

Spotlight on the NSW Drug Treatment Services Plan

WHAT IS THE PLAN?

The *Drug Treatment Services Plan* is a part of the NSW Government's Plan of Action to implement the recommendations of the Drug Summit held in 1999.

The *NSW Drug Treatment Services Plan* maps out exactly what drug and alcohol treatment services will be priorities for NSW communities over the next four years.

The Plan is supported by a major commitment of additional funding and ensures all Area Health Services will receive additional resources to expand current drug and alcohol services and programs.

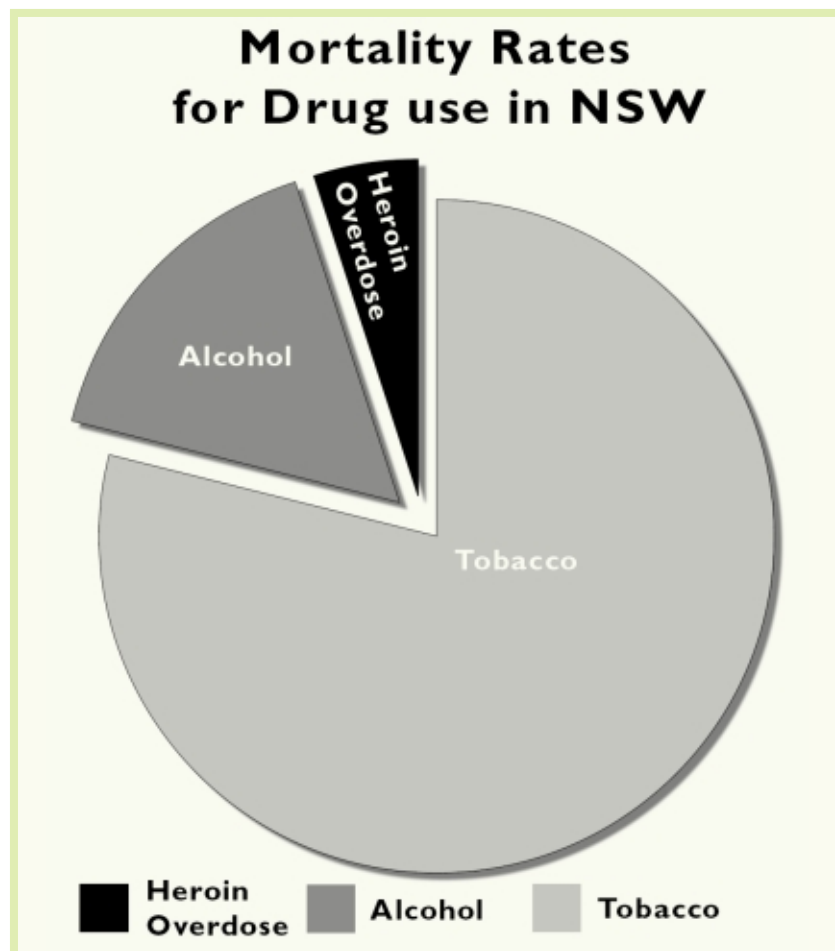
The NSW Drug Treatment Services Plan will ensure that NSW has a better system with better access for people affected by harmful drug use.

WHAT IS THE ISSUE?

A number of factors contribute to our growing drug and alcohol problem, not only in NSW but throughout Australia. The 1998 National Drug Strategy Household Survey found there was evidence of using heroin at an earlier age, a shift from swallowing to injecting drugs and a growing trend toward mixing drugs (polydrug use).

The Survey also found that between 1995 and 1998 there were significant increases in legal (over the counter and prescription drugs) and illegal drug use. Lifetime use of cannabis increased from 31.1% to 39.3%, amphetamine (or speed) use increased from 5.8% to 8.7% and the number of people who injected illegal drugs almost doubled - from 1.3% to 2.1%.

In the 1998/99 financial year the NSW Government spent more than \$70 million on drug and alcohol programs. In July 1999 the Premier announced an additional \$93 million over four years will be spent on new drug treatment services.



Drug Programs Bureau, NSW Health Department 2000

AREAS OF ACTIVITY

The Plan's main areas of activity over the next four years will be:

Starting Treatment

We are improving this. Every Area Health Service across the State will have access to designated phone lines where community members can discuss over the phone the nature of their drug and alcohol problem with a health professional. Once the correct treatment approach has been determined by the caller and the health worker, an appointment will be made for that treatment to commence.

Detoxification

Detoxification is often considered the first building block in leading people towards a life without being dependent on drugs. It can be done in a detoxification centre or at home. In the past most drug users have sought detoxification through attending detoxification centres. This is not always necessary. The majority of heroin dependent people can receive detoxification by visiting a health clinic with appropriate medical support. The Government is establishing three new specialist inpatient detoxification centres in Greater Western Sydney, on the Central Coast and at Lismore. Community based hospitals in rural areas will also be providing inpatient detoxification for those who need it.

An additional development in detoxification of drug dependent people will be the widespread introduction of home and health clinic detoxification. This will enable people to be detoxed at home with the support of their families. New teams to provide this service are being set up in Cabramatta, Marrickville, the Far West, Queanbeyan, Wagga and Albury. This will make detoxification more accessible and will enable families to be part of the treatment.

