership development and strengthening	\$30,000	Adults	Contact with the criminal justice system	Review accessibility to Probation and parole (P&P) clients, develop partnerships	Improved access to P&P clients, partnerships with local GP and P&P
<b>Kamira</b>	Improving treatment outcomes	\$19,500	Women	Cognitive impairment	Changed assessment procedures, program modification and staff capacity	Access and retention of clients, staff capacity, high level program modification
<b>Karralika Programs Inc.</b>	Complex needs project	\$50,000	Adults	Cognitive impairment	Program modification, policy and procedure review, service information, staff training	Assessment, awareness, staff capacity
<b>Kedesh Rehabilitation Services</b>	Kedesh Practice Enhancement	\$41,200	Adults	Cognitive impairment / ABI	Developing a program to assist in memory deficits	A program that assists clients to recall group content, improved staff capacity

Organisation	Project / short title	Grant amount	Main client group	Complex needs focus	Main purpose of grant	Major benefits
<b>Ngaimpe Aboriginal Corporation, The Glen</b>	DVD presentation for use in gaols	\$21,500	Aboriginal people	Contact with the criminal justice system	Developing a DVD resource to help prisoners understand The Glen's programs and support	Awareness of programs
<b>The Lyndon Community</b>	Cognitive impairment	\$50,000	Adults	Cognitive impairment	To identify an assessment tool and improve staff capacity	Assessment, awareness, staff capacity
<b>Salvation Army Youthlink</b>	Piloting programs to better engage young offenders	\$20,000	Young people	Contact with the criminal justice system	Piloting two programs for youth engaged with the justice system	Opportunity to pilot a program that proved highly successful in engaging a difficult to engage group
<b>Women and Girls Emergency Centre</b>	Intensive support counselling / service network and partnership development	\$22,000	Women	Cognitive impairment	To provide intensive counselling to clients with complex needs including drug and alcohol and mental health issues, cognitive impairment and trauma survivors, and to develop service support networks for these clients.	Greater uptake and engagement with services by a group experiencing multiple challenges / better service support networks

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Organisation	Project / short title	Grant amount	Main client group	Complex needs focus	Main purpose of grant	Major benefits
<b>We Help Ourselves</b>	WHOS Practice Enhancement Project	\$50,000	Adults	Cognitive impairment / contact with criminal justice system	To identify an assessment tool and improve staff capacity	Assessment tool, improved staff capacity

Source: EJD Consulting with material supplied by NADA

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### **3.1.4 Service Practice Enhancement Seeding Grant Projects**

Following the planning workshop described in 3.1.1, in February 2011 NADA developed and disseminated to its members an Expression of Interest (EOI) for seeding grants of up to \$50,000 to undertake an organisation-based PEP project over a 12 month period.

A total of 26 EOI applications were received and reviewed by a selection panel comprising representatives for NADA, MHDAO, and an external representative with expertise in cognitive impairment and criminal justice matters.

This process resulted in 10 organisations being awarded PEP seeding grants. Table 4 above lists each of the funded projects. Section 4 provides a summary of each project, noting its key outputs and outcomes. Section 3.3 provides further analysis of the organisation and sector benefits of this initiative.

### **3.1.5 Practice Enhancement Resources and Publications**

Over the course of the Program, NADA prepared three major Practice Enhancement resources that were distributed or made freely available to NADA members. These are listed in Table 5 below together with a summary description of the content.

In many respects these documents can be viewed as a major legacy of the Program as they each provide valuable guidance, factual information, references and contact details that can be drawn on by D&A services for years to come.

In addition to the separately funded *No Bars Resource Package* (noted in Table 5), the two most substantial products to emerge from the PEP initiative were:

- *NGO Practice Enhancement Program: Working with Complex Needs Initiative. Literature Review and Member Consultation* report (June 2011)
- *Complex Needs Capable: A Practice Resource for Drug and Alcohol Services* (Due mid 2013).

The first report was commissioned by NADA in January 2011. It was undertaken by Ian Flaherty from Community Sector Consulting and involved a three step research project that led to the report:

- 1) a limited literature review of government policy documents and academic articles relating to complex needs

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2) a scoping and mapping exercise of NGO D&A service providers' policy and procedures relating to complex needs clients, and

3) a consultation with NADA members involving a questionnaire and interviews<sup>10</sup>.

The Community Sector Consulting report generated some useful background information on local and international policies, together with an analysis of common themes emerging from the literature review. The report also contained some interesting NSW case studies of working with clients with complex needs. It was noted that more D&A sector research, as well as inter-sectoral research would be worthwhile to complete the findings to date (see *Section 3.7 Future Directions and Next Steps*).

The second major resource – *Complex Needs Capable* – was developed by NADA with the assistance of an expert advisory group<sup>11</sup>. This group was convened in November 2011 and over nine months provided assistance with the content in different ways, including in some cases, providing the content.

At the time of finalising this evaluation the resource was in its final stages of development and will be available to members and other stakeholders in both hard copy and electronic formats. As such it is not assessed in this evaluation albeit enthusiastically anticipated by all stakeholders consulted.

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<sup>10</sup> 24 questionnaires were returned; 22 qualitative interviews were conducted, all but one interview conducted face-to-face. NADA Project Officer, Ciara Donaghy, also participated in the member consultation process.

<sup>11</sup> The advisory group included representatives from:

- Ageing, Disability and Homecare, NSW Department of Family and Community Services
- Brain Injury Association of NSW
- Community Restorative Centre NSW
- Corrective Services NSW
- Intellectual Disability Rights Service
- NSW Council for Intellectual Disability
- Russell Family Fetal Alcohol Disorders Association
- MHDAO, NSW Ministry of Health
- Drug and Alcohol Multicultural Education Centre
- Karralika Programs Inc
- University of Technology Sydney.

**Table 5. PEP Resources and Publications**  
(also available via NADA's website)

<b>Date</b>	<b>Document Title</b>	<b>Summary Description</b>
February 2011	<b>No Bars: Supporting D&amp;A services to work with Criminal Justice Clients Training and Resource Package</b>	This resource and website was developed by NADA and the Community Restorative Centre NSW. While not directly funded by PEP, the resource was widely promoted through the Program and was a key resource in other PEP activities.
June 2011	<b>NGO Practice Enhancement Program: Working with Complex Needs Initiative. Literature Review and Member Consultation report</b>	Prepared by Ian Flaherty, Community Sector Consulting, this report contains the results of an extensive literature review related to working with complex needs D&A clients, together with an analysis of NADA members' expectations and needs as regards PEP.
Autumn/ Winter 2011	<b>Working with Complex Needs Forum</b>	This article written by NADA staff, appeared in the Improved Services Initiative Newsletter and provided an overview of discussion from the PEP Forum held in February 2011. (see Table 1)
December 2011	<b>Training Options Handbook</b>	This handbook prepared by NADA staff, provides a listing and description of training providers who can assist member organisations working with clients with complex needs.  The handbook was distributed via mail, e-communication, with a similar set of information available on the NADA website.
June 2012	<b>Networking for Court Support Resource Pack</b>	These resources were developed as part of the July 2012 Networking for Court Support Forums (see Table 2) and include information on the criminal justice and legal systems, Legal Aid NSW, and court support services. It also includes information on Intellectual Disability Rights Services and material adapted from the Community Restorative Centre Court Support Program.

<b>Date</b>	<b>Document Title</b>	<b>Summary Description</b>
June 2012	<b><i>Take Note!- A practical guide to writing case notes: A comparison to the NSW jurisdiction</i></b>	<p>A resource developed by NSW Legal Aid in partnership with NADA as a compendium to the Victorian based resource: <i>Take Note! A practical guide to writing case notes</i>.</p> <p>The resource provides guidance on NSW legislation relevant to individual's and service's legal obligations when documenting case notes, including when subpoenaed by the court.</p> <p>NADA members were provided with a: <i>Take Note! A practical guide to writing case notes</i>.</p> <p>Resource pack along with the compendium which is available for download on the NADA website.</p>
August 2012	<b><i>An examination of drug and alcohol services engaging with complex needs in New South Wales, Australia</i></b>	Journal article by Ciara Donaghy, Heidi Becker and Ian Flaherty, from NADA and Community Sector Consulting, for <i>Mental Health and Substance Use</i> , August 2012.
Mid 2013 (in press)	<b><i>Complex Needs Capable: A practice Resource for Drug and Alcohol Services</i></b>	A NADA resource available electronically and in hard copy to assist D&A NGOs improve their internal policies, practices and operations in regards to working with complex needs clients.

Source: EJD consulting with material supplied by NADA

### **3.1.6 Program Presentations**

The hosting of PEP provided NADA staff and NADA contractors to the Program with various opportunities to present the outcomes of the Program and to discuss complex needs issues at conferences and other public forums. In addition to the NADA hosted events (see Table 1) some high profile presentations included:

- *Supporting drug and alcohol services to work inclusively with increasing complexity*, Ciara Donaghy, NADA and Ian Flaherty, Community Sector Consulting, The Alcohol, Tobacco and other Drugs Council (TAS) inc, 2012 Conference 'Challenging Conversations: Creating an Inclusive System', 16–17 May 2012

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- *Supporting drug and alcohol services to work with increasingly complex clients* Ciara Donaghy, NADA and Ian Flaherty, Community Sector Consulting, Creating Synergy Conference 2012 Drug and Alcohol, Substance Misuse, Mental Health and Ageing *'Embracing the Complexity of a Changing Environment'*, 27–28 June 2012
  - *Complex needs and the non government drug and alcohol sector - Guest lecture* Heidi Becker and Ciara Donaghy, NADA, Disability in the Criminal Justice System University New South Wales Course (CRIM2032), 31 July 2012 with a repeat lecture scheduled for 28 March 2013<sup>12</sup>
  - *Supporting drug and alcohol services to work with clients with complex needs project*, Ciara Donaghy and Heidi Becker, NADA, The Victorian Alcohol and Drug Association (VAADA) Conference, *'Broadening the Focus'* 14-15 February 2013.

### **3.1.7 Program Reports and other Outputs**

In order to effectively manage and report on PEP, NADA prepared a total of six substantial PEP reports and plans, as summarised in Table 6. Most were designed to inform the funding body –MHDAO – of the Program's status or to fulfil other reporting requirements. The majority were also available to NADA members on request.

Each of these reports was found to assist NADA to systematically plan and track progress over time. They were also found to be highly useful from a funding and accountability perspective, ensuring the NADA board and the funding body were kept informed of PEP achievements, as well as Program adjustments where required. For these reasons they each were highly valuable sources of information for this evaluation.

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<sup>12</sup> In addition, an abstract on the topic of *Complex Needs Capable: Supporting drug and alcohol services to work with clients with cognitive impairment and / or criminal justice contact*, prepared by Heidi Becker and Ciara Donaghy, NADA, for Australasian Therapeutic Communities Association August 2012 Symposium on *'Stigma, and other Barriers to Treatment'* was accepted, though the presentation did not proceed due to other NADA commitments.

