

Standard 1: Transfer of care

An effective and meaningful *transfer of care* or *discharge plan* is co-designed with the client, a process which can be enhanced if able to be facilitated by a peer worker. A collaborative approach invites ownership and places the person at the centre of their plan, while acknowledging the significance of family, chosen family, culture and community.

While the therapeutic principles remain the same, different service settings will influence how this will look in practice.

Engage in the process early

- Starting the conversation early in your contact with clients, ensures there are clear expectations, and plans (however simple) in place to support clients when exiting a service, whether this is planned or unplanned. The plan can be expanded over the course of the contact with the client.
- Include a question at first contact or during the assessment which opens a conversation about what they want to happen if they choose to exit early or not to return. This question is an acknowledgement of the courage and effort it takes to engage in AOD treatment and relays the message that disengagement is a choice.
- Provide a welcome pack on arrival to the service which may include a card with phone-lines, harm minimisation services such as needle and syringe programs and key community contacts and supports.
- A culturally responsive, trauma-informed approach shapes therapeutic relationships that are honest and transparent, with personal choice and safety as priorities, and considers the protective factors of connection and culture.

Keep it simple

- Transfer of care plans can be simple and may just focus on a safety plan.
- Use language that is strength-based and avoids sector abbreviations and medicalised terms.
- Provide a minimum of one emergency and after-hours contact.
- For clients working with other services, aim for consistency and overlap if there is more than one plan.
- Plans need to be realistic, achievable and reflect the client's capacity; the client knows best.
- Ensure conversations occur about tolerance and the risk of overdose.

Be creative

- For clients that are tentative about contact with other services, explore additional supports that may sit outside of health and AOD treatment services such as interests and activities.
- Where time permits, a supported visit to a service you are referring to, and a meet and greet (in person or online) is often appreciated and builds cross-sector relationships.
- Sustainable plans are holistic and invite consideration of activities that provide fulfilment and may offer social, cultural, faith and community connection.
- Ensure cultural needs are communicated.

- Explore the client's experience of what has worked in treatment and what hasn't and include this in the summary documentation. For example, a client with anxiety may prefer on-line or one-to-one support and may not be comfortable in a group setting.
- Acknowledge that transitions can be hard, change unsettling and finding services that meet our needs can feel like an experiment.

Safety and choice

- Whenever raising the end of treatment, ensure that this is framed in conversations about choice and safety.
- Create simple safety plans that focus on reducing risks if substances are used or mental health is impacted.
- Include emergency accommodation options.
- Undertake Naloxone training as a service and consider providing this training to clients. If this is not possible, the service may include this information as part of your welcome pack.
- Regularly review your service's welcome and exit packs with clients and consumer engagement consultants to ensure that the information is current and reflects the changing needs of the people that attend our services.

Resources

- **Counselling Online** is a free and confidential service provided by Turning Point, which provides 24/7 counselling, information, and support to people across Australia affected by their own or someone else's alcohol or drug use. <https://www.counsellingonline.org.au/find-support/chat-to-a-counsellor> or connect with others through the Online Community Support Forum.
- **Multicultural Health Connect 1800 186 815** 9am – 4:30pm Monday to Friday
Provides people from multicultural backgrounds, health advice and guidance where to access services, in their own language.
- **NSW Refugee Health Service 02 9794 0770**
Service provides advice and guidance to support the health of people from a refugee background living in NSW and the health professionals who work with them.
- **Gambling Help Online 1800 858 858**
24/7 telephone and online counselling, information, and support for people with gambling and gambling related problems.
- **13YARN 13 92 76**
13 YARN provides crisis support 24/7 in a confidential, culturally safe space to yarn about your needs, worries or concerns with Aboriginal support workers.
- **Legal Aid NSW** provides legal information to anyone with a legal problem in NSW through our legal information and referral service, **Law Access NSW 1300 888 529** and the **Youth Hotline 1800 101 810**.
- **ADIS (Alcohol & Drug Information Service)**
The Alcohol & Drug Information Service (ADIS) is a 24/7 free and confidential counselling helpline for those in NSW with concerns around alcohol or drug misuse. 24 hours a day, 7 days a week via phone or online (Web Chat).