1. The NSW Ministry of Health Strategic Prioritisation Framework for Alcohol and Other Drugs Research and Evaluation: 2020-2024

The Framework was published in December 2020 and is accessible via the NSW Health website. All five working groups have commenced the process of identifying, prioritising and progressing research and evaluation activities aligned to identified evidence gaps. Subsequent research activities will generate translatable policy insights to improve the health and wellbeing of people at risk of or experiencing harms from alcohol and other drug use.

i. Priority Area: Evaluating Current Models of Care and Health System Access and Patient Journey

The Evaluating Current Models of Care and Health System Access and Patient Journey Working Groups were merged in June 2021. To date, the working groups have approved the following activities for progression:

- **The Case Mix Variables Project**: This project will be led by A/Professor Peter Kelly and Briony Larance from the University of Wollongong and has the objective of identifying the health and social case mix variables of people who seek AOD treatment across public health and NGO services. The project includes:
  1) A **literature review** of patient complexity models and existing variables identified in the literature and current clinical tools;
  2) A **survey of clinicians** across LHDs and NGOs to audit the identified variables and identify any additional factors; and
  3) **Individual interviews** with consumers and other stakeholders.

This project is due for completion by the end of October 2021 and generates foundational evidence for informing future service evaluations, such as evaluation of the Assertive Community Management (ACM) Program.

- **Evaluating the ACM program**: The ACM program delivers intensive case management support through selected LHD’s and St Vincent’s Health Network for people who experience severe substance dependence and other complex needs. Current gaps in evidence exist relating to the real cost of providing resource intensive programs that are not reflected in the context of Activity Based Funding.

  The evaluation will include an outcome and economic analysis with the objective of **creating a broader system-wide approach for evaluating and demonstrating the value of AOD treatment services**.

- **Retention in treatment: custody to community**: The focus will include identifying best practice models to support retention in treatment for people transitioning from community to custodial settings. The CAOD have considered how support can be provided to the current Translation Research Grant Scheme (TRGS) project awarded to Professor Adrian Dunlop, Hunter New England Local Health District, which focuses on barriers to retention in treatment (Depot Buprenorphine) for people exiting custodial settings.
The CAOD have met with Corrective Services NSW (Department of Communities and Justice) and will support the development of various projects aligned with enhancing pre-release activities.

- Evaluation of NUAA’s Take Home Naloxone: Virtual plus postal model. The evaluation will determine whether clients receive the same quality of education intervention when delivered virtually, as compared to face-to-face interventions and any unique needs or opportunities associated with this model. The working group will provide input and advice into the development of the evaluation framework.

- The University of Sydney (Edith Collins Centre and Sydney Local Health District) have finalised the research plan, utilising the AoDOR public health data set to generate answers to questions raised by the Health System Access and Patient Journey priority. The analysis will focus on:
  - characterising specialist AOD treatment service access and service use patterns;
  - determining the prevalence of cooccurring conditions and impacts on service engagement; and
  - mapping these variables to service utilisation of emergency department settings.

The final report is due to the CAOD by December 2021.

Other areas that are currently being considered by this working group for potential evaluations include:

- Substance Use In Pregnancy and Parenting Services;
- AOD Hospital Consultation Liaison Services; and
- Determinants of successful translation of clinical guidelines into practice.

Funding has recently been secured by MoH, University of Sydney, Pharmacy Guild of Australia (PGA) and Pharmaceutical Society of Australia (PSA) for the following pilot project and evaluation, aligned to the Evaluating Current Models of Care priority:

- Pharmacist-administered depot buprenorphine in community pharmacy: Pilot Project: Funding has been secured from the Pharmacy Research Trust of NSW for a pilot project involving the NSW Ministry of Health, University of Sydney, University of Newcastle, community pharmacists, general practitioners, addiction specialists, the PSA and the PGA. This pilot project aims to establish a model of care that utilises community pharmacists in the administration of depot buprenorphine, with considerations to access, quality and safety, affordability and sustainability. The project will commence in July 2021 for a 12-month period, with the evaluation due in June 2022.

ii. **Priority Area: Improving AOD Services for Priority Populations**

The working group have prioritised three focus areas, including:

- **Trauma informed Care;** and
- **appropriateness and acceptability** of mainstream services for priority populations; and
- **Integrated care** models for priority populations.

Potential research and evaluation activities are currently being considered, including:

- Trauma Informed Care: a collaborative system mapping exercise to determine:
  - What is the definition of trauma informed care for the AOD context;
  - What best practice actions reflect the principles of trauma informed care, as identified in the draft NSW Ministry of Health Trauma Informed Care Framework.

The CAOD are engaging with the Prevention and Response to Violence, Abuse and Neglect (PARVAN) team to determine evidence gaps and policy alignments.

- **Evaluating a Cultural Inclusiveness Audit Tool:** Ministry funding has been provided to NADA to support the evaluation of a cultural inclusiveness audit tool that has the objective of improving organisation cultural inclusiveness and service acceptability for Culturally and Linguistically Diverse Communities.
The tool will be developed and implemented in partnership between the Drug and Alcohol Multicultural Education Centre (DAMEC) and NADA and trialled in four sites. The tool will be applicable for services across the public health and NGO service sector.