**Table 6. PEP Reports and Plans**

<b>Date</b>	<b>Document Title</b>	<b>Summary Description</b>
October 2010	<b>NADA NGO PEP Project Plan</b>	Prepared by NADA this contains an initial outline of NADA's Program plan and implementation strategy for PEP. It was provided to the funding body.
December 2010	<b>Complex Needs Clients Stakeholder Workshop Report</b>	Prepared by EJD Consulting & Associates this report presented the outcomes of two stakeholder workshops to discuss the PEP initiative and the issues arising from working with D&A clients with complex needs.
April 2011	<b>PEP Evaluation Framework</b>	Prepared by EJD Consulting & Associates this framework gives an overview of key PEP products and deliverables, together with the Program review instruments and recommended performance measures to be gathered by NADA or assessed through an independent evaluation process.
June 2011	<b>Recommendation Report</b>	Prepared by NADA this report outlines the outcomes of the consultation process with recommendations relating to the Program's Stage 2 implementation. Following a meeting with MHDAO this report was adopted as the Implementation Plan for July 2011– June 2012 period.
June 2011	<b>PEP Performance Report and Implementation Plan</b>	Prepared by NADA this report outlines PEP deliverables and achievements over the first 12 months of the Program, together with a timeline and report on performance measures to date. The report also outlines the recommended approach and components for the second year of PEP, which was broadly adopted by the MHDAO. The report was submitted to the funding body.
July 2012	<b>PEP Performance Report July 2011 – June 2012</b>	Final Report on PEP covering its deliverables and achievements over the 2 years, together with a timeline and performance measure reporting. The report was submitted to the funding body.

Source: EJD Consulting with material supplied by NADA

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In addition to the above reports, products and deliverables, PEP generated other communications and outputs including:

- **new sections of the NADA website** specifically devoted to working with clients with complex needs. It currently includes:
  - a comprehensive listing of useful contacts and services (with descriptions), including information on training providers expert in complex needs issues<sup>13</sup>
  - an extensive listing of complex needs resources and references and fact sheets, plus the NADA Literature Review report (see *Section 3.1.5 above*)
  - a listing of training providers related to working with clients with complex needs
  - email contact list related to working with clients with complex needs, to enable notices and information dissemination
  - numerous PowerPoints and presentations from past PEP NADA forums including from the June 2012 PEP Forum
  - other PEP resources and reports including the summary report of the PEP forums and workshops.
- **monthly PEP e-bulletin** for Seeding Grant recipients and other key contacts containing information on training, new resources and research, upcoming events and Program updates. These emails are also available for download from the NADA website. **Regular Member Email updates** containing highlights on PEP along with other NADA information and activities
- Bi-monthly NADA Advocate containing highlights on PEP initiatives over the duration of the Program
- Forum resource bags provided to participants. The most significant bag was compiled for the October 2011 Forum containing items such training material for ABI and FASD, care plan coordination for complex needs clients, posters for services promoting ABI awareness, plus a number of journal articles.

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<sup>13</sup> Contact information and descriptions are listed under the following headings:

- ABI
- Criminal Justice
- Disability services
- Intellectual disability
- FASD

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As the combined listing of Program deliverables indicates, NADA's implementation of PEP generated a substantial quantity of activity and output consistent with the Program Plan. Further, it fully complied with the agree Program deliverables established for PEP as listed at Section 2.3.2.

Section 3.2.2 discusses the impacts and outcomes of these activities, and the degree to which they met the stated aim and objectives of the Program as documented at Sections 2.2 and 2.3.

## **3.2 Program Outcomes**

As noted at Section 2.4.1, the evaluation of PEP was designed to assess results against a number of key measures (*see Attachment 1*). Each of these (indicated in *grey italics*) are assessed below, with a separate analysis of seeding grant outcomes included at Section 3.3. Outcomes relating to forging of relationships and partnerships are discussed at Section 3.4.

### **3.2.1 Needs and Barrier Identification**

As the outputs and deliverables in Section 3.1 indicate, NADA's approach to *identifying the needs and barriers faced by NGO D&A services working with clients with complex needs* involved a number of steps, commencing with the hosting of the two planning forums in November 2010 (*see Section 3.1.1*). These events resulted in a report on the key issues discussed (*see Section 3.1.7*), which included a full scoping of current service issues, gaps and barriers in respect to clients with complex needs.

These activities were followed up by NADA commissioning a literature review and series of member consultation activities. In June 2011, the substantial report arising from this activity was launched and made freely available via NADA's website. This publication, together with the numerous other resources and papers also distributed to members (*see Sections 3.1.5–3.1.7*), indicates NADA's success in fulfilling this Program aim.

Further, as many D&A organisations commented, NADA's focus on clients with complex needs also '*exposed various issues*' and '*service gaps*' that service providers were not previously aware were impacting on their clients. As one stakeholder summed up:

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*‘Up until then [PEP training] we were unaware of how many of our clients had a cognitive impairment’.*

The reviewers concluded that, while more work still remains to be done (see Section 3.7), over the two years of the project, NADA was successful in significantly advancing the D&A sector’s awareness of the needs of clients with complex needs, as well as the potential barriers and options for improvements.

### **3.2.2 Development of Resources and Promotion of Good Practice**

As the outputs and deliverables in Section 3.1 indicate, NADA’s approach to *identifying, documenting and promoting good practice in working with D&A clients with complex needs* and to *delivering or facilitating access to quality resources* took a number of different dimensions. The key modes of delivery were via:

- researching, producing and disseminating various PEP resources and reports (see Tables 5 and 6)
- disseminating various e-bulletins and enhancing the NADA website with numerous resources and linkages (see Section 3.1.7)
- hosting various forums to enable D&A staff to hear from expert speakers and learn the outcomes of the seeding grants project (see Table 1).

Stakeholders consulted indicated they highly valued each of these activities, with adjectives commonly used including *‘useful’*, *‘of practical value’* and *‘highly relevant to the sector’*.

Most stakeholders also noted they were particularly looking forward to the upcoming practice resource as they anticipated it containing advice and information that could be drawn on by staff *‘for years to come’*.

The reviewers concluded that each of the above activities, in combination with the facilitated training and seeding grants (see Section 3.3 below) had substantially advanced the sector’s understanding of clients with complex needs together with good practice options in terms of client engagement and service outcomes.

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### 3.2.3 Access to Quality Training

During the planning and scoping phase of the Program, NADA identified the limited amount of training courses available to D&A staff working with clients with complex needs. In response to this finding, NADA undertook various activities as part of the PEP program.

As a result a major part of the Program involved NADA *delivering, or facilitating the delivery of, quality training in respect to D&A clients with complex needs.*

This comprised:

- NADA hosting various complex needs forums as documented in Table 1.
- NADA providing members with free access to workshops on four complex needs topics. In total ten different sessions were delivered as documented in Table 2.
- NADA offering member organisations training grants to run their own in-house training courses. In total seven organisations were successful, running a total of eight training sessions as documented in Table 3.
- NADA providing seven member services with access to free in-house PSD case reviews and training as document in Table 3.

These four types of initiatives resulted in 528 individuals<sup>14</sup> receiving tailored working with clients with complex need training as a result of the PEP. Over 95% of these were staff working in D&A NGOs across NSW, the majority of who work in direct client service roles.

It should be noted that a significant proportion of these individuals were from services outside metropolitan areas. This is significant given the well documented challenges staff in regional NSW have in accessing quality, affordable training, including in relation to emerging topics such as working with D&A clients with complex needs.

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<sup>14</sup> Note: A small percentage of these individuals may have attended more than one PEP training event. The data does allow precise numbers to be identified.

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Consistent with NADA's quality processes, all PEP training events were required to administer a results-based questionnaire at the conclusion on each event<sup>15</sup>. The individual participant responses to each training session were then analysed by NADA, with consolidated reports prepared. Most events had at least 90% or above response rates<sup>16</sup>.

The training data was used to help inform the design and delivery of subsequent training sessions, with a number of training packages modified based on participant feedback. The data was also provided to the evaluators (as agreed in the original Evaluation Framework - see *Section 2.4.1*) and has been used to provide the outcomes analysis for Table 7.

The reviewers noted that while this systematic approach to gathering and utilising stakeholder feedback is already typical of NADA's broader operations as a quality driven organisation, the process is highly commendable. Further, they concluded that while the feedback was consistently positive in respect to all PEP forums and training, the very high scores in the second half of the Program in particular can be seen as a reflection of the continuous improvement and review process used throughout NADA's management of PEP.

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<sup>15</sup> The standardised instruments were developed by NADA consistent with the evaluation framework (see *Attachment 1*).

<sup>16</sup> Note: (1) In the case of the three No Bars training sessions (see *table 2*) an alternative model of training evaluation tool was used (n=37). (2) In three PEP in-house training sessions, namely events on 23 November, 7 December and 10–11 November (See *Table 3*), a combined group evaluation was prepared and submitted to NADA by the host organisation (n=48).

**Table 7. Combined PEP Forum and Training Feedback Results**  
(n= 205, excluding the No Bars and Case Review Training results - see discussion below)

<i>Measure</i>	<i>Percentage of respondents reporting positive outcomes*</i>
• Improved <u>awareness of the needs</u> of complex needs clients with D&A issues	86%
• Improved <u>knowledge of options</u> to improve outcomes for complex needs clients with D&A issues	94%
• Improved <u>confidence</u> to work with complex needs clients with D&A issues	84%
• Improved knowledge about where <u>further information</u> on working with complex needs clients is available	96%
<b>Overall the training event:</b>	
• is likely to lead to some improvement in your [the respondent's] work	95%
• is likely to lead to some improvement in the work of your organisation	93%
• provided a useful opportunity to network	100%
• was worthwhile	100%

Source: EJD Consulting with consolidated data supplied by NADA via 15 independent evaluation reports 2011–2012.

\* *Positive outcomes were recorded as either very improved or somewhat improved on a four point Likert scale. Note: Some surveys included slight variations in wording and measures.*

In addition, over 75% of all participants in PEP training and forums reported positive or very positive outcomes in each of the following measures:

- the presenters' knowledge and skills was appropriate
- the event's discussion and information was useful and appropriate to your organisation
- the resources provided at the event were useful.

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Of the three No Bars training events<sup>17</sup> that used different evaluation tools, the results were equally positive. For example, over 95% of all respondents (n=37) scored the events as either excellent or good on each of the following measures:

- quality of the content and topics
- quality of the presentation and time for each topic
- value of the learning resources
- value of the training exercises and activities undertaken.

The feedback collected on the PSD Case Reviews was similarly positive and beneficial to participants. For example, 75% or over of all respondents (n=28<sup>18</sup>) reported that the session was either useful or very useful in terms of improving their:

- theoretical knowledge and willingness to work with clients with PSD
- their optimism and enthusiasm to work with clients with PSD
- their confidence to work with clients with PSD
- their clinical skills to work with clients with PSD.

The combined feedback from all PEP training and forums demonstrates the initiatives were highly successful in meeting the core aims as defined in the evaluation framework. As confirmed in the other stakeholder feedback, the PEP training and forums filled a major unmet need in the sector and served to ‘*upskill staff*’ on key topics related to D&A clients with complex needs.

*See Sections 3.7.1 for feedback on future training.*

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<sup>17</sup> See Table 2 - No Bars events on 22 March, 3 May and 5 May 2011

<sup>18</sup> Feedback surveys were not administered at the first two training events which resulted in 17 participants not providing any feedback.

