

# Implementation update

## Response to the Special Commission of Inquiry into the Drug 'Ice'

CENTRE FOR ALCOHOL AND OTHER DRUGS

June 2025

### The response to the Ice Inquiry

The Centre for Alcohol and Other Drugs (CAOD) is responsible for the implementation of the health recommendations supported in the Government's response to the Special Commission of Inquiry into the Drug 'ice' (Ice Inquiry). In total, the Commissioner made 109 recommendations. Of those, 86 were supported by the government with approximately \$500 million over four years in funding pledged for Health and Justice to deliver targeted reforms. The final Government response provided an overview of how the funding will address treatment gaps and improve health and social outcomes through a suite of cross-government initiatives, including:

- Evidence-based prevention, treatment, support and early intervention services, especially in regional and rural areas and for key priority populations.
- Integrated care for people with multiple and complex needs.
- Enhancing digital capability, system navigation and virtual healthcare.
- Enhancing the AOD workforce, including Aboriginal AOD workers and people with lived or living experience of AOD use.
- Better use of data and evidence to inform system priorities, monitoring and evaluation.
- Expanded justice initiatives including MERIT, Drug Court, Circle Sentencing, Justice Reinvestment, Youth Koori Court.

### Priority populations

The Ice Inquiry identified specific populations as having increased difficulty accessing services and being at risk of disproportionate harm from AOD compared with other groups. These groups include:

- Aboriginal people.
- People with co-occurring mental illness.
- Young people.
- Women/parents with dependent children.
- People involved in the criminal justice system.
- People from culturally and linguistically diverse (CALD) backgrounds.
- LGBTIQ+ people.
- People living in regional and rural areas.

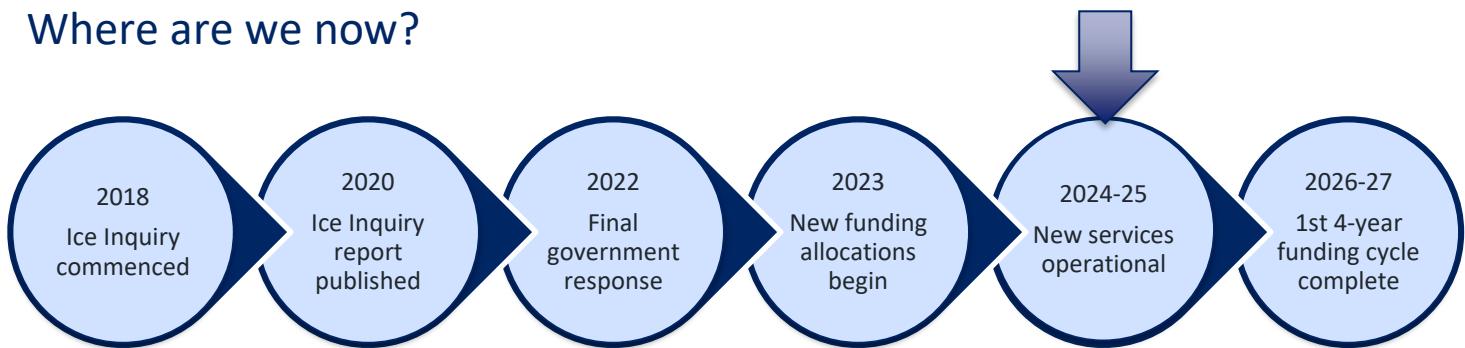
## Purpose of this report

This report provides detail on progress in implementing the health recommendations from the Ice Inquiry. Many of the improvements address multiple recommendations so this update will be structured by key themes.

Regular monitoring and reporting on the new services and progress on each of the recommendations is undertaken. This report draws from that information as well as updates on other projects that are underway within the Centre for Alcohol and Other Drugs (CAOD).

Appended to this report is a list of new or enhanced services presented by local health district region (LHD), giving a snapshot of the spread of services across NSW.

## Where are we now?



## Summary: New approaches under the Ice Inquiry response

Whilst we continue to work hard on our journey towards realising and maintaining a responsive, integrated AOD service system we would like to pause to reflect on progress to date:

- There are more options for people seeking support for AOD-related harm, including for the family, friends and carers of people using AOD. This means more choice and easier access for many people.
- Priority groups have better access to specialist care. This means reduced barriers and increased support for people who were previously most under-served by the system.
- New models of care have been developed and launched both in hospital settings and in the community for example, Safe Assessment Units and AOD Hubs. These new services will contribute to reducing pressure on Emergency Departments (EDs) and we expect to see better consumer and staff experiences.
- NSW is improving the sustainability and skills of the AOD workforce, with measures to attract and retain staff, clearer career pathways and more training. This means many people seeking treatment will receive quality care from a more supported workforce for the long term.
- We are reducing barriers to accessing care by funding more services that can do outreach, in-reach, telehealth, virtual care and transport support. This means there will be more choice and opportunity for many people to access the care they want, when they want it.
- Care for people seeking AOD treatment is becoming more holistic. This means that services are encouraged to understand the broader context of each consumer's needs, for example primary health, dentistry, housing and social care and develop pathways to address them.
- The system enablers (data, evidence, targeted resources, navigation support, workforce) are being better utilised and strengthened.

