

Drug & Alcohol capacity building program for primary care providers

Arrange

D&A (& comorbid MH) screening



Professor Amanda Baker
Clinical Psychologist &
Academic (UON)



Conjoint Professor Adrian Dunlop
Area Director, Drug & Alcohol
Clinical Services, HNE Health



Dr Kristen McCarter
Research Coordinator &
Clinical Psychologist (UoN)



Dr Kylie Bailey
Clinical Manager,
D & A Counselling Services,
Hunter Primary Care




Phillip Carr
Service Manager, Clinical
Services, Hunter Primary Care





**Conjoint Associate Professor
Richard Clancy**
Mental Health Nursing
Research Fellow (UoN)





Dr Agatha Conrad
Research Manager, Hunter
New England Mental
Health Services


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Drug & Alcohol capacity building program for primary care providers

Talking:

Drug & Alcohol capacity building programme

for primary care providers

Zoom Group Chat

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Re-cap: ASK - 6th Feb 2018

Ask

- Substance use is common in GP setting
- How to approach patients: SNAP, other drugs

'As part of my routine review of all my patients, I always ask about lifestyle factors, including things like exercise, diet, stress, alcohol and other drugs. Is it ok if I ask you about these?'

- What, how often, how much, how?
- Substance use disorder: harmful use or dependence?
- Co-morbidities
- (screening tools e.g. AUDIT – alcohol)

Re-cap: ADVISE - 13th March 2018

Advise

- Brief interventions: effective
- Motivational Interviewing
 - Ambivalence
- Nursing role in drug and alcohol, SNAP
- Patient's motivation to change
- Goals setting



Re-cap: ASSIST - 10th April 2018

- Brief interventions are effective
- Motivational Interviewing, Cognitive Behaviour Therapy
- Combination of pharmacotherapy and counselling effective
- Monitor mental health symptoms and smoking, alcohol and other drug use; adverse side effects of psychotropic medication
- Maintain optimism, reinforce small changes and each change attempt

Arrange

- Adrian Dunlop (Area Director, D&A Clinical Services, HNE Health)
 - **HNE D&A Services**
- Kylie Bailey (Clinical Manager, D & A Counselling Services) & Phil Carr (Service Manager, Clinical Services) Hunter Primary Care D&A Services
 - **HPC D&A Counselling Services**
- Richard Clancy (Mental Health Nursing Research Fellow) and Agatha Conrad (Research Manager, HNE Mental Health Services)
 - **Mental Health Line**
 - **Psychiatric Emergency Care Centre**
 - **Mental Health & Substance Use Service (MHSUS)**

HNE Drug & Alcohol Clinical Services

- HNE Health Intake
 - 1300 660 059
 - Mon – Fri 8:30-4pm
- Phone intake
- Assessment organised for most appropriate service
 - Counselling, methadone/buprenorphine, withdrawal
 - Specialist clinics (e.g. drugs in pregnancy, pain and addiction)
- Calvary Mater
 - 40144796
 - Alcohol and Drug outpatients
 - Inpatient referrals possible

<https://hne.healthpathways.org.au/index.htm>

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*** Statewide Services**

*** Armidale / Tamworth / New England / North West**

*** Lower Hunter / Maitland / Cessnock / Dungog**

*** Manning / Great Lakes / Taree**

*** Newcastle / Lake Macquarie / Port Stephens**

*** Private and NGO Services**

*** Public**

Hunter New England Drug and Alcohol Clinical Services

About Hunter New England [Drug and Alcohol Clinical Services](#). For more specific information see [Newcastle, Lake Macquarie](#) service listing.

1. Check [criteria](#).
2. Prepare the required [referral information](#) and include known [risk factors](#).
3. To refer contact the [Drug and Alcohol Triage and Referral Service \(DATARS\)](#) by:
 - phoning **1300-660-059**, Monday to Friday, 8.30 am to 4.00 pm (general practitioners can leave contact details and request a call back)
 - faxing a referral letter to **(02) 4016-4661**.

Alcohol and Drug Clinical Services at the Calvary Mater Newcastle

About the [Alcohol and Drug Clinical Services at the Calvary Mater Newcastle](#).

1. Check [criteria](#).
2. Referrals accepted from:
 - general practitioners.
 - other clinicians.
 - patients.
3. To refer, fax referral to **(02) 4014-4847**.
4. For enquiries phone:
 - Monday to Friday, 8.00 am to 4.30 pm: **(02) 4014-4796**.
 - Limited after hours: **(02) 4921-1211** ask for the [Alcohol and Drug Nurse](#).
5. Give [patient information](#).