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### 3.3 Seeding Grant Outcomes

As noted above, the chief vehicles by which NADA *identified, documented and promoted good practice in working with D&A clients with complex needs* was via the provision of PEP seeding grants to 10 D&A organisations (see Section 3.1.4 and Section 4 for details) and the subsequent opportunities to share the outcomes via the NADA workshops, forums and resources distribution.

As these grants comprised the largest component of the Program (both in terms of time, resources and outputs) it is worthwhile reviewing how they contributed to the three Program Objectives which are relevant to them (see Section 2.3.1).

*Identifying the service practice development needs and barriers of D&A NGO services in relation to responding to clients with complex needs* (Objective 1) was one of the key outcomes of the Seeding Grants projects. All of the funded agencies conducted some type of activity to assess the difficulties clients with complex needs had in accessing their service and ways in which they could identify and better meet the needs of these clients. This included:

- 4 projects focused on criminal justice clients
- 4 projects focused on people with a cognitive impairment
- 2 project focused on clients with both a cognitive impairment and criminal justice background

Activities to identify service practice needs and barriers included conducting training needs analyses of staff, implementing new assessment tools, pre and post testing of staff knowledge, research and literature reviews, and policy and program reviews. As one service manager commented:

*“The initial assessment demonstrated that our staff had minimal knowledge and no capacity to deal with cognitive impairment. They couldn’t identify mild to moderate cognitive impairment, and believed that behaviours [associated with cognitive impairment] were that person ‘behaving like an addict’.”*

All 10 grant recipients reported that their PEP project had successfully helped identify needs and barriers to responding to clients with complex needs accessing their service, with 70% reporting it had helped a lot.

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### **3.3.1 Identified Needs**

Some of the specific service practice needs that the grants program helped identify included the need:

- for an assessment tool to identify cognitive impairment in clients
- to modify programs to cater for people with cognitive impairments
- to train staff to be aware of the behaviours associated with cognitive impairment
- to develop staff skills in working with people with cognitive impairment
- for more specialist support services to refer clients, particularly services for people leaving prison and those with a cognitive impairment
- for materials and resources that can be used by people with low literacy levels
- to establish partnerships with Corrective Services NSW, and more specifically those who work in probation and parole
- for specialist counselling for people who have experienced trauma.

*See Section 3.7 for further needs identified through the Program.*

### **3.3.2 Identified Barriers**

Some of the specific barriers that the grants program helped identify included:

- agency staff being unaware that they had complex needs clients or that a substantial proportion of their clients had complex needs
- staff lack of awareness of the effects of complex needs on client behaviour, including the impact of cognitive impairment, brain injury and trauma
- lack of specialist staff to work with people who had experienced trauma
- accommodating the transient nature of some complex needs client groups or clients being in prison
- lack of community language programs for prisoners
- staff believing that catering for complex needs clients would mean ‘more work’
- unnecessary exclusion of clients on probation and parole based on the assumption that they did not meet program entry criteria
- less than optimal bed arrangements to cater for people with a cognitive impairment.

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In addition, many of the funded projects also identified a shortage of available resources to support staff and build capacity at the organisation level, as well as geographical isolation in terms of their capacity to access specialist services, support or training opportunities.

Many of these same needs and barrier issues also emerged in other stakeholder feedback conducted as part of this evaluation.

### **3.3.3 Capacity Building**

As described in Section 4, each of the funded projects successfully implemented *projects and activities to build the capacity of the NGO D&A sector to respond to D&A clients with complex needs* (Objective 2).

While the major beneficiaries of this objective were the organisations who received the grant funding, NADA also facilitated a number of other opportunities to share the project outcomes, not just with other NADA members, but also with other partner agencies and stakeholders working with clients with complex needs. The chief vehicles for this were the PEP Forums (*see Table 1*), via the NADA website (*see Section 3.1.7*) and via promoting the outcomes of the funded projects in various resources, presentations and reports arising from PEP (*see Sections 3.1.5–3.1.7*).

Further, various stakeholders consulted reported that they were aware of various assessment tools and other approaches that had been developed through the grant project and were *'following up with the organisation'* to get copies of any documentation, and/or *'to discuss the project outcomes and how it could be relevant to their organisation'*.

As NADA reported plans to further promote PEP outcomes over the coming months, including via the widespread distribution of the *Complex Needs Capable Resource* (*see Table 5*), the reviewers anticipate outcomes related to Objective 2 – namely building the capacity of the NGO D&A sector – are likely to continue to be seen for at least another six to nine months.

### **3.3.4 Client Engagement and Treatment Outcomes**

In terms of *improving the engagement of D&A NGOs with clients with complex needs and improving their treatment outcomes* (Objective 4), all grant recipients reported very positive outcomes.

For example, as Table 8 documents, when each funded organisation was asked to assess change against some key outcome measures, the results were significant, with all reporting significant improvements in treatment options and improved client outcomes in particular.

**Table 8. Seeding Grants: Client Outcomes** (as reported by the recipient organisation) (n= 10)\*

<i>Measure</i>	<i>Yes, definitely</i>	<i>Yes, possibly</i>	<i>No, not really</i>	<i>N/A</i>
<b>Overall the seeding grant project resulted in:</b>				
<ul style="list-style-type: none"> <li>Increased numbers of clients with complex needs being <u>accepted for treatment</u> by the service</li> </ul>	60%	10%	30%	-
<ul style="list-style-type: none"> <li>Increased numbers of clients with complex needs being appropriately <u>assessed</u> by the service</li> </ul>	70%	-	20%	10%
<ul style="list-style-type: none"> <li>Increased numbers of clients with complex needs being appropriately <u>treated</u> by the service</li> </ul>	60%	30%	-	10%
<ul style="list-style-type: none"> <li>Overall improved <u>outcomes</u> for clients with complex needs within the service</li> </ul>	70%	30%	-	-

Source: EJD Consulting based on data provided in the 10 Final PEP Seeding Grant Reports.

\* It should be noted that the two services that registered 'not applicable' in terms of increased client numbers did not include this as a project aim.

When funded services were asked to identify some specific outcomes related to improvements for clients, the following issues were highlighted:

- complex needs assessments were now being routinely undertaken by the service
- the service had adopted the complex needs assessment tool piloted
- the service had increased the number of probation and parole clients accepted into the program
- the service program had been modified to better serve clients with ABI or cognitive impairment, including by:

- 
- increasing verbal communication rather than relying on written information
  - using additional pictorial resources and information
  - providing group material before the course commences
  - using memory aids.
  - improved program retention specifically for young people with complex needs
  - more women who had experienced past trauma, and who had previously been difficult to engage with, moving onto other support services and attending D&A rehabilitation programs.

Whilst these reported improvements are significant (particularly given the relatively short duration of the grant funding) and demonstrate that the grant program objectives have been fulfilled, a number of stakeholders noted that *'it is too early to determine'* if they will translate into *'sustained client outcomes over time'*. NADA staff also commented on sustainability and emphasised the importance of having a continuous improvement approach to practice enhancement (see Section 3.7).

Nonetheless, all grant agency staff interviewed indicated they were *'very optimistic'* and *'hopeful'* that the project initiatives will be further built on, and that this was likely to result in additional benefits including:

- *'improved client access and retention'*
- *'better treatment outcomes for complex needs clients in the longer term'*
- *'staff more comfortable working with affected clients [with complex needs]'*.

Other client related comments provided included:

- *'Our clients are very transient and hard to engage, but we found that they engaged really well with this program.'*
- *'We haven't evaluated the program yet, but the clients say they really like the changes we have made.'*
- *'People like having more choice about what activities they participate in. Instead of just one group that everyone does, we now give them a range of options that they can select to suit them.'*

### 3.3.5 Service Outcomes

In addition to improved outcomes for clients, each of the seeding grant recipient organisations reported positive benefits in terms of their service and program designs.

As documented in Table 9, the most positive outcomes were reported in respect to the relationships and partnerships formed with other organisations, though all organisations also reported improved referral pathways, and all but one organisation also reported improvements in their internal systems and processes.

**Table 9. Seeding Grants: Service Outcomes** (as reported by the recipient organisation) (n= 10)\*

<i>Measure</i>	<i>Yes, definitely</i>	<i>Yes, possibly</i>	<i>No, not really</i>	<i>N/A</i>
• Overall improved referral pathways with other service providers with a role in assisting clients with complex needs	60%	40%	-	-
• Overall improved internal systems (e.g. policies, procedures or practices) in working with clients with complex needs	60%	30%	-	10%
• Improved relationships or partnerships between your organisation & other organisations with expertise in clients with complex needs	80%	10%	10%	-

Source: EJD Consulting based on data provided in the 10 Final PEP Seeding Grant Reports.

\* It should be noted that the one service that registered ‘not applicable’ in terms of internal systems did not include this as a project aim.

Some specific service improvements reported were:

- *‘development of a complex needs policy’*
- *‘establishment of new referral agencies, including ABI services, GPs, other D&A services’*
- *‘partnership development with ABI services and associations’*
- *‘partnership development with the local probation and parole office’*
- *‘improved partnerships with Corrective Services’*
- *‘we are able to provide [clients with] better links to other services and support options’.*

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Based on this feedback and the documented inputs, outputs and outcomes of each seeding grant, the reviewers concluded the seeding grants had successfully fulfilled their objectives and overall made a very positive contribution to practice enhancement in the sector in respect to working with clients with complex needs.

As one grant recipient summed up, the PEP grant allowed services to:

- *'look deeply at the way we delivered services, and everything was open for review'.*

### **3.4 Partnerships and Affiliations**

Related to each of the PEP objectives (see Section 2.3.1) was the need for NADA to forge partnerships, affiliations and working relationships with organisations and individuals with expertise in working in the complex needs areas.

From the outset of the Project, NADA was proactive in facilitating this. In November 2010 (see Section 3.1.1) NADA convened two planning forums with invited participants comprising a broad cross section of experts in each of the complex needs focus areas. The first forum focused primarily on the different dimensions of cognitive impairment, and the second focused on criminal justice issues.

From these events, and various follow-up discussions and meetings, NADA formed strong working relationships with various bodies able to provide training to the sector. As documented in Tables 2 and 3 the seven major training providers used by NADA and its member organisations were:

- Brian Injury Association of NSW (for ABI training)
- arbias (for ABI training)
- Training Connections Australia (for FASD training)
- Dr Margaret Spencer, Consultant (for intellectual disability training)
- Community Restorative Centre NSW (for criminal justice training)
- NSW Legal Aid and Turning Point Alcohol and Drug Centre, Victoria (for court support and case notes information and training)
- Project Air Strategy, Illawarra Health and Medical Research Centre (for Personality Spectrum Disorders Training).

In each instance, NADA worked closely with the trainers to ensure they were aware of the roles and functions of the NGO D&A sector, as well as any specific issues that had been identified through NADA research on needs and barriers, or through sector consultations.

In the majority of cases each of the trainers and their organisations were also involved in other aspects of PEP (as described below).

In addition to identifying training providers, NADA was active in forging close relationships with a broad range of other experts. As summarised in Table 10, these included key academics and researchers, private sector clinicians, non government organisations and advocacy groups, plus relevant government agency staff.