# Building on the Ice Inquiry response: Drug Summit 2024

Building on the work of the Ice Inquiry, the Drug Summit was held over four days between November and December 2024. There were single-day forums in Griffith and Lismore, and a 2-day forum in Sydney. The Summit included a public online ‘have your say’ opportunity, targeted discussions with experts, organisations, individuals and researchers.

Co-Chair’s Report was released in April 2025 with 56 priorities for action. The Co-Chair’s report, together with supporting and background documents, are available [here](#).

Many of the themes and priorities for action echoed those already raised within the Ice Inquiry Report, reinforcing the importance of the work described in this update that is already underway. The NSW Government is currently considering the recommendations outlined in 2024 Drug Summit Co-Chair’s report and will respond in due course.

## Implementation progress in detail

### Evidence-based treatment and integrated care: non-government services

Progress has been made on increasing critical AOD services operated by non-government organisations (NGOs) and Aboriginal community-controlled organisations (ACCOs).

In 2023/24 approximately \$28 million was allocated for Ice Inquiry program grants. In 2024/25 this is expected to be over \$32 million. This funding has paid for 48 NGO or ACCO-run AOD treatment and support services (and 4 new prevention services) following multiple competitive grant rounds. Many of these services are targeted to meet the needs of priority populations.

- 5 new post-custodial support services (PCS)
- 12 new integrated support AOD Hubs
- 14 new AOD family, friends and carer service enhancements
- 3 new community-based withdrawal management, case management and counselling services for adults
- 3 new day rehabilitation and case management services for people with dependent children
- 9 new day rehabilitation and/or counselling services for young people
- 2 new residential withdrawal and rehabilitation services have been commissioned
- Funding for a residential rehabilitation service for families.

### Residential services

New residential services have been commissioned following competitive grant processes. These new services have a focus on priority populations.

- **Young people:** The Ted Noffs Foundation was awarded a grant to develop and operate a residential withdrawal and rehabilitation service for young people 12 to 17 years old in Newcastle. Services have commenced.
- **Aboriginal women and their children:** Waminda (South Coast Women’s Health and Wellbeing Corporation) was awarded a grant to establish and operate an alcohol and other drug residential withdrawal management and rehabilitation service for Aboriginal women with young children. Based in

Nowra, this service is to be located on the same land as the new Birthing on Country facility.

- **People with dependent children** were identified as a priority population group by the Ice Inquiry. Odyssey House NSW was awarded grant funding to deliver AOD residential rehabilitation and parenting services for singles and couples with young children. The Family Recovery Centre is a purpose-built facility that enables parents to undergo rehabilitation and develop positive parenting and relationships with their children.

## Post Custodial Support (PCS)

The PCS program is a new service for people leaving custody who have a history of substance use. This service has significantly increased access to support for people transitioning out of correctional centres returning to live in non-metro areas. As part of the establishment of this program, and to enable coordinated care, partnerships have been formalised between NSW Health, Corrective Services NSW and Justice Health NSW as well as the five service providers.

All PCS services are now seeing clients. Two of the five PCS services are designed and run by Aboriginal community-controlled organisations (ACCOs). Across the five services, 52% of PCS clients to date identify as Aboriginal. This highlights the significant overrepresentation of Aboriginal people in incarceration and the critical need for access to culturally safe, high-quality post-custodial care to improve outcomes for Aboriginal people leaving custody.

Service provider	Area of intended residence
The Buttery	Mid North Coast and Northern NSW
Odyssey House & Drug and Alcohol Health Service (DAAHS)	Singleton and Muswellbrook (Upper Hunter Valley)
Wellington Aboriginal Health Service (WACHS)	Central West
Riverina Medical and Dental Aboriginal Corporation (RivMed)	Riverina
Directions Health	Southern NSW and Murrumbidgee

This program is offering innovative and creative approaches to support people transitioning from custody to the community while managing AOD risks. At the centre is AOD treatment and support including opioid dependence treatment, counselling, peer support, harm reduction and relapse prevention, together with care coordination to address other needs. This 'wrap around' care has included, for example, support to obtain drivers licences, partnerships with Registered Training Organisations to obtain accreditation to work on building sites and at heights, food and clothing vouchers to help set up upon release, dental and mental health support, support to reconnect with family members, community and cultural reconnection and physical health and medical care.