The final report is due in June 2022.

iii. Priority Area: AOD-related Mortality

The working group has decided to focus on the impact of AOD treatment on patient mortality. This will consider:
- What type of AOD treatment has the biggest impact on mortality?
- Does time in treatment impact mortality?
- Does intensity of treatment impact mortality?
- What impact do transition points in treatment have on mortality (entering, leaving or changing treatment)?

The University of New South Wales (NDARC and The Centre for Big Data) have finalised the research plan, utilising the AoDOR public health data set to answer the above questions. Data has been provided to researchers as of June 2021. Researchers will be attending the next meeting of the working group in July 2021.

The draft report of this work is due to the CAOD by October 2021. The final report is due by December 2021.

iv. Priority Area: Prevention and Early Intervention

Two meetings of the working group have occurred to date and the process of prioritisation has commenced. Members agree the focus will include:
- people at risk of health harms and dependence; and
- co-design of interventions and understanding data for the purpose of reducing harm and determining effectiveness of programs.

2. The Business and Funding Model (BAFM) Study

The BAFM study is a collaborative project between the NSW Ministry of Health and NADA that seeks to better understand the cost of delivering AOD treatment services provided by NGOs. BAFM is being led by the Centre for International Economics (CIE). Following a review of publicly available cost information (e.g. annual reports), preliminary analysis of MDS data, and several initial consultations with AOD service providers, the CIE conducted a sector-wide business model and costing survey.

Since the last update, the CIE have consulted extensively with the NGO AOD sector, to help inform the econometric analysis and to provide the sector with opportunities for input into the development of potential business and funding models. These consultations included:

i. A CIE-led roundtable discussion with a small group of NGOs, to gain early feedback on the practicality, appropriateness, and suitability of the draft model(s) (20 April 2021);

ii. A sector-wide webinar to discuss preliminary findings (30 April 2021);

iii. A NADA led sector-only workshop (12 May 2021); and

iv. An Aboriginal specialist provider workshop to provide an opportunity for Aboriginal service providers to discuss and reflect on the draft model(s) (21 May 2021).

A draft of the Final Report for the BAFM study was submitted to the Ministry in June, and initial feedback from the BAFM Steering Group is currently being incorporated by the CIE. Once a revised report is approved by the Steering Group later this month, a plan for socialising the report within the Ministry and NGO AOD sector will be developed.
3. Alcohol and Other Drugs Outcomes Register (AoDOR)

This Public Health Register data asset has been amended as of March 2021 to increase the size of the patient cohort. It is in the process of being refreshed and will include data up to June 2020. A Data Asset Working Group has been established to advise the development and promote use of AoDOR.

An amendment submitted to the Aboriginal Health & Medical Research Council in June 2021 to include AoDOR on an umbrella ethics approval (935/13) for use of information relating to Aboriginal people within public health registers has been approved.

Data from AoDOR version 1 has been released to the University of New South Wales (NDARC and The Centre for Big Data) for the purposes of the co-creating evidence project on AoD-related mortality. Data has also been released to the University of Sydney (Edith Collins Centre and Sydney Local Health District) for the purposes of the co-creating evidence project on Health System Access and Patient Journey.

4. Alcohol and Other Drug Early Intervention & Innovation Fund (EIIF)

The Early Intervention and Innovation Fund (EIIF) is part of the NSW Drug Package. The fund consists of the Innovation Grants Scheme and the Evaluation Grants Scheme. Twelve of the 14 projects funded through the EIIF grant program have now been completed, with the remainder due for completion by August 2021. Research findings are being disseminated through an EIIF webinar series being hosted by NSW Health in partnership with NADA. See https://nada.org.au/events/ for more details.

NGO Service Development Grants

In February 2020, NADA were funded through the EIIF to administer and conduct the procurement process for Round 2 of the Service Development Grants (SDG) program. The aim of the program is to support NGOs in delivering AOD treatment by improving the access, orientation to and safety while in AOD treatment, and; improving access and equity regarding a specific target population. Following a competitive application and selection process, NADA awarded Service Development Grants to nine organisations. The final report on the outcomes of these projects was submitted to the Ministry in July 2021. The projects and outcomes will be featured in a webinar series hosted by NADA and the Ministry in the coming months.

The Research Capacity project

A secondary component of the SDG program (Round 2) was to assess the AOD sector’s research capacity. The Research Capacity project is a partnership between NADA, the NSW Drug and Alcohol Clinical Research and Improvement Network (DACRIN) and the Ministry. The Research Capacity and Culture (RCC) tool developed by Holden et al (2012)1 and validated with allied health workers, has been used to assess the research capacity of the NSW AOD sector. Conducting this survey with both public and NGO service providers will provide a baseline of research capacity in the sector to assess the utility of current activities, inform the development of capacity building initiatives, and provide a solid platform for a pre-post evaluation of those initiatives. Data collection is now complete, and analysis is underway. Final reporting on the outcomes is now due to the Ministry in August 2021.

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1 Holden L, Pager S, Golenko X, Ware R S. (2011) Validation of the research capacity and culture (RCC) tool: measuring RCC at individual, team and organisation levels. Australian Journal of Primary Health 18, 62-67. doi.org/10.1071/PY10081