**Table 10. Key PEP Affiliates and Partner Organisations**

<b>Academic/ Research &amp; Private Sector Affiliations</b>	<b>Non Government Organisations &amp; Advocacy Groups</b>	<b>Government Departments</b>
<ul style="list-style-type: none"> <li>• School of Social Sciences and International Studies, University of NSW</li> <li>• Indigenous Education at University of Technology, Sydney</li> <li>• Advanced Neuropsychological Treatment Services</li> <li>• Community Sector Consulting</li> <li>• Training Connections Australia</li> <li>• Just Forensic (fellow of Deakin University)</li> <li>• Project Air Strategy, Illawarra Health &amp; Medical Research Institute, University of Wollongong</li> </ul>	<ul style="list-style-type: none"> <li>• Community Restorative Centre NSW</li> <li>• NSW Council for Intellectual Disability</li> <li>• Brain Injury Association of NSW</li> <li>• arbias</li> <li>• Intellectual Disability Rights Service (IDRS)</li> <li>• Criminal Justice Support Network, IDRS</li> <li>• National Organisation for Fetal Alcohol Syndrome and Related Disorders</li> <li>• Russell Family Fetal Alcohol Disorders Association</li> <li>• Turning Point Alcohol and Drug Centre, Victoria</li> </ul>	<ul style="list-style-type: none"> <li>• Mental Health and Drug and Alcohol Office, NSW Ministry of Health</li> <li>• Corrective Services NSW, NSW Department of Attorney General &amp; Justice</li> <li>• Ageing, Disability and Home Care, NSW Family and Community Services</li> <li>• Justice Health NSW</li> <li>• Legal Aid NSW</li> </ul>

Source: EJD Consulting based on information supplied in various NADA reports

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Each of these organisations assisted NADA and the implementation of the Program through performing one or more of the following roles:

- a) participating in early planning workshops and other discussions relating to the Program's implementation
- b) advising on references and contact details for dissemination to NADA members
- c) providing content or feedback on information for inclusion in one or other of the NADA PEP resources and publications (see *Table 6*); or
- d) presenting at one or more of the NADA Forums (see *Table 1*).

The reviewers conducted interviews with representatives from more than half of the organisations listed (see *Attachment 2*). As noted elsewhere in this report, each, in their own words, reported they:

- had enjoyed their involvement in the Program
- had found the affiliation with NADA and its member organisations to be productive, worthwhile and of practical relevance to clients with complex needs
- believed the Program was well run and managed by NADA
- believed that more needed to be done to strengthen the D&A sector's capacity to work with clients with complex needs.

Based on these relationships, and the feedback provided by stakeholders, the review found that NADA had adopted an *'intelligent'* and *'practical'* approach to how it engaged and utilised experts in the field. This approach not only contributed directly to the quantity of the outputs and the quality of outcomes previously discussed (see *Sections 3.1 and 3.2 respectively*), but also to many of the Program strengths as listed at Section 3.6.1.

As such the reviewers concluded that not only did NADA succeed in *forging strong relationships and partnerships with organisations or individuals with special interest or expertise in clients with complex needs*, but they also facilitated member organisations to have direct access via the resources and information provided and promoted through the project.

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## **3.5 Program Management and Operations**

### **3.5.1 Staffing and Management**

The Program was principally managed and staffed by two NADA personnel: Ciara Donaghy, Project Officer and Heidi Becker, Program Manager, NADA Workforce Development Program.

Stakeholders consistently commented on the *'helpfulness'* and *'responsiveness'* of NADA staff in respect to PEP and its various initiatives. They noted that both Ciara and Heidi made themselves *'readily available'*, responding to *'calls and emails promptly'*, particularly in relation to PEP training opportunities and advice on the seeding grants.

All feedback indicated NADA managed and implemented the Program competently and consistent with stated Program objectives as previously noted.

### **3.5.2 Budget**

The total Ministry of Health funding allocated to NADA for the PEP initiative was \$767,647 to be spent over two years.

In addition to the Health funding, NADA received a \$20,000 Community Education and Engagement Project Grant from the Foundation for Alcohol Research and Education (FARE) - an independent, charitable organisation working to prevent the harmful use of alcohol in Australia. These funds supported the Networking for Court Support events and resources.

NADA allocated substantial amounts of a Program Manager's time in kind to supporting the PEP initiative which is not reflected in the budget funding for PEP.

The reviewers found that NADA managed and monitored PEP expenditures consistent with the agreed funding agreement.

### **3.5.3 Evaluations and Accountabilities**

Consistent with NADA's commitment to quality improvement, PEP was designed from the outset with high levels of stakeholder feedback, as well as regular reporting mechanisms. These included the following:

- 
- 1) Standardised written feedback surveys administered at the end of all PEP training and other group activities (*see Section 3.2.3*).
    - All surveys utilised well considered results-based measures and as such generated important feedback on the outcomes achieved by the activities.
    - The PEP event feedback was promptly analysed and consolidated by NADA and used to inform the design and delivery of future events.
    - As the majority of outcome measures were common to all PEP data collection, they also allow useful comparative data to be generated.
    - This consolidated feedback has been an invaluable source of data for use in this evaluation (*see Table 7 for example*).
  - 2) Standardised planning and reporting templates for all seeding grant projects.
    - This meant that all projects were based on a sound project plan that was then reported against at the sixth month and twelfth month/end of project.
    - These reporting templates were designed and distributed by NADA and provided a sound basis on which to assess the project achievements and challenges to date.
    - Once again, the results-based feedback has provided a sound and detailed evidence base for this evaluation (*see Tables 8 and 9 for example*).

These processes not only ensured PEP was able to be continuously reviewed and monitored, but they also served to provide NADA with documented evidence of the outputs and outcomes of all major PEP activities. This evidence was identified as a particular strength of the Program.

#### **3.5.4 Funding Body Feedback and Reporting**

As previously mentioned (*see Section 3.1.7*) when PEP was being established an initial Project Plan followed by a detailed Implementation Plan was prepared and submitted to MHDAO. Thereafter NADA submitted annual Program Performance Reports, with documentation on deliverables and performance measures met.

In addition to these written reports, NADA staff met regularly with MHDAO staff. MHDAO were also consistently invited to have representation at PEP forums and on the grant panels and advisory groups.

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The combination of all of the above management arrangements were found to deliver not only funding accountability, but also opportunities for quality improvement and outcome monitoring. This in turn enabled NADA to continuously adjust and improve the Program initiatives in line with overall Program objectives.

The reviewers concluded the NADA results-based approach to PEP's implementation and management was of a high quality. It provides a good model that could be adopted for use across other government funded programs.

### **3.6 Program Strengths and Challenges**

As a result of their evaluation of the Program inputs, outputs, and outcomes described earlier, together with stakeholder feedback, the reviewers identified a number of Program strengths and challenges. Points related to each of these topics are listed below.

#### **3.6.1 Key Program Strengths and Benefits**

- **Raised the profile** of the nature and extent of D&A clients with complex needs as well as the practice challenges they pose within NGO services.
- **Increased D&A staff awareness** of issues relating to clients with complex needs, and promoted some practice options for how to improve engagement.
- **Identified and established relationships with a range of external experts and stakeholder organisations** with expertise in different facets of clients with complex needs.
- **Adopted a flexible approach** to how the Program was implemented, with Program deliverables evolved over time in response to feedback or circumstances (*also see bullet point 4 in Section 3.6.2 below*).
- **Operated as an 'information and training broker'** distilling and adapting information and training, to best suit the needs of the NGO D&A sector.
- **Delivered a range of quality outputs** reported as highly useful to the NGO D&A sector. These included outputs that successfully:
  - upskilled staff with potential for immediate benefits to clients and staff (for example via training)

- 
- enabled broader service reforms (for example via the service seeding grants), and
  - built sector capacity that can be built on over time (for example via various resources and information disseminated by NADA)
  - **Provided a range of opportunities for D&A staff to network** and discuss practice issues and challenges in both formal and informal settings.
  - **Provided access to well presented and relevant information** relating to clients with complex needs including upcoming training opportunities, experts' contact details, and access to quality resources (either produced or identified by NADA).
  - **Undertook regular communication** with key stakeholders, using a range of options including website updates, e-bulletins as well as direct emails.
  - **Included access to helpful NADA staff** available to assist the sector with PEP related information, advice and referrals.

The highlight box below also describes two additional strengths specifically related to the PEP seeding grant initiative.

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## **ADDITIONAL STRENGTHS & OUTCOMES OF THE SEEDING GRANTS**

### **➔ Demonstrating the readiness of the sector to address complex needs**

*The Seeding Grants program was extremely successful in raising awareness about complex needs clients and allowing agencies to develop innovative programs for their clients.*

*For a range of reasons, complex needs clients are a group that have often been neglected by the sector. The grants program revealed that many service staff were unaware of the extent of existing clients who had one or more complex need issues or the ways in which clients can be better engaged and retained. However, once attention was given to the issue, staff were generally very amenable to using assessment tools, modifying programs and being more inclusive and 'empathetic'.*

*As such, the 10 pilot programs have provided a clear demonstration that the sector is ready and capable to better assess and cater for clients with complex needs.*

### **➔ Effective problem solving**

*All the Seeding Grant projects were characterised by effective problem solving. Each project had a particular issue of concern to service staff (e.g. the difficulty of engaging young offenders, the lack of resources appropriate to Vietnamese speaking offenders, the difficulties trauma survivors have in engaging with treatment and support, being unaware of the number of clients with a cognitive impairment, clients forgetting the content of group work, etc.).*

*These issues were then systematically addressed through use of the seeding grants money and the support and advice offered by NADA. At the end of the grants program, there were measurable changes in all the services in the way they work with their particular clients with complex needs (e.g. routine assessment for cognitive impairment, specialised counselling to help women with D&A and complex needs who are trauma survivors, specific program for young offenders and Vietnamese prisoners, and numerous program modifications to help clients engage and retain what they learn).*

*The projects thus provide excellent models for other agencies attempting to address similar issues within their own programs.*

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### 3.6.2 Program Challenges or Opportunities to Strengthen

When stakeholders were asked to identify any problems or challenges experienced in relation to PEP, or NADA's management of the Program, only a few issues emerged:

- The public roll-out of PEP was slightly delayed (by approximately 8 weeks) due to a number of factors including NADA's need to renegotiate aspects of the funding with MHDAO (see Section 2.2). In addition, as the Program was new to the sector, and in many respects without precedent in other NGO sectors as well, NADA needed to undertake more extensive scoping work than first anticipated.

It was noted however that '*NADA's commitment to consultation*' and '*taking the time*' to conduct research and '*proper planning*', particularly in respect to the design of the grant programs, was instrumental in helping deliver the quality Program outcomes described above.

- The timeframes for the development and implementation of the PEP seeding grants were '*very tight*'. Even though significant results were achieved in the 12 month period, '*some additional time would have greatly assisted*' the funded NGOs. This challenge was well known to NADA.
- The 2011 discontinuation of the adapted complex needs training package was viewed at the time as '*unfortunate*' given the demand for additional assistance in this area. As one respondent observed, it could have provided a much needed additional resource for the sector.