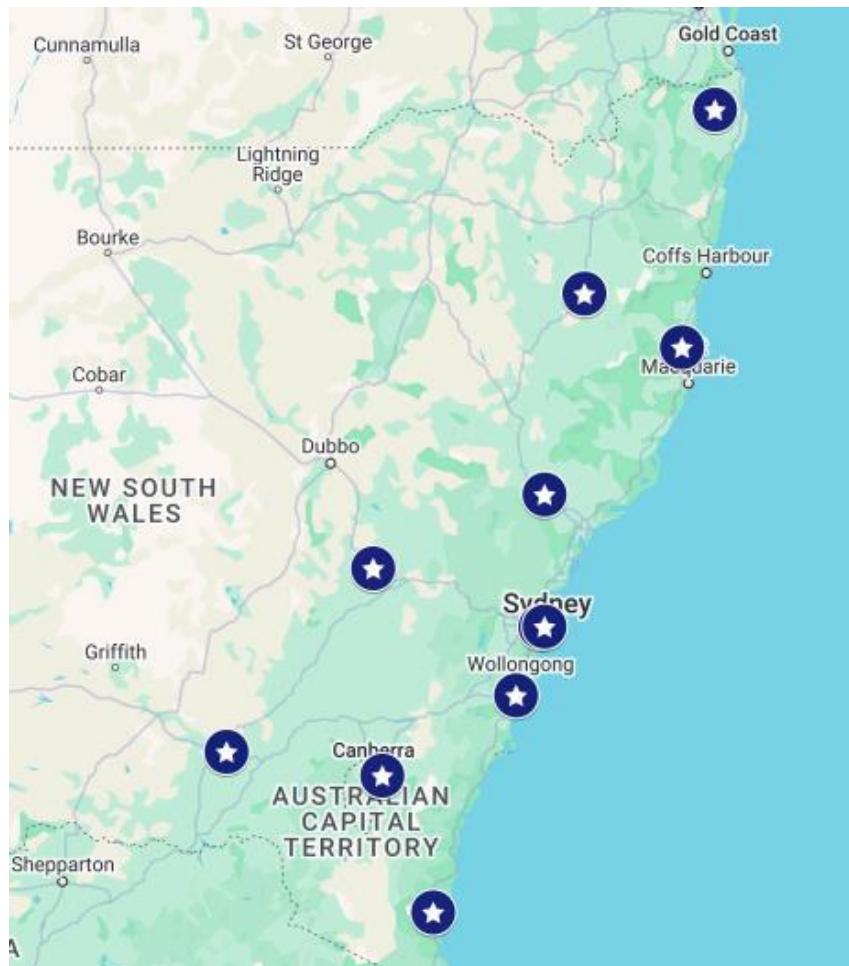
The feedback from consumers and staff in the first year of the PCS program has been consistently positive.

## The AOD Hubs

Ice Inquiry funding has enabled 12 new wrap-around support Hubs to be commissioned for people at risk of, or experiencing, harm from AOD. The AOD Hubs are a new approach to service delivery, bringing together multiple agencies working in partnership to provide tailored treatment and support. Together the Hubs have hired over 64

full time equivalent new multi-disciplinary staff to provide support and care to people experiencing harm from AOD use. This includes at least 11 Aboriginal identified and 12 lived experience identified positions.

The Hubs will help people to address their AOD use concerns and broader health and social needs in a coordinated way and are targeted to needs of different priority populations. All of the Hubs have now begun seeing clients.



timely diagnosis. They recently performed 15 fibroscans in the space of 2 hours at their Recovery Festival.

The need for innovative, integrated holistic services was again raised in the recently released Drug Summit Report.

## Family, Carers and Friends

Ice Inquiry funds were allocated to expand support for the **family, carers and friends** of people who use AOD in risky or harmful ways. **Targeted resources** to support system navigation, self-care and a better understanding of harmful AOD use for multiple priority population groups are being developed in close consultation with stakeholders and consumers. Training is also being delivered to AOD workers to support more child-focused approaches to practice.

A grant opportunity for NGOs and ACCS was run at the end of 2024 to deliver new or enhanced services to help family, carers and friends to support their loved ones who use AOD in a risky way. Fourteen organisations were successful recipients of the grants, including seven ACCS.

## Treatment Access Expansion

The Treatment Access Expansion Grants were competitively awarded to NGOs and ACCOs to establish and operate services that improve access to AOD treatment and deliver specialist AOD treatment services for priority

Work continues to embed the Hubs into the service system by establishing and strengthening their referral pathways and networks. In June 2024, a Hubs Symposium was held in Sydney bringing together all new Hub service providers. Presentations were made by adjacent sector services to build provider capacity in holistic care provision, and attendees were encouraged to network and forge relationships with other Hub providers to enable a more integrated AOD system. A workshop on how to build a culturally strong Hub led by Aboriginal organisation Thirriwirri closed the day.

The Hubs are already making a positive impact on the communities they serve. The Bill Crews Foundation Hub in Ashfield was recently funded to purchase a portable fibroscan machine (a diagnostic tool for some liver diseases). This is being used in their onsite clinic and mobile care van to increase access to

populations. Priority populations include women, people with dependent children, Aboriginal people, young people, people with cooccurring mental health issues and people involved in the criminal justice system.