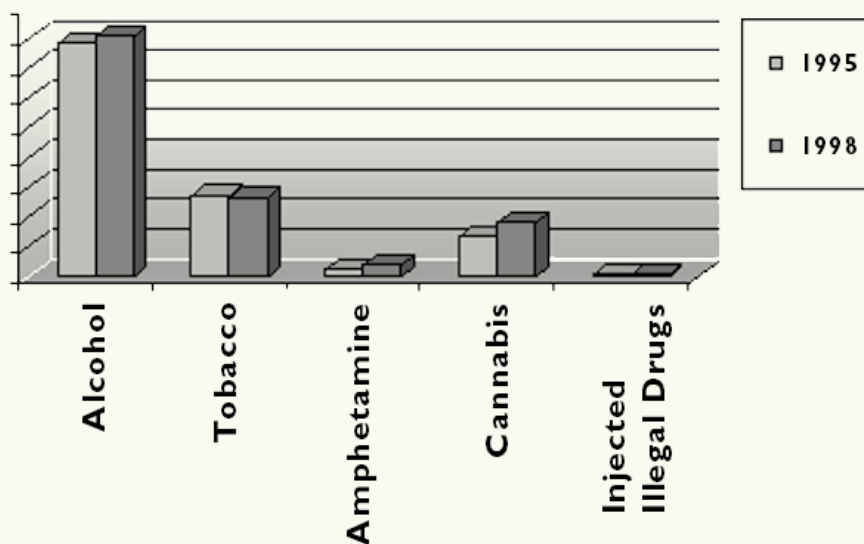
It is estimated that an additional 5000 patients will be detoxed each year as a result of these new services.

Residential rehabilitation

Some people with drug or alcohol dependency need to be away from their family and their community in order to break old habits. For these people it is important to provide a residential service where they can live-in and concentrate on how to rebuild their lives without drugs. This is called residential rehabilitation. There are a number of these programs in NSW run by government or non-government organisations. The time they need to spend in these centres can be as short as a few weeks or longer than one year.

The number of beds available in residential rehabilitation centres is being expanded across the state. An additional sixty-two new beds will become immediately available statewide – including in Armidale (Freeman House), Cowra (Weigelli Aboriginal Centre), Wagga Wagga (O'Connor House), Campbelltown (Odyssey), and Surry Hills (We Help Ourselves). These include additional places for women with children and for Aboriginal people.

Drug use in Australia



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HOW WILL OUR COMMUNITY BENEFIT FROM THIS PLAN?

- Places for patients who need detox will be expanded
- People with drug problems will have quicker access to better health services
- Specialised drug and alcohol services will be expanded in all Area Health Services
- Places in treatment programs for heroin users will be expanded
- Parents and families will receive improved support

Improving the quality of rehabilitation services is a key priority for the Plan. All services funded by NSW Health will be required to meet statewide standards and performance will be tied to a continuance of funding. This will mean better quality services, with a much greater likelihood that people coming out of rehabilitation will be ready to re enter the workforce and build constructive lives with their families.

Methadone

Methadone therapy introduces stability in the lives of heroin dependent people as they no longer need to inject up to four times per day. This, in turn, enables them to seek employment, to improve their education, and to function effectively within their family.

Improving the quality of the methadone program is of highest priority for the Government.

The new approach will be:

- Treatment plans and case management for all patients;
- The introduction of patient contracts clearly stating their responsibilities as patients;
- Improved training for all methadone providers;
- Clinics will have to meet stricter rules regarding dispensing and local amenity to be licensed; and
- All patients will be given the support to withdraw from methadone if regarded as clinically appropriate.

What this will mean

- People on the methadone program will have a greater likelihood of re-entering the workforce and improving their educational skills;
- Families will be more involved in methadone treatment and more able to assist in rebuilding the lives of drug dependent people; and
- Poor treatment practice will result in service providers losing their right to be involved in methadone treatment.
- More use of General Practitioners in treating clients and less reliance on larger clinics;
- An expansion of dispensing through pharmacies;
- Reduced disruption around clinics; and
- Improved behaviour of people in methadone treatment.

Counselling and Localised Services

Given the extent of drug and alcohol problems in the community it is important to make services as accessible as possible. It is also important to make sure people get the right sort of treatment. Too frequently people go to the service they can get into rather than go to the place that is most appropriate for their level of need.

Specialist drug and alcohol staff are not the only people who can assist people with drug and alcohol problems. We are building a system where doctors (GPs), general health workers and staff in other areas, such as education, community services, police and criminal justice are able to identify drug and alcohol problems and do something about it.

Improving GP Care

Many people use their local doctor or GP as the starting point for addressing health and social problems. This is particularly the case for people with drug and alcohol problems. In recognition of this, the Government will be working with GPs to make sure they have all the information they need to deal with patients with drug and alcohol problems.

Communities will benefit from extra involvement from GPs in a number of ways. It will be particularly good for helping those people who are just starting to develop a drug problem and who need less intensive treatment.

GPs will be sent regular information on trends in drug treatment as well as being able to attend training sessions close to their surgeries. This approach is particularly useful for rural and regional communities.

All health services across the state have been given financial resources so they can work directly with GPs in local communities.

FOR FURTHER INFORMATION AND HELP

You can contact ADIS (Alcohol and Drug Information Service) to get the designated phone number for your Area. They provide a 24 hour, 7 days confidential service which also includes advice, information and referral to local agencies. Family Drug Support provides a telephone service for families experiencing difficulties with a family member using drugs.

ADIS - Ph: 02 9361 2111; country areas free call 1800 42 2599

Family Drug Support - Ph: 9818 6166; Toll free number 1300 368 186

In any Emergency go to the Emergency Department of your local hospital or call 000 for an ambulance.

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State Health Publication No: (AIDS) 00 00 18

June 2000