While the reviewers note the delay, they also note that the work that lay behind the package substantially contributed to the direction and focus of the *Complex Needs Capable* resource to be released shortly.

- Some of the training feedback did not use the recommended standardised instruments.

- 
- The continuous feedback and reform process (also described above) meant that there were Program changes that impacted on other personnel involved in the implementation process. For example, one trainer commented that there were *‘periods of uncertainty’* and *‘some very short preparation times’* given for some training sessions. This was viewed as less than ideal.
  - While noting how valuable the PEP Forums were in terms of hearing from experts and providing opportunities to network, some stakeholders noted that they would have liked the events to have concluded with some consolidation of what the Forum had achieved or the next steps. This might have involved a facilitator or chair drawing together some of the key messages, common themes or practice implications that had been discussed throughout the day.

### **3.7 Future Directions and Next Steps**

Throughout PEP, NADA sought feedback for Program participants as to what else would assist them in enhancing their practice with respect to clients with complex needs. As previously noted, much of this feedback was used to inform the Program’s implementation; other feedback was promptly acted on via communication back to members<sup>19</sup> or via NADA’s enhanced website- see *Section 3.1.7*).

However, on reviewing this participant feedback, and considering the views of stakeholders consulted as part of this review, a number of issues remain current and should be considered for inclusion in any future D&A workplace development or practice enhancement program.

The issues divide into five core areas:

- Ongoing staff training
- Additional resources, tools and research
- Opportunities to improve service practice, policies and procedures
- Ongoing partnerships and networking opportunities
- Service system advocacy and funding.

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<sup>19</sup> For example, PEP Forum participants were provided with the outcomes of the event, including the results of their combined evaluation of the Forum, the write-up included information that responded to most issues raised.

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Note: While the feedback provided is further discussed below<sup>20</sup>, the reviewers note that NADA is continuing to implement additional practice enhancement initiatives and training opportunities as per their website.

Further, the content of the *Complex Needs Capable* resource is anticipated to address many of the specific information needs identified. Where this is evident, the reviewers have added the resource acronym in brackets (see CNC).

### **3.7.1 Ongoing Staff Training**

In recognition of NGO staff turnover and the need to continuously build staff capacity and skills, there was widespread interest in D&A staff having ongoing access to affordable training opportunities. The focus of this training should include topics that are the same or similar to the topics covered in PEP. They should also include basic and more advanced training opportunities for those who have participated previously.

The training topics include:

- cognitive impairment (including focused training on ABI and clients with intellectual disability and FASD)
- clients and families affected by FASD
- the legal process and working with clients involved in the criminal justice system
- mental health and dual diagnosis, incorporating topics such as personality spectrum disorders.

A number of supplementary complex needs topics were also identified by stakeholders including:

- working with people with physical and sensory disability
- physical health issues
- family issues and group processes
- pharmacotherapy
- child protection and involvement with Community Services

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<sup>20</sup> Note: This feedback was primarily gathered between June and September 2012.

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- homelessness and homeless support systems
  - trauma and trauma informed care, incorporating domestic violence and working with adults abused or neglected as children.

On the issue of enhanced service operations there was also strong interest in additional training to help make organisations become '*complexity capable*', namely advice and training in:

- best practice intake and assessment procedures (see CNC)
- recommended staff supervision and staff support options (see CNC)
- quality communication options for clients with cognitive impairment and/or low literacy levels (see CNC).

### **3.7.2 Additional Resources, Tools and Research**

While a number of stakeholders noted some wariness of '*information overload*' there was nonetheless widespread sector interest in NADA continuing to assist in '*filtering*' information and promoting and distributing resources relevant to work in the NGO D&A sector.

Quality and up-to-date information was most needed on the same or similar topics to that noted above in relation to training.

There was also strong sector interest in access to quality screening and assessment tools on the following complex needs topics:

- cognitive impairment and/or ABI (see CNC)
- intellectual disability
- FASD
- trauma
- mental health.

There was also a need for resources for use by clients with complex needs, in particular resources that are 'easy-to-read' or use appropriate images for people with an intellectual disability or who have literacy difficulties. Providing an 'image bank' for use by agencies to develop their own resources was one constructive suggestion. (Both suggestions reflected in CNC).

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In terms of further research, a number of stakeholders noted they were keen for NADA and/or member organisations to pursue additional partnerships and internships with academic institutions in order to encourage '*more service-driven research*'. There was also interest in more research activities focused on:

- outcome measures for clients with complex needs (compared to other cohorts of clients)
- success factors associated with retaining clients in treatment, especially for those groups with high attrition rates.

As noted below, many stakeholders were also keen for government to provide additional funding opportunities for researching evidence-based practice, including on topics such as alternative treatments or '*modalities to cognitive behavioural therapies*' (to a degree see CNC).

### **3.7.3 Opportunities to improve Service Practice, Policies and Procedures**

Based on the positive reports from each of the PEP grant recipients, there was widespread interest in further grants being made available to allow other services to enhance their own policies, procedures and practices. As such many stakeholders explicitly called for a further round of practice enhancement seeding grants.

When asked what the focus of the grant funding should be, there was strong interest in continuing the PEP focus on working with clients with complex needs.

When asked what the grant funding might be primarily used for a range of practice enhancement options were identified, each in response to individual service needs and issues. They included:

- review of intake and access barriers that currently prevent clients with complex needs either entering the service or being sustained in treatment
- provision of additional in-house training opportunities to build staff and organisational capacity
- undertake research, information and resources on good practice in working with complex needs clients
- appointment of part-time experts or consultants able to advise and support staff members working with clients with complex needs

- 
- providing opportunities to reform service policies and procedures (including practical aspects such as client information and posters)
  - opportunities to build partnerships and inter-service collaborations.

Various stakeholders also stressed the need for a *'multi-pronged approach'* to making all NGO D&A services more inclusive and *'accepting of clients with complex needs'*. While a number noted the challenges associated with managing risk, and duty of care to other clients, it was felt that these issues *'are often more perceived than real'* or *'based on preconceived judgments rather than on the individual and their history and background'*. This feedback suggested the need for more work to be done on ways to enhance the inclusiveness of D&A services including via:

- promoting flexibility and best practice in service intake and operations procedures
- identifying and managing client risk based on individual profiles *'rather than categorisation'* (such as in the case of offenders).

(Both issues well covered in CNC).

As one stakeholder summed up:

- *'What we need is a service system that has a long term commitment to being inclusive rather than exclusive – to removing barriers rather than finding ways to block people – even though I realise that is easier said than done, given current demands and resources'*.

A number of respondents also raised the related staffing issues of *'vicarious trauma'* and *'empathy fatigue'* associated with working with clients with complex needs. While additional training and resources were viewed as highly valuable in most instances, and could significantly *'help sustain good staff, even in difficult circumstances'*, it was also noted that *'not all staff were suited to working with such clients'*. As such there was an identified need to look at ways to assist some staff to move to non-treatment parts of the sector, or alternatively to be assisted to *'exit the sector'* in a *'dignified and supported'* manner.

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### 3.7.4 Ongoing Partnerships and Networking Opportunities

As the figure reported in Table 7 notes, participants at the various PEP forums and training events highly valued the opportunity to meet colleagues and to network with experts in the area of complex needs. Not surprisingly therefore, stakeholders called for NADA to continue to facilitate ongoing opportunities for service managers and staff to come together and discuss issues of mutual interest and concern. Some preferred vehicles for doing this included:

- hosting of additional Practice Enhancement Forums
- facilitating access to expert speakers and opportunities to participate in workshops focused on raising awareness, imparting basic knowledge and developing skills
- in addition to the Mental Health and D&A Research Network, forming other specialist inter-sectoral networks and collaborations including potentially ones focused on joint clients with:
  - cognitive impairment
  - involved in the criminal justice system.

There was also stakeholder interest in the sector developing in *'more sustained'* and *'consistent ways'* for referrals of D&A clients into and out of other service systems. As one stakeholder observed:

- *'Too often we send our clients off to another provider and yet we lack the processes to ensure they receive the support they need ...We really have to do better at helping clients to navigate the system and get the assistance they need'.*

This issue also related to how the NGO D&A sector was linked into other processes, including other mainstream health system services and justice health and correction services more generally. There was identified need for additional work to be done at state, as well as local levels, to better manage information transfer, privacy issues and referrals more generally between various providers working with clients with complex needs.

As discussed below, there was also interest in NADA being proactive in forming partnerships with other peak organisations and advocacy bodies to raise awareness and increase funding for clients with complex needs.

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### 3.7.5 Service System Funding and Advocacy

In addition to the above practice enhancement and service focused initiatives, various stakeholders called for a *'root and branch reform'* of how services for complex needs clients are approached by the service system and funded by government. As one stakeholder summed up:

- *'Rather than treat complex clients as an exception or as add-ons, governments need to recognise that many, many clients are now requiring the support of a range of specialists...Frankly the service system is just not designed or being funded for this. It is a real concern.'*

The challenge, as a number of stakeholders observed, is that funding for NGOs is still based on single need issues - *'either drugs and alcohol or mental health or disability or or or'*. This *'either-or'* situation is replicated in government, with both policy and service functions equally *'split and treated separately, in some instances between different departments [in the case of health and ADHC]'*.

What numerous stakeholders called for was for government to better integrate its own processes and create a more *'seamless approach'* to how it drives policies, delivers services, and provides funding for vulnerable clients, including those with complex needs. As one stakeholder commented:

*'All services – whether government or non government - need to remove access barriers and other limitations for complex clients... It's easy to find reasons to exclude people [from services]; what we need is a service system that is all about inclusion and focusing on the individual, not the service.'*

While this comment was made primarily in relation to people with cognitive impairment, other stakeholders expressed similar views in respect to those with links to the justice system, or with other forms of physical or intellectual disability or complex needs.

*'If government itself broke down its silos and compartmentalised services, our job as NGO [service providers] would be all the more easy.'*

A number of stakeholders believed NADA could capitalise on the PEP experience. They specifically called for NADA to continue to work with its member organisations and PEP partner organisations to advocate for government and others to:

- adopt standardised definitions including in respect to:

- 
- cognitive impairment
  - intellectual disability (and also people with disability more broadly)
  - comorbid or dual diagnosis
  - complex needs more broadly
  - increase recognition of the increasing complexity of clients within the NGO service system and to make available additional resources to appropriately engage and treat them
  - increase government funding, support and opportunities for different parts of the service system to:
    - undertake staff exchanges and other forms of collaboration to assist clients access specialist assistance from a range of service models and professionals
    - form inter-sectoral partnerships and formal linkages (similar to the Mental Health and Drug and Alcohol Research Network) to assist different sectors to share information and facilitate skills transfers
    - research and promote effective service models related to different groups of clients with complex needs.

In addition there was strong interest in NADA establishing formal links and potential grant funding from other areas of government including with:

- Corrective Services NSW and Justice Health, Ministry of Health
- Department of Health and Ageing
- Department of Family and Community Services, including with ADHC and units focused on young people, child protection and leaving care issues in particular.

A number of stakeholders also noted the need for NADA and its member organisations to further engage with magistrates and court staff, including educating them about the range of NGO programs and options available to support offenders with D&A issues as well as other complex needs. It is understood that this issue is the subject of ongoing discussions between NADA, NSW Legal Aid and the Criminal Justice Support Network.