An amount of up to \$58 million over four years was available to deliver a range of new AOD treatment packages across NSW, particularly in rural and regional areas. Almost all of these services are now operational. The AOD treatment service grants were for:

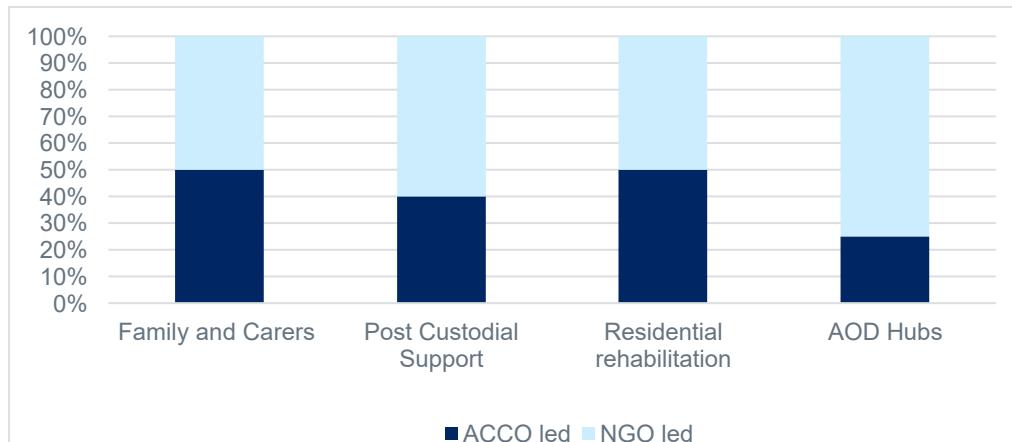
- Residential rehabilitation and withdrawal management for young people aged 12-17 years
- Residential rehabilitation and withdrawal management for Aboriginal women, including Aboriginal women who are pregnant and Aboriginal women with young children
- Day rehabilitation and case management for people with dependent children
- Community based withdrawal management, case management and counselling for priority populations
- Day rehabilitation and/or counselling for young people aged 12-17 years and young adults aged 18-24 years.

## Other grants

Alongside funding for new services, one-off funding has been provided to NGOs through a service and amenities grants process. The grants will improve operations and amenities to better respond to current and future demand. CAOD partnered with The Network of Alcohol and Drug Agencies (NADA) in a two round grants process.

The CAOD are proud to be increasing the number and proportion of Aboriginal-led services funded to deliver AOD services. New processes including quarantined funding and simplified applications have been initiated in these funding opportunities in efforts to decrease the burden of grant applications and to remove barriers to accessing funding. This aligns with NSW's commitments under the Closing the Gap agreement.

Table 1: Proportion of newly funded non-government AOD services led by ACCOs



## Evidence based treatment and integrated care: Local Health District (LHD) and Specialty Health Network (SHN) services



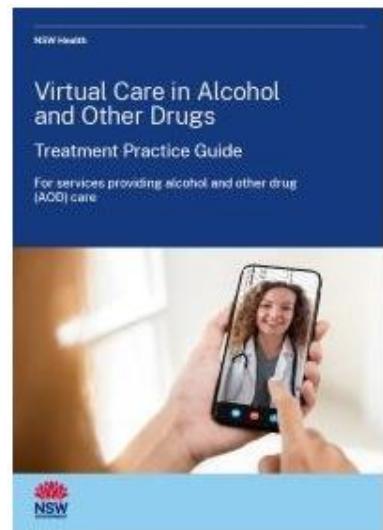
The initial Ice Inquiry LHD funding rounds boosted access to vital services by commissioning at least **19 new and 23 expanded NSW Health AOD services**.

Many of these service models focus on integrated care and complex case management. To enable new and expanded AOD service provision in LHDs, approximately 330 FTE have been funded to date. This includes 33 Aboriginal and 26 lived and living experience identified roles.

Expanded services include Substance Use in Pregnancy and Parenting Services (SUPPS); Assertive Community Management (ACM); Hospital Consultation Liaison (HCL) expansion; comorbidity models of care; increased access to withdrawal management; additional services for young people, including a new child and adolescent AOD service at John Hunter Children's Hospital.

A final round of Ice Inquiry funding supplementation was released in March 2025 to address remaining priorities in regional and rural LHDs. The objective of this funding was to move towards a more integrated AOD treatment system and achieve better outcomes for people at risk of harm from AOD. The main focus was on improving system access and navigation; building a more connected system through integrated and holistic service delivery; and increasing access to specialist advice through virtual care. LHDs submitted proposals based on local need and consultation and expect to begin implementation of the new and enhanced services in the coming months.

A number of LHDs received supplementation for new and enhanced virtual care services. To support best practice, [a virtual care in AOD practice guide](#) has been published by CAOD.



## Safe Assessment Units

Safe Assessment Units (SAUs) are designed to better support people presenting to emergency departments (ED) with behavioural disturbances associated with alcohol and other drugs and co-occurring mental health, alongside other complex health and social concerns. These units will provide a safe, low stimulus environment in which patients can be admitted, assessed, and treated. They will allow patients to be supported by a multidisciplinary team of clinicians working across mental health, clinical pharmacology, toxicology and alcohol and drug teams. To ensure patients receive ongoing support after discharge, care will be provided in collaboration with the community alcohol and other drug sector, the community mental health sector and other health and community

*These units create a safe environment, not only for patients presenting with disturbances associated with alcohol and drugs, but also our frontline health workers and other patients presenting to our emergency departments*

Minister for Health Ryan Park

Quote from media release issued on 17 October 2023

services. Similar models of care have resulted in improved patient outcomes, reduced need for sedation and restraint, as well as reduced the length of stay and time to be seen in EDs.

Funding for three new **safe assessment units** (SAU) was allocated to:

- Nepean Blue Mountains LHD (Nepean Hospital)
- South Eastern Sydney LHD (Prince of Wales Hospital)
- Illawarra Shoalhaven LHD (Shellharbour Hospital).