*** Upper Hunter**

Drug and Alcohol Specialist Advisory Service

- Phone support for professionals 24/7/365
 - Phone support (only) – speak to an addiction medicine specialist
- **Regional and rural NSW** 1800 023 687
- **Sydney Metropolitan** (02) 9361 8006
- Patient line ADIS (Alcohol & Drug Information Service) 24/7/65
 - Regional and rural NSW 1800 422 599
 - Sydney Metropolitan (02) 9361 8000

HPC D&A Counselling Services

- HNECCPHN funding for D&A treatment. Two aims:-
 - Increase D&A service delivery in the primary care sector through improved regional coordination and targeting areas of need
 - Improve the effectiveness of D&A treatment by improving integration of care across sectors
- Services are designed to address gaps not replicate existing services
- Services are focused on people in the early stages of substance misuse problems who are experiencing mild to moderate misuse issues
- Services are delivered in a 'stepped' care framework, ranging from low intensity services to higher intensity face-to-face services
- Integration of care - people requiring more specialised or tertiary services are linked in with appropriate other services in the sector
- Funded areas include Newcastle, Lake Macquarie, Maitland, Port Stephens, and Singleton LGAs

HPC D&A Counselling Services: What is offered?

Broad range of services provided to people aged 16 years and over, in a stepped care approach ranging from:

MindReach: AOD (Low Intensity)

- telephone-supported CBT workbooks delivered over the phone.
- Support to access validated web-based interventions and Apps

Counselling (Moderate Intensity)

- Psychological interventions: delivered either face-to-face or by telephone

Aftercare (Relapse Prevention)

- 1-2 aftercare appointments (usually accepted as telephone appointments)

Care Coordination

- Linking people into the most appropriate services

HPC D&A Counselling Services: How to refer

Referral pathways include:-

- GP comprehensive referral letter
- Patients can self-refer

Referrals are triaged each day by experienced clinicians. If patients require more complex care HPC will refer onto the most appropriate D&A services in the sector.

All referrals can be sent to **Fax: 4929 7072** or referrers/patients can contact HPC on **4926 0529** for more information

More details on D&A services can be found at www.hunterprimarycare.com.au

Mental Health Line – Referral process

- Phone: 1800 011 511 Fax: 02 67678739
- The mental health line is for the whole Hunter New England Local health District
- From 1 January to 31 March 2018 the MHL has received
- 7158 incoming telephone calls – 2386 telephone calls per month
- 2578 faxes – 860 faxes per month

Referral criteria

- People with severe mental illness and outline the level of urgency that's appropriate
- Might be at risk to themselves or others (details hx, means, time, date, plan, any supports)
- Need specialist mental health care –ie., clarification of diagnosis or medication review – the referral should include the name of the psychiatrist - MHL can forward the request efficiently
- Other referrals can be direct to other MHS services eg CFP, neuropsychiatry, MHSUS etc..

MHL response

- Urgency of response
- High risk - 48 hours – MHL attempt to contact the person by phone for triage, txt 1800 – for client to ring back
- ---Triage – at risk , safety plan prior to referral to Community mental health Team – CMHS – 48hr follow up, communicates with referrer
- ---Triage – no MH service required, other services might be required – letter back to referrer with recommendations
- Can't contact person at risk – review information, maybe contact referrer for clarification or more information, or family members, refer to CMH for follow up
- 14 days – no risk, private referrals for psychiatrists – eg clarification of diagnosis, CFP, neuropsychiatry etc...

Psychiatric Emergency Care Centre (PECC)

Urgent Assessment

- **Location:** Mater campus, Waratah (*Via Calvary Mater ED*)
- **Referrals** 1800-011-511
- Schedule 1 (*if... least restrictive option*) may involve police and/or paramedics, considering persons rights and clinical/safety needs.

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HealthPathways

Required referral information

+ Standard referral information plus:

- Current mental health issue
- Current treatment
- Past treatment where relevant
- Current risk status
- Social supports and contact details

Mental Health & Substance Use Service (**MHSUS**)

Outpatient Group Programs

- **Location:** Mater campus, Waratah (*McAuley Centre*)
- **Referrals** 4033 5600
- **Hours** 8am – 4.30pm (**No crisis response**)
- **Waiting times:** Assessment 2-4 weeks
Commencement 2-4 weeks after assessment

Programs:

2 week program (educational/lifestyle)

Weekly * Moving On

* Double Trouble

* Sobriety Maintenance

* Antabuse

Other Services

NSW Quitline **13 7848 (13 QUIT)**

* Online referral

- <https://www.icanquit.com.au/quitting-methods/professional-support-and-advice/quitline/quitline-referral>



Get Healthy (free telephone-based health coaching)

- <https://www.gethealthynsw.com.au/health-professionals/how-to-refer/>



Previous webinars

<http://www.hneccphn.com.au/programs-resources/drug-and-alcohol-treatment-services/>