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As one stakeholder summed up:

*'It's time we all moved beyond labels, and the need to pigeon hole people, and started to just assist the person in front of us... We all need to work in the best interest of the individual, and not keep finding excuses or reasons to exclude them'.*

\* \* \* \*

## 4. SUMMARY OF PEP SEEDING GRANT PROJECTS

What follows is a summary of the inputs, outputs and outcomes of the 10 PEP Seeding Grant Projects. As these comprise the largest component of the Program, and provided a significant opportunity for D&A NGOs to intensively focus on improving their organisation's skills and capacity in terms of working with clients with complex needs, some details on each are included below.

*Note: In this section, 'target group' refers to the complex needs focus of the funded project, not the target group of the service.*

<b>4.1 DRUG &amp; ALCOHOL MULTICULTURAL EDUCATION CENTRE</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	Drug and Alcohol Multicultural Education Centre (DAMEC), Redfern
<b>Title:</b>	Vietnamese SMART Recovery
<b>Target Group:</b>	Vietnamese speaking people in contact with the criminal justice system
<b>Grant Amount:</b>	\$50,000
<b>PROJECT</b>	
<b>Rationale:</b>	<ul style="list-style-type: none"> <li>The need to be able to offer a program to Vietnamese speaking people engaged with corrective services</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>To develop a Vietnamese language version of the SMART Recovery Program for clients in custody and in post release. <i>Smart Recovery is based on voluntary self-help groups that assist people in recovering from alcohol, drug use and other addictive behaviours. SMART Recovery teaches practical skills to help individuals deal with problems enabling them to abstain and achieve a healthy lifestyle balance</i></li> <li>To develop other Vietnamese language resources to support the SMART Recovery program</li> </ul>

<b>DAMEC continued</b>	
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Negotiated with SMART Recovery USA to adapt the program for the client group</li> <li>• Established and piloted Vietnamese language SMART Recovery groups for clients in custody and post release</li> <li>• Developed a resource manual and other group material</li> </ul>
<b>OUTCOMES AND ISSUES ARISING</b>	
<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Program has been well received by participants</li> <li>• Established working partnerships with Corrective Services NSW and strong links to key probation and parole staff</li> <li>• Improved staff awareness of cognitive impairment issues</li> </ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Prolonged negotiations with SMART Recovery USA regarding copyright and translation issues</li> <li>• Literacy issues in client group (in first language)</li> <li>• Identifying qualified bilingual facilitators</li> <li>• Delivering a service within a prison environment</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• Developing an Arabic language version of the SMART program</li> </ul>

<b>4.2 FREEMAN HOUSE, ST VINCENT DE PAUL</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	Freeman House, Armidale
<b>Title:</b>	Accessibility review for clients with complex needs: Partnership development and strengthening project
<b>Target Group:</b>	Adult clients in contact with the criminal justice system
<b>Grant Amount:</b>	\$30,000
<b>PROJECT</b>	
<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• It was evident that certain people with complex needs were being excluded from coming into the service. Freeman House staff wanted to examine these barriers and identify ways they could be overcome</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• Improve service access for people with complex care needs</li> <li>• Improve engagement and outcomes for client group</li> </ul>
<b>Aims: (continued)</b>	<ul style="list-style-type: none"> <li>• Strengthen relationships with other services and key external stakeholders and in so doing:               <ul style="list-style-type: none"> <li>○ improve referral pathways</li> <li>○ improve service and eligibility criteria</li> <li>○ enhance collaborative work practices</li> </ul> </li> <li>• Deliver professional training and staff development</li> <li>• Review and improve service processes</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Review and redevelopment of all Freeman House assessment procedures, including eligibility criteria</li> <li>• Development of a website</li> <li>• Developing relationships with cognitive impairment services and other service providers</li> <li>• Personalising programs to suit individual client needs</li> <li>• Use of web-based client management</li> </ul>

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**Freeman House continued**

***OUTCOMES AND ISSUES ARISING***

<b>Key Benefits:</b>	<ul style="list-style-type: none"><li>• Freeman House is now able to work with probation and parole clients who voluntarily enter treatment (i.e. P&amp;P clients are no longer excluded by definition)</li><li>• Excellent relationships formed with local probation and parole officers and other Corrective Services NSW staff</li><li>• Increased staff understanding and empathy for clients with complex needs</li><li>• Referrals to and from Freeman House are much better matched to the programs</li><li>• Other local services more aware of the programs Freeman House offers</li><li>• Much more efficient client management processes</li></ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"><li>• Undertaking the program review and development whilst also physically rebuilding the Freeman House premises</li></ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"><li>• Freeman House is currently undergoing a substantial re-build. The foundations for effective referrals and good partnerships are now in place for when this work is complete.</li></ul>

<b>4.3 KAMIRA</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	Kamira Drug and Alcohol Rehabilitation for Women, Wyong NSW
<b>Title:</b>	Improving treatment outcomes for residents at Kamira with complex needs
<b>Target Group:</b>	Female clients with cognitive impairment
<b>Grant Amount:</b>	\$19,500
<b>PROJECT</b>	
<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• Kamira staff identified the need to:               <ul style="list-style-type: none"> <li>○ improve how they engaged with and assessed people with cognitive impairment</li> <li>○ ensure that programs could better meet their needs</li> </ul> </li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• Improve the competency and confidence of staff when providing treatment to clients with a cognitive impairment</li> <li>• Develop an appropriate cognitive impairment assessment tool that then assists in effective treatment planning</li> <li>• Further develop and refine service policy and procedures</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Changes made to assessment procedures</li> <li>• A new intervention model developed</li> <li>• Revision to program structure and content (providing a range of program choices matching people’s interest and capacity)</li> <li>• Recognition of complex needs incorporated into individual treatment planning</li> </ul>
<b>OUTCOMES AND ISSUES ARISING</b>	
<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Significant and substantial change to program content and design</li> <li>• Improvements in staff capacity to respond to clients with complex needs, including being able to:               <ul style="list-style-type: none"> <li>○ make changes to programs</li> <li>○ plan treatment and implement individual programs with clients</li> </ul> </li> <li>• Improved client engagement</li> </ul>

<b>Kamira continued</b>	
<b>Key Benefits</b> (continued)	<ul style="list-style-type: none"> <li>• Improved social support for clients, through:               <ul style="list-style-type: none"> <li>○ improved continuity between D&amp;A treatment and local support services including family services</li> <li>○ greater involvement of the family and childcare workers</li> </ul> </li> <li>• Better links with referral services, including ABI association and GPs</li> </ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Increased workload as a consequence of increased treatment planning, referrals, client choice of programs and client monitoring</li> <li>• Determining if behavioural issues are treatment or disciplinary issues, or mix of both</li> <li>• ‘Break-up’ of the past program design – clients no longer all ‘doing the same thing at the same time’</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• Continuing with program changes</li> <li>• Ongoing staff training</li> </ul>

## 4.4 KARRALIKA PROGRAMS INC.

### PROFILE

<b>Organisation:</b>	Karralika Programs Inc, Tuggeranong ACT
<b>Title:</b>	Complex needs project
<b>Target Group:</b>	Adult clients with cognitive impairment
<b>Grant Amount:</b>	\$50,000

### PROJECT

<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• To ensure that there were good policies and procedures for clients with cognitive impairment</li> <li>• To accept more clients with cognitive impairment</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• To improve access to residential treatments for clients with cognitive impairment</li> <li>• To improve staff awareness of cognitive impairment and their capacity to work with ABI clients</li> <li>• To change policies and procedures to better meet the needs of complex needs clients</li> <li>• To communicate a commitment to working with clients with cognitive impairment</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Staff training and staff access to resources with a focus on:             <ul style="list-style-type: none"> <li>○ knowledge and awareness of cognitive impairment</li> <li>○ improved assessment procedures</li> <li>○ ways of working with clients with specified complex needs</li> </ul> </li> <li>• Development of a Complex Needs Policy</li> <li>• Introduction of additional assessment procedures</li> <li>• Updated service information and resources for clients and families</li> <li>• Modifications to Program, including more flexible delivery options</li> <li>• Changes in residential setting, including dedicated bedspace</li> </ul>

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**Karralika continued**

***OUTCOMES AND ISSUES ARISING***

<b>Key Benefits:</b>	<ul style="list-style-type: none"><li>• Much improved identification of people with cognitive impairment: Karralika now has the necessary assessment tools and criteria</li><li>• Staff are better prepared to meet the needs of people with cognitive impairment coming into programs, as clients with this condition are now identified before they experience difficulties</li><li>• Staff realised that people with cognitive impairment was a group they could assist and that many of their existing and previous clients had a cognitive impairment. There was a realisation that ‘we are already working with those types of clients’</li><li>• Improved client retention</li><li>• Client group and the community are educated about cognitive impairment:<ul style="list-style-type: none"><li>○ there have been changed attitudes and a better understanding of the special needs of ABI clients</li></ul></li></ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"><li>• Initially some staff had the attitude that they already work with a difficult client group, and that taking clients with complex needs including ABI was going to make their work more difficult</li></ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"><li>• Working with other agencies – including Brain Injury Association of NSW</li></ul>

<b>4.5 KEDESH REHABILITATION SERVICES</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	Kedesh Rehabilitation Services, Berkeley NSW
<b>Title:</b>	Kedesh Practice Enhancement
<b>Target Group:</b>	Adult clients with cognitive impairment / ABI
<b>Grant Amount:</b>	\$41,200
<b>PROJECT</b>	
<b>Rationale</b>	<ul style="list-style-type: none"> <li>• Many complex needs clients were struggling to remember the content of group programs</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• To address issues relating to poor memory and retention of clients engaged in group programs</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Literature review</li> <li>• Client focus groups</li> <li>• Develop specific memory performance groups</li> <li>• Develop external aids and resources</li> <li>• Integrate use of resources into memory groups</li> </ul>
<b>OUTCOMES AND ISSUES ARISING</b>	
<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Increased awareness within the organisation of ABI and the impact on clients</li> <li>• Increased organisational knowledge, capacity and confidence to assist clients with an ABI</li> <li>• Improved engagement and retention of client group in residential D&amp;A setting</li> <li>• Development of group and external aids that can be applied to the broader D&amp;A sector</li> <li>• Increased staff confidence in supporting families as an important part of the rehabilitation process</li> <li>• Positive feedback from clients, although the program is yet to be fully evaluated (University of Wollongong currently collecting data)</li> </ul>

<b>Kedesh continued</b>	
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Milestones met in terms of the engagement of stakeholders and the development of resources</li> <li>• Transient nature of clientele and loss of clients in the focus groups</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• Integration of the program with Kedesh's other programs</li> <li>• Evaluation of the impact of the program</li> </ul>

<b>4.6 THE LYNDON COMMUNITY</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	The Lyndon Community, Orange NSW
<b>Title:</b>	Cognitive impairment initiative
<b>Target Group:</b>	Adult clients with cognitive impairment
<b>Grant Amount:</b>	\$50,000
<b>PROJECT</b>	
<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• A need to a) identify numbers of clients with a cognitive impairment using the service and b) improve staff awareness and capacity in relation to working the client group</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• Research best practice in assessment and treatment for clients with a cognitive impairment</li> <li>• Assess staff capacity and knowledge around working with client group</li> <li>• Identify numbers of clients affected by a cognitive impairment within the five Lyndon Community programs</li> <li>• Review programs and resources for suitability for client group</li> <li>• Improve staff capacity and knowledge to work with client group</li> <li>• To develop processes that would improve the engagement of client group</li> <li>• Evaluate improvements in staff knowledge and capacity</li> </ul>

**The Lyndon Community continued**

<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Conduct a literature review of best practice</li> <li>• Pre and post test staff knowledge about cognitive impairment</li> <li>• Identify and implement an appropriate assessment tool for cognitive impairment</li> <li>• Modified programs and resources to be more effective for the client group</li> <li>• Establish a complex needs 'champion' in each Lyndon program</li> </ul>
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***OUTCOMES AND ISSUES ARISING***

<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• At outset Lyndon was able to identify that staff had limited capacity to work effectively with clients with a cognitive impairment</li> <li>• As a result a new assessment tool was identified and implemented</li> <li>• Staff have better understanding of client behaviour (e.g. no longer seen as 'addictive' or difficult but due to cognitive impairment)</li> <li>• Increased staff capacity to work with the client group</li> <li>• Improved signage and communication in Lyndon programs</li> <li>• Various positive adaptations to Lyndon programs and resources</li> </ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Sustainability of the project (without ongoing resources)</li> <li>• Maintaining the momentum regarding the needs of complex needs clients (in view of other and ongoing client needs)</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• Incorporating the findings of the project into treatment options</li> </ul>

## 4.7 *NGAIMPE ABORIGINAL CORPORATION, THE GLEN*

### **PROFILE**

<b>Organisation:</b>	Ngaimpe Aboriginal Corporation (The Glen), Alcohol and Drug Rehabilitation Centre, Chittaway Bay and Rutherford, NSW
<b>Title:</b>	DVD presentation for use in gaols with Aboriginal and other clients
<b>Target Group:</b>	Aboriginal clients in contact with the criminal justice system
<b>Grant Amount:</b>	\$21,450

### **PROJECT**

<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• A need to inform Aboriginal and other prisoners, as well as offenders on probation and parole, of the services offered by The Glen, and of what to expect in rehabilitation</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• To work better with The Glen's main referral sources (gaols, parole officers, MERIT program, etc.) to help place Aboriginal clients in the most suitable rehabilitation program for them</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Planned and scripted a DVD suited to the target group</li> <li>• Engaged a production company to film and produce DVD</li> <li>• Distributed DVD to prisons and direct to probation and parole clients</li> </ul>

### **OUTCOMES AND ISSUES ARISING**

<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Clients entering The Glen from prison have a much better idea of what to expect from rehabilitation, and the differences between prison and the rehabilitation environment</li> <li>• Increased knowledge of The Glen and its programs amongst Corrective Services NSW staff, local probation and parole officers, and MERIT program staff in particular</li> <li>• Wide promotion of The Glen's key message of racial harmony. For example the DVD shows that the service is not just for Aboriginal people</li> <li>• Potential clients being receptive to the idea of rehabilitation and demonstrating more awareness of what is involved</li> </ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• No major challenges</li> <li>• The decision to protect the privacy of participants in the DVD by blocking out their faces.</li> </ul>
<b>Next Steps:</b>	<ul style="list-style-type: none"> <li>• Continuing to promote and distribute the DVD</li> </ul>

## 4.8 SALVATION ARMY YOUTH LINK

### PROFILE

<b>Organisation:</b>	Salvation Army Youth Link- FYRST (Follow-On Youth Recovery Support Team), Western Sydney
<b>Title:</b>	Piloting programs to better engage young offenders
<b>Target Group:</b>	Young people in contact with criminal justice system
<b>Grant Amount:</b>	\$20,000

### PROJECT

<b>Rationale</b>	<ul style="list-style-type: none"> <li>• Service staff wanted to pilot approaches to improve the way they work with the client group</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• To pilot two programs with young people with D&amp;A issues who are also involved with the criminal justice system</li> <li>• To train staff in the delivery of these programs</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Adapt the Positive Lifestyle Program (PLP) to make it suitable for young people</li> <li>• Train staff in delivering program</li> <li>• Collaborate with Juvenile Justice services</li> <li>• Deliver program to young people</li> </ul>

### OUTCOMES AND ISSUES ARISING

<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Opportunity to pilot a program (PLP4Youth) that would not otherwise have been possible</li> <li>• The program proved to be very engaging:             <ul style="list-style-type: none"> <li>○ It provided a safe framework for the client group</li> <li>○ The outcomes included increases in self awareness, changed behaviour and willingness to use other services</li> </ul> </li> <li>• The service now has an additional tool for working with young people involved with juvenile justice system</li> </ul>
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<b>Salvation Army continued</b>	
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Transient nature of clients</li> <li>• Some clients still using drugs and/or arriving intoxicated</li> <li>• Access to clients engaged with corrective services</li> <li>• Delays in program implementation/ staff training of the second pilot program</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• Continue to use the PLP program to engage, challenge and work with young people</li> </ul>

<b>4.9 WOMEN AND GIRLS EMERGENCY CENTRE</b>	
<b>PROFILE</b>	
<b>Organisation:</b>	Women and Girls Emergency Centre Inc, Surry Hills NSW
<b>Title:</b>	Intensive support counselling service for clients with complex needs and D&A issues / service network and partnership development
<b>Target Group:</b>	Female clients with D&A issues and cognitive impairment
<b>Grant Amount:</b>	\$22,000
<b>PROJECT</b>	
<b>Rationale:</b>	<ul style="list-style-type: none"> <li>• It was found that D&amp;A clients with complex needs (in particular, previous trauma) found it difficult to access support services or engage in treatment</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• Improved access to support services for clients with complex needs</li> <li>• Increase in effective referrals for the client group</li> <li>• Improved referral pathways and connections with mental health, drug and alcohol, dual diagnosis and disability services</li> <li>• Identify and form partnerships with mental health, drug and alcohol, dual diagnosis and disability services</li> </ul>

<b>Women and Girls Emergency Centre continued</b>	
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Engaged a Specialist Consultant to work with client group</li> <li>• Provided counselling and support referrals to client group</li> <li>• Established referral pathways</li> <li>• Assisted client group to engage with support services</li> </ul>
<b><i>OUTCOMES AND ISSUES ARISING</i></b>	
<b>Key Benefits:</b>	<ul style="list-style-type: none"> <li>• Significantly improved engagement by client group with support services and with treatment options</li> <li>• Provided 'a bridge' to clients who had found it very difficult to engage with support services</li> <li>• Increased service capacity to work with cognitive impairment/ ABI clients and those who have experienced trauma</li> </ul>
<b>Key Challenges:</b>	<ul style="list-style-type: none"> <li>• Lack of referral support services for cognitive impairment and for post release clients</li> <li>• Delay in engaging consultant</li> </ul>
<b>Opportunities &amp; Next Steps:</b>	<ul style="list-style-type: none"> <li>• To continue what proved to be a very successful project</li> </ul>

**4.10 WE HELP OURSELVES**

**PROFILE**

<b>Organisation:</b>	We Help Ourselves (WHOS), Rozelle NSW
<b>Title:</b>	WHOS Practice Enhancement Grant
<b>Target Group:</b>	Adult clients with cognitive impairment / in contact with the criminal justice system
<b>Grant Amount:</b>	\$50,000

**PROJECT**

<b>Rationale</b>	<ul style="list-style-type: none"> <li>• A need to identify service gaps for complex needs clients</li> <li>• A need to build on the existing Improved Services Initiative</li> </ul>
<b>Aims:</b>	<ul style="list-style-type: none"> <li>• Overall, WHOS aimed to respond to the needs of complex clients who have a D&amp;A issue, a cognitive impairment and/or involvement in the criminal justice system</li> <li>• Develop policy and procedures to support early identification and management of complex D&amp;A clients with cognitive impairment and/ involvement in the criminal justice system</li> <li>• Review WHOS standard client dataset, data collection processes and feedback systems</li> <li>• Conduct a training needs analysis for staff to be able to manage this complex client group and identify training options</li> <li>• Identify and establish closer relationships with specialist agencies working with this complex client group</li> <li>• Evaluate the project and disseminate findings to the D&amp;A sector via conferences and industry publications</li> </ul>
<b>Actions Taken:</b>	<ul style="list-style-type: none"> <li>• Identification and implementation of an appropriate screening tool for cognitive impairment known as Montreal Cognitive Assessment [MoCA])</li> <li>• Policy review and improvement service documentation</li> <li>• Implemented an electronic client record system</li> <li>• Training in working with clients with cognitive impairment</li> <li>• Training in care coordination</li> </ul>

WHOS continued

**OUTCOMES AND ISSUES ARISING**

<p><b>Key Benefits:</b></p>	<ul style="list-style-type: none"><li>• Improvement in treatment staff's:<ul style="list-style-type: none"><li>○ recognition of clients with complex needs and the value of early identification</li><li>○ causes, effects and strategies to work with clients with a cognitive impairment,</li><li>○ knowledge and confidence to work with complex needs clients</li><li>○ capacity to '<i>differentiate between clients</i>', and respond to '<i>difficult behaviour from a capacity perspective</i>'</li></ul></li><li>• Implementation of MoCA across organisation provides a robust, rapid assessment of clients with cognitive impairment and does not require specialist qualifications to administer</li><li>• Risk factors associated with cognitive impairment, brain injury and/or involvement in the criminal justice system incorporated into overall client planning and care</li><li>• Staff able to implement strategies of coordinated care</li><li>• Enhanced capacity to utilise client data for service research and planning</li><li>• Participation in PEP also enabled good access to:<ul style="list-style-type: none"><li>○ Quality trainers</li><li>○ Literature review of relevance to other WHOS work</li><li>○ Other contacts and training opportunities</li></ul></li></ul>
<p><b>Key Challenges:</b></p>	<ul style="list-style-type: none"><li>• Timeframes for project were very tight, and some additional time to establish and report on project could have been beneficial</li><li>• No Bars training was not able to be undertaken within the 12 months (though training for work with clients involved in the criminal justice system planned for next 12 months)</li></ul>
<p><b>Opportunities &amp; Next Steps:</b></p>	<ul style="list-style-type: none"><li>• Further research and publication relating to the service improvements implemented through this project</li></ul>

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## 5. CONCLUSION

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The independent review, conducted by EJD Consulting & Associates, concluded that the NADA PEP increased the capacity of the NGO D&A sector in NSW and the ACT to work with D&A clients with complex needs in a number of practical and measurable ways. In addition, the review found the Program had significantly strengthened the linkages and collaborations between D&A services and key individuals and organisations experienced in supporting these clients.

Commencing in mid 2010 and concluding in mid 2012 NADA systematically planned and successfully implemented a broad range of initiatives consistent with the four PEP objectives. It also implemented each of the agreed deliverables specified in the two year project plan negotiated with the NSW Ministry of Health.

In respect to Objective 1 - *identify the service practice development needs and barriers of D&A NGO services in relation to responding to clients with complex needs* - NADA undertook a range of consultation and planning initiatives including:

- hosting two workshops with a broad cross-sector of stakeholders expert in different aspects of complex needs including in particular in the fields of cognitive impairment, intellectual disability, ABI, FASD and criminal justice issues;
- in other ways consulting and forging relationships with various partners including relevant NGOs and key researchers and academics working in their field;
- conducting a literature review and consultations with the sector resulting in major report. This research confirmed various challenges experienced by D&A NGO staff including:
  - difficulties in recognising and identifying the existence of complex needs
  - challenges in appropriately engaging clients with complex needs in treatment programs especially given:
    - complexity of the conditions and how they impact on an individual capacity to engage in mainstream treatment options

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- significant variations between clients, even within the same condition such as cognitive impairment
  - additional time needed to work with clients especially given the compounding issues of social exclusion and economic disadvantage experienced by clients including barriers to accessing other required services and support.

The review concluded that the combination of these activities provided a robust evidence base for NADA's approach to the content and implementation of the core Program deliverables as noted below.

In respect to Object 2 - *implement projects and activities to build the capacity of the NGO D&A sector to respond to D&A clients with complex needs* - NADA successfully implemented a range of deliverables to cater for different sector needs. Key amongst these were:

- Facilitation or delivery of quality training on different aspects of working with clients with complex needs. These comprised:
  - NADA hosting a total of ten practice enhancement sessions, covering four different complex needs topics. These events were free to all NADA members. A total of 246 individuals attended these events, the vast majority staff working in NGO D&A organisations across NSW and ACT.
  - NADA funding D&A NGOs to host their own in-house training sessions. A total of 15 sessions were funded allowing 152 NGO staff to be trained in situ in one of four topic areas - ABI, FASD, triple co-morbidity (involving D&A, mental health and ABI), or working with clients with PSD.
- Funding ten substantial seeding grant projects based in ten different D&A organisations across NSW and ACT. Each project, implemented over a 12 month period, was designed to enhance the services' approach to engaging with clients with a particular type of complex need (*see Objective 4 below for a discussion of outcomes*);
- Hosting three major PEP forums, with a combined total of over 130 individuals. Each forum provided D&A staff with access to expert external speakers. They

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also included opportunities for D&A service staff to discuss their approaches and challenges in terms of working with clients with complex needs;

- Researching and disseminating key contact information and resources directly relevant to the NGO D&A sector including via a substantial enhancement to the NADA website and via regular e-bulletins;
- Compiling and promoting at least seven new resources related to PEP including:
  - *Training Options Handbook*;
  - *Networking for Court Support Resource Pack*; plus the
  - forthcoming *Complex Needs Capable Resource* - what is considered the most substantial printed legacy from the Program.

In respect to Objective 3 - *evaluate the outcome of capacity building projects and related activities to inform ongoing workforce, organisational development and provision of treatment* - the review found a systematic approach had been used against each Program component. This was made possible by NADA's decision to design and implement a comprehensive Program evaluation framework from the outset. This involved the establishment of a set of results-based measures that were then used for all Program feedback instruments (including end of training session evaluations, forum feedback sheets, plus seeding grant reporting templates).

Not only did this quality driven approach provide NADA with ongoing data to enable the Program to be continuously improved, but it also generated a broad range of meaningful data that informed the full Program review.

As a consequence the review concluded that PEP had very positive impacts on Program participants on each key measure. For example, 75% or over of all Program participant feedback (including participants in PEP training, PEP forum and PEP seeding grant projects) reported improvements in their:

- awareness of the needs of clients with complex needs;
- knowledge of options to improve outcomes for clients with complex needs;
- confidence to work with clients with complex needs;

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- knowledge about where further information on working with client with complex needs is available;
  - overall capacity to work with clients with complex needs.

These combined results indicate a highly effective Program that produced measurable change in staffs' capacity to work with clients with complex needs. The diverse approach adopted clearly provides an excellent model for undertaking future practice enhancement initiatives for the D&A NGO sector.

As the wording of Objective 4 suggests - *improving the engagement of D&A NGOs with complex needs clients and improving treatment outcomes for this population where service practice grants are provided* - the grants were the prime vehicle for how NADA approached this commitment. In each instance the seeding grants led to measurable enhancements to service practice including via initiatives such as:

- identifying and using effective assessment tools, for example in respect to cognitive impairment;
- modifying program design or program components to improve client engagement;
- delivering training and education to staff about complex needs issues and appropriate engagement strategies;
- establishing new inclusion options for clients that may once have been excluded from services or lacked accessible pathways into D&A treatment
- building partnerships with specialist support services and justice agencies.

Within a relatively short timeframe, the review concluded that each grant had been practical in focus, effective in terms of its agreed deliverables, and client outcome orientated. Further, they concluded that NADA's grant design, administration and reporting processes were well designed and provide a practical and effective model for how other service-driven practice enhancement initiatives could be implemented in the future.

Overall, the review found that NADA was very efficient and effective in its management and oversight of the Program, noting some flexibility in their approach

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and a preparedness to reallocate resources based on stakeholder feedback or circumstances. In all instances, key stakeholders, including member organisations and funding body representatives, were kept informed of PEP developments via regular e-bulletins, NADA website updates and through Program Reports.

The reviewers identified three critical success factors that had underpinned NADA's significant accomplishments through PEP:

1. NADA's experience in quality project management
2. NADA's proactive engagement and consultation with key organisations and groups with expertise in clients with complex needs
3. NADA's adoption of a multi-pronged approach to implementing PEP, incorporating individual, organisational as well as sector-wide initiatives.

By providing a range of deliverables - involving sector research and consultations, a range of training opportunities, funding for service-driven pilot projects, plus resource development and distribution - NADA successfully fulfilled all Program objectives, and achieved all Program deliverables. This resulted in significant improvements in the sector's capacity to work with clients with complex needs as per the Program aim.

There is clear scope to build on the achievements of PEP, especially given the growing prevalence of clients with complex needs and the strong interest of the D&A sector to further develop their practice in terms of client engagement. To this end the reviewers recommend that additional resources be devoted to practice enhancement in the sector and that NADA be supported to:

1. Provide ongoing opportunities for staff training in complex needs issues
2. Facilitate access to additional resources, tools and research relevant to the D&A NGO sector in NSW
3. Support projects designed to improve service practice, policies and procedures within individual services (preferably via additional seeding grant programs)
4. Strengthen partnerships and networking opportunities between the D&A NGO sector and other service sectors and experts involved with clients with complex needs

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5. Advocate for service system reforms to better address the growing number of clients that span more than one service system, to foster more inclusive practice by all providers, and to create a network of enhanced service providers highly skilled and responsive to the needs of different types of clients with complex needs.

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## ABBREVIATIONS

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ABI	Acquired Brain Injury
CALD	Culturally and Linguistically Diverse Backgrounds
CNC	<i>Complex Need Capable</i> resource
D&A	Drug and alcohol
FACS	NSW Department of Family and Community Services
FAS	Fetal Alcohol Syndrome
FASD	Fetal Alcohol Spectrum Disorder
IHMRI	Illawarra Health and Medical Research Institute, University of Wollongong
MHDAO	Mental Health, Drug and Alcohol Office, NSW Ministry of Health (formerly NSW Health)
NADA	Network of Alcohol and Drug Agencies
NESB	Non-English Speaking Background
NGO	Non government Organisation
PEP	Practice Enhancement Program
P&P	Probation and parole
PSD	Personality Spectrum Disorder

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## **ATTACHMENT 1: KEY EVALUATION MEASURES**

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The PEP Evaluation Framework adopted in 2010 listed a number of key measures that would be used to inform the final Program evaluation.

In respect to the change in NADA and/or its member organisations, the measures include the degree to which they had successfully:

- identified needs and barriers in respect to NGO D&A services working with clients with complex needs
- identified, documented and promoted good practice in working with D&A clients with complex needs
- delivered, or facilitated the delivery of, quality training in respect to D&A clients with complex needs
- delivered, or facilitated access to, quality resources in respect to D&A clients with complex needs
- forged relationships or partnerships between the NSW D&A sector and organisations or individuals with special interest or expertise in clients with complex needs.

The evaluation also assessed results-based changes to organisations and individual staff that were the direct beneficiaries of PEP grant funding, or in other ways participated in PEP activities. These assessments specifically focus on assessing changes or improvements in:

- awareness and understanding of the needs of D&A clients with complex needs
- knowledge of options that might assist in:
  - engagement of clients with complex needs
  - delivering improved outcomes for clients with complex need
- capacity to work with clients with complex needs
- confidence to work with clients with complex needs.

In the case of PEP Seeding Grants, the evaluation sought feedback on the degree to which the Program resulted in:

- improved internal systems (policies, procedures or organisational practices) to:
  - better assess clients with complex needs
  - better work with or treat clients with complex needs

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- improved pathways or referral protocols with other providers or organisations with links to or expertise in clients with complex needs
  - improved relationships or partnerships with other providers with an expertise in clients with complex needs
  - increased numbers\* of clients being appropriately assessed with complex needs
  - increased numbers\* of clients being appropriately treated with complex needs
  - overall improved outcomes for clients with complex needs.<sup>21</sup>

All these measures have been used to structure this final evaluation report.

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<sup>21</sup> *In some cases, these may be based on reported or perceived increases rather than actual numbers due to the short timeframes with respect to measuring change.*

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**ATTACHMENT 2:      STAKEHOLDERS INTERVIEWED**

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<b>Grant Recipients</b>	
Julaine Allan	Research Fellow, The Lyndon Community
Dawn Bainbridge	Manager, Community Programs, Karralika
Vince Coyte	Coordinator, The Glen
Fiona Craig	Service Director, Kedesh Rehabilitation Services
Jo Lunn	Project Officer, We Help Ourselves (WHOS)
Liz Pearce	Consultant, Kamira
Helen Sowe	Senior Project Officer, Drug and Alcohol Multicultural Education Centre
Jocelyn Sullivan	Project Officer, Freeman House
Helen Williams	Service Manager, Women and Girls Emergency Centre
Kylie Willis	Project Officer, FYRST Salvation Army Youth Link
<b>Other Stakeholders</b>	
Dr Eileen Baldry	Professor, School of Social Sciences and International Studies University of NSW
Heidi Becker	Program Manager NADA
Jamie Berry	Director Advanced Neuropsychological Treatment Services
Ciara Donaghy	Project Officer NADA
Alex Farraguna	Manager, Criminal Justice Support Network Intellectual Disability Rights Service

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Ian Flaherty	Consultant Community Sector Consulting
Carol Hannaford	A/ Senior Project Officer, Office of Senior Practitioner ADHC, Department of Family and Community Services
Sue Henry-Edwards	Principal Advisor, Offender Services and Programs Corrective Services NSW
Sue Miers	Director, The National Organisation for Fetal Alcohol Syndrome and Related Disorders (NOFASRD)
Yvette Proud	Manager, Participation NSW Council for Intellectual Disability
Anne Russell	Director, Russell Family Fetal Alcohol Disorder Association (RFFADA)
Sandra Sunjic	Manager, Strategic Planning, Drug and Alcohol Justice Health
Graham Swift	Senior Project Officer MHDAO, NSW Ministry of Health
Beverly Taylor	Manager, Training and Development Brain Injury Association of NSW

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