South Eastern Sydney LHD opened their SAU, known locally as the Emergency Department Assessment Unit (EDAU) in the Prince of Wales hospital on 4 November 2024 and is already seeing high levels of service use, with over 500 admissions in the first four months of operation. Nepean Blue Mountains LHD commenced operation on 30 April 2025. Capital works are complete at the Illawarra site and the new unit is due to open in June.

## AOD treatment in custody

AOD treatment services have been expanded for people in custody, including remand. Justice Health NSW drug and alcohol services are implementing an enhanced model of care and are adding a new adolescent specialist AOD position to the Adolescent Mental Health and AOD service.

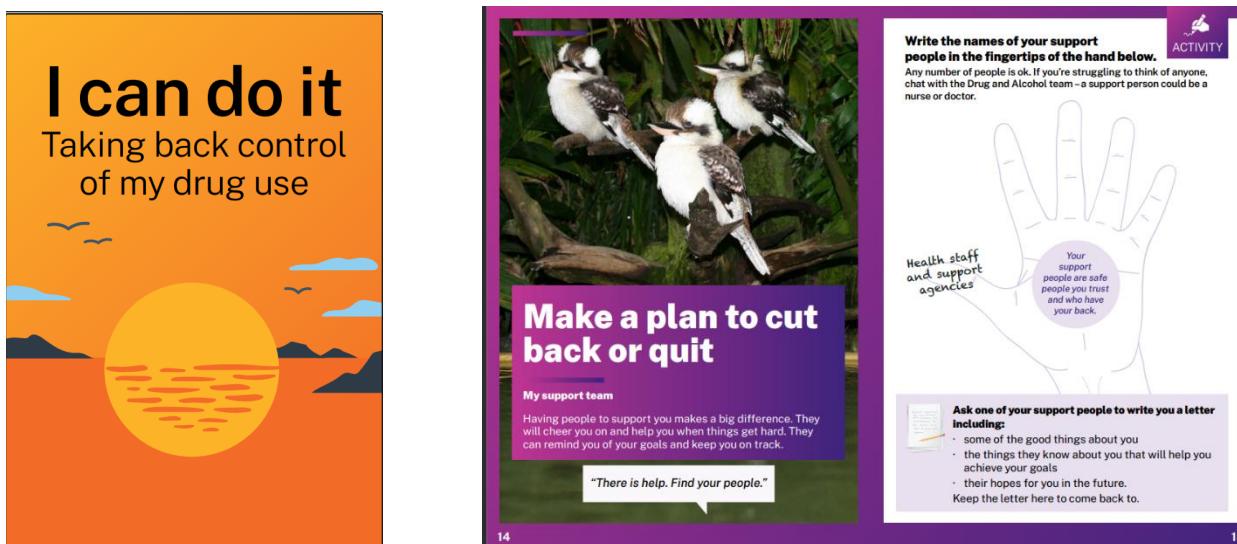


Image: Excerpts from the new resources for people in custody

CAOD is working with Justice Health to develop a suite of AOD resources for people in custody. These will cover issues such as accessing support in custody, coping with withdrawal and cravings, harm reduction tips, preparing for release and post-release support options. The workbook has been co-designed with people in custody – excerpts above. The new webpages will be loaded onto patient digital devices in mid-2025.

## Expanded justice initiatives

The Government Response to the Ice Inquiry acknowledges that a health response is required to address dependence and harmful AOD use. As part of the response, the Government allocated approximately \$141.1 million to expand justice initiatives, including diversion programs such as the Early Drug Diversion Initiative (EDDI), Magistrates Early Referral into Treatment (MERIT) and Drug Court.

Funding has been allocated over four phases to expand the **MERIT** program to 30 additional Local Courts and to extend 13 existing drug MERIT courts to accept alcohol as the principal drug of concern for program participants.

The funding will also enhance current service providers and increase the availability of MERIT priority access residential rehabilitation and withdrawal management beds.

An overview of the four phases:

- Phase 1 (commenced 2022/23) is complete - all expanded and enhanced Local Courts are accepting drug and alcohol referrals.
- Phase 2 (commenced 2023/24) is complete - all expanded and enhanced Local Courts are accepting drug and alcohol referrals.
- Phase 3 (commenced 2024/25), implementation has commenced, 7 of 10 new local courts are accepting drug and alcohol MERIT referrals. Other expansion sites are in recruitment and establishment stages.
- New MERIT priority access residential rehabilitation and withdrawal management beds for MERIT expansion phases 1 and 2 are accepting MERIT clients. Phase 4 (scheduled to commence 2025/26) is the final MERIT expansion.

The expansion will enable the program to reach approximately 93 per cent of eligible defendants across NSW through a total of 89 sites by 30 June 2026. The funding will also support more timely access to treatment and reduce barriers for MERIT participants seeking residential rehabilitation services. The program has proven to improve health and wellbeing and reduce the risk of reoffending.

**Drug Court** funding has established a new court in Dubbo (2023) and expand operations to four sitting days per week at Downing Centre (Sydney) in a two-stage process, that is now complete. Expansion of the Drug Court program is supported by new staff in eight LHDs and JH&FMHN. Additional NGOs have been engaged to deliver residential rehabilitation and supported residential care for Drug Court participants. The Drug Court program now offers over 450 treatment places and is operating at 4 sites: Parramatta, Hunter, Downing Centre (Sydney) and Dubbo. This represents an increase in participant capacity of approximately 40% since 2022/23.

The **Early Drug Diversion Initiative** (EDDI) commenced on 29 February 2024. EDDI is an adult diversion program that provides on the spot fines and free health support for low level drug offences. NSW Health has engaged St Vincent's Health Network to deliver the EDDI telephone-based drug health service. Implementation and monitoring of EDDI is led by the Department of Communities and Justice in partnership with NSW Police, Revenue NSW and NSW Health.

As of 31 December 2024, NSW Police issued 827 Criminal Infringement Notices (CINs) under EDDI, with 88 CIN recipients choosing to complete the health intervention.

The NSW Bureau of Crime Statistics and Research (BOCSAR) has been engaged to support monitoring of EDDI implementation and to conduct an evaluation.

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## AOD Workforce Development

### AOD workforce strategy

Gains have been made towards growing and developing the workforce, including publishing the [\*\*AOD workforce strategy\*\*](#). This strategy is a significant milestone for the sector. It sets a clear direction for cross-sector action and partnerships that will enhance the capacity and capability of the AOD workforce across NSW. It has been developed with the invaluable input and collaboration of a wide range of stakeholders, including NADA, and extensive consultation from the non-government AOD sector. It was informed by the [\*\*Inaugural NSW AOD Workforce Census report\*\*](#).

## Employee Value Proposition (EVP)

In partnership with the sector, an Employee Value Proposition (EVP) has been designed to promote careers in the sector and strategies to retain staff. The EVP provides a clear and compelling message about the benefits and opportunities of working in the AOD sector. It serves as a foundation for workforce attraction and retention efforts by articulating what makes the sector a rewarding place to work.

The EVP also served as the basis of the campaign messaging for an AOD Workforce Attraction

### We listen to understand, not label

NSW Health's alcohol and other drugs services are supported by a diverse team of professionals, including nurses, medical, allied health, counsellors, social workers, peer support workers and other specialist roles.

Through innovative, evidence-based skills and interventions, we professionally support people requesting assistance with alcohol and drug use.

[Find out more about alcohol and other drugs services in NSW](#)



Campaign, which ran from 10 February to 10 March 2025. As part of the campaign, a series of high-quality videos and creative assets were developed which brought to life the real experiences of AOD professionals, showcasing their dedication, expertise, and the meaningful difference they make in people's lives. The result was an engaging and authentic campaign that showcased AOD careers across the state. The campaign was promoted across NSW Health social media channels and LinkedIn.

## AOD careers webpage

To support these efforts, dedicated [AOD careers](#) webpages have been developed, showcasing real staff experiences and providing a centralised platform for job seekers and professionals interested in the sector. These webpages act as a key resource for promoting career pathways in AOD.

### Why pursue a career in alcohol and other drugs with us?

As an alcohol and other drugs (AOD) professional at NSW Health, you could enjoy:

- working for the greater good through an open, flexible and dynamic, strengths-based approach
- advocating for marginalised people to achieve fairness and accessibility
- endless opportunities for professional and personal growth
- flexible working environments and trauma-informed, person-centred practices
- an inclusive and committed team, where you can bring your whole self to work.

[View benefits](#)

#### Hear what working at NSW Health is like

Watch NSW Health alcohol and other drugs professionals talk about their experiences working with us.



#### How to become an AOD professional

Alcohol and other drugs professionals include doctors, nurses, psychologists and other allied health workers. Explore your study options.



#### Early career and advanced training programs

Learn to provide effective and efficient care to individuals, families and communities impacted by alcohol and other drugs.



<https://www.health.nsw.gov.au/careers/aod/Pages/default.aspx>

## Targeted workforce activities

In addition to hundreds of new roles in NGO, ACCO and LHD services, there are many targeted workforce activities in progress including:

- Child focused practice training. CAOD has commissioned Emerging Minds to deliver **child focused practice training** to AOD workers. The training will equip workers with knowledge, skills and strategies to embed child and family focused approaches to treatment into their everyday practice. The first training block commenced in October. Two further tranches will be run over the next 9 months. Staff from LHD, NGO and Aboriginal community-controlled services are eligible for the free training. The next two rounds will be fully online to remove barriers for rural staff.
- A grant was provided to NADA to manage and administer the Diploma in **Leadership and Management** for 100 current and aspiring NGO managers. This qualification is being delivered through the Centre for Community Welfare Training in two phases. Phase one of the program is well underway with training expected to be completed by the end of this calendar year.
- The Centre for Community Welfare Training has been funded to deliver a number of **professional development training** workshops including mental health first aid, motivational interviewing, complex case management, complex trauma and mental health, and acceptance and commitment therapy. Workshops for 2024 were full, and more dates will be released for 2025.
- State-wide accredited graduate, individual, group and advanced **supervision training** will be delivered by the Australian Association of Social Work for up to 260 people who deliver supervision. Additionally, access to online training for 1000 people who receive supervision is available and EOIs have been opened for these digital licences.
- To build dual diagnosis capabilities in AOD and mental health workers, the Matilda Centre has been funded to deliver skills-based training and online train-the-trainer sessions to 300 people across the state. Quarterly project echo sessions will facilitate collaboration and learning between the mental health and AOD workforces. The skills-based training modules will commence in 2024/25 with the delivery of the program in a regional/rural location and metropolitan location.
- **Indigenous Risk Impact Screen** training is being delivered by La Trobe University. The training will improve the capacity of the NSW AOD workforce to screen Aboriginal and Torres Strait Islander peoples for AOD and mental health concerns and offer brief intervention. Three training sessions have been delivered to date, with one more to be held in 2025.
- Nineteen scholarships for the Graduate Certificate in Criminology and Criminal Justice were awarded to people who work in MERIT and Drug Court.
- To date, TAFE NSW have trained 60 out of the 160 SCI funded **AOD Skillset** courses targeted at new and recent sector entrants. New cohorts are starting throughout the year.
- The NSW Users and AIDS Association (NUAA) is delivering ConnectED, which provides specialist peer support, supervision and professional development opportunities, to the **lived and living experience** workforce. This course, ongoing for some time, is funded for the next three years.
- **Exploring training options for the Lived and Living Experience (LLE) Workforce in the AOD sector.** This project seeks to contribute to the development of a national qualification in AOD LLE (Peer) work. The project will deliver a peer specific component of the Certificate IV in Mental Health Peer work to 20 AOD participants and consult with them to contextualise content to AOD settings and evaluate training suitability. Project learnings will be shared to support review and development of qualifications undertaken by the Humanability Jobs and Skills Council. The project steering group has been established and will meet shortly.
- 31 new Lyn Gardner scholarships were funded (2022-23 and 2023-24) for nurses and midwives to undertake the Graduate Certificate in Drug and Alcohol nursing. Priority was given to regional and rural

applicants. Funding has been requested to provide a further 10 scholarships in 2024-25 and 10 scholarships in 2025-26, with Aboriginal nurses being prioritised.

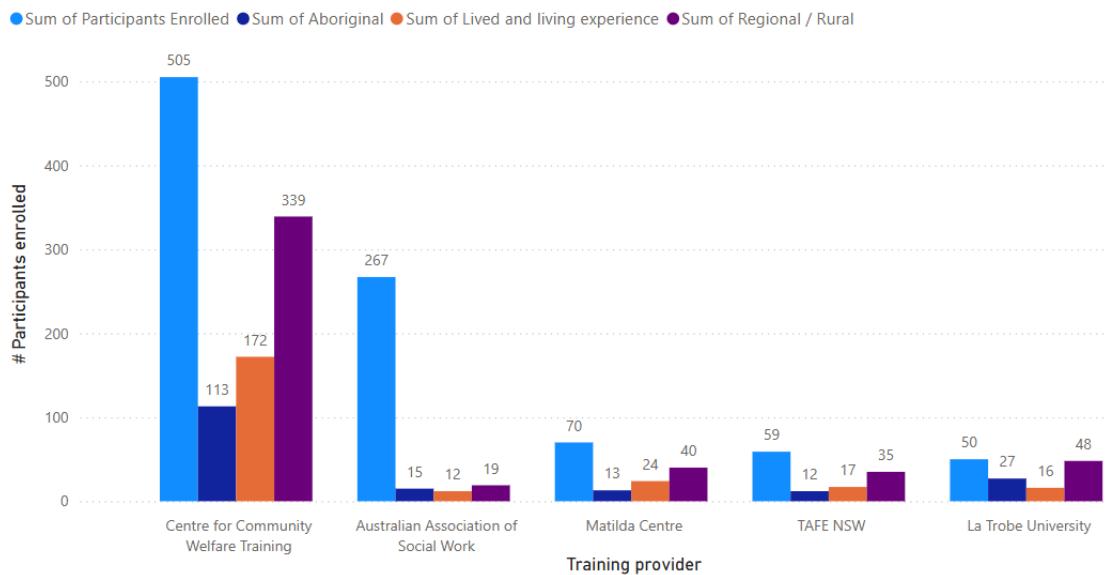
- The Aboriginal Health and Medical Research Council is being funded to deliver the **Alcohol and Other Drugs Certificate IV** modules to staff of Aboriginal community-controlled organisations in regional and rural communities. Three modules will be delivered in two additional locations in 2024-25, building on training delivered in three locations in 2023-24.
- Provision of Opioid Treatment Accreditation Course (**OTAC**) Scholarships. The scholarships provide financial support for clinicians undertaking accreditation to prescribe opioid agonist treatment. The final round of scholarships closed at the end of April 2025.
- A cultural review of the Workforce Development Package for the Clinical Care Standards for AOD Treatment is underway. This will ensure that the package is culturally safe and appropriate for the **AOD Aboriginal Workforce**.
- An advisory group has been established to oversee the delivery of **Cultural Safety Training** to NSW community pharmacists who participate in the opioid treatment and needle and syringe programs.
- Development and piloting of a one-day **AOD education program** for health professionals working in AOD and other health services. This was developed and delivered by consumers and clinicians for 60–90 health professionals and led by Western Sydney University in February - March 2025.
- Funding to support a trial of a state-wide Addiction Education Program and Addiction Medicine Advanced Training Program for Junior Medical Officers.
- Funding has been allocated to a consortium of mostly Aboriginal scholars and clinicians to research, write and edit a second edition of the *Handbook for Aboriginal Alcohol and other Drug Work* 12 years after the successful first edition of this work. This will update the material to reflect contemporary evidence and approaches to AOD clinical practice and care as well as changes in drug use patterns such as the rise of crystal methamphetamine use.

CAOD is ensuring that the enrolments in major Ice Inquiry funded training initiatives have quarantined places and/or preference priority groups. This is part of the Centre's commitment to capacity building where it is needed most (Table 2).

In collaboration with key stakeholders, existing AOD workforce networks, CAOD is exploring long term workforce strategies including incorporating AOD content into undergraduate/postgraduate programs through methods such as case studies, cadetships, student placements, careers days, career pathways, cultural supervision and Aboriginal AOD cadetships/traineeships.

Table 2: Proportion of training participants enrolled in 5 key Ice Inquiry workforce development initiatives by priority group

## Priority Enrolments



## Collaboration with Aboriginal communities and stakeholders

The **Aboriginal Strategic Collaboration Group (ASCG)** has been established to be the principal mechanism for CAOD and Aboriginal stakeholders to collaborate on CAOD's program of work. The ASCG have helped to shape CAOD's Aboriginal Engagement Strategy, prevention program grants for Aboriginal young people, a prevention framework to guide investment and sector priorities, an improved and streamlined approach to intake, the draft Aboriginal AOD workforce strategy, the revised Handbook for Aboriginal Alcohol and Drug Work, and more.

The Centre for Alcohol and other Drugs is also strengthening partnerships with the Aboriginal Health and Medical Research Council (AMHRC) and Aboriginal Corporation Drug and Alcohol Network (ACDAN) to ensure wide consultation with Aboriginal networks on key priorities.

The **Aboriginal Engagement Strategy** has been released, which guides the collaboration between CAOD and Aboriginal stakeholders. This has been created to develop a culture in CAOD that demonstrates respect for and understanding of the needs and priorities of Aboriginal people and communities in all CAOD projects and activities.

## Research and evaluation

Research and evaluation capacity across the state has been expanded with six new grants awarded to NGOs, five of them in regional areas (FY 2023/24 and 2024/25). Funding has also been provided to the Drug and Alcohol Clinical Research and Improvement Network (DACRIN) member organisations across the state for research capacity building in LHDs and NGOs, including training, statistical support, and research equipment (FY 2023/24 and 2024/25).

An in-house collaboration between CAOD and the Centre for Epidemiology and Evidence (CEE) is progressing the evaluation of three priority AOD initiatives as part of the Ice Inquiry response:

- ***The Substance Use in Pregnancy and Parenting Service (SUPPS)*** - Service and data mapping is underway to understand the core components of care and available data and its quality. This will inform the development of an evaluation plan, that will be developed collaboratively. Data analysis of linked data assets has begun to enumerate and describe the population of women in NSW who use AOD during pregnancy and/or after birth.

- **Assertive Community Management (ACM)** – the evaluation team has been engaging with ACM services across the state to understand the implementation of the program, the core components of care and to identify currently available data and its quality. This information will inform the development of an evaluation plan, that will be developed collaboratively with services and other stakeholders.
- **Safe Assessment Units (SAU)** – the evaluation team has been consulting with the SAU services to develop a monitoring and evaluation plan. Information gathering is ongoing to document the core components of SAU models of care and identify available data and its quality.

Funding has been provided to NADA to undertake an Aboriginal-led analysis of Aboriginal data within NADABase. The analysis will explore **treatment access and outcomes for Aboriginal people** in AOD Aboriginal Community Controlled Health Organisations (ACCHO) and NGO treatment services.

Funding has been approved for the University of Sydney to conduct a sub-analysis of Aboriginal participants in four Release Study datasets. The aim is to better understand the AOD treatment experiences and needs of Aboriginal people who have been released from custody.

An external process evaluation of the PCS program led by Sydney University and the Edith Collins Centre will explore the experiences of clients as well as staff, using an Aboriginal research lens.

CEE has funded external researchers from the National Drug and Alcohol Research Centre (NDARC) to conduct priority analysis using AOD data held in the **Mental Health Living Longer (MHLL) linked data** asset. These analyses will focus on pathways for care for people with opioid use disorder and examine excess mortality among AOD users in NSW. Outcomes will be examined by client characteristics, service use factors, and region of NSW. The results of this work will guide the focus of further investigations and help NSW Health services to prioritise issues requiring further planning, investment or service improvement.

The University of New South Wales and Mid North Coast LHD have been funded to **evaluate a novel, integrated AOD care model** called the In-reach, Out-reach, Brief Intervention (IOBI). IOBI is focussed on providing integrated AOD care for young people and Aboriginal people. The evaluation will explore integration, client and service outcomes and potential for scale up.

The Department of Communities and Justice (DCJ) funded the National Drug and Alcohol Research Centre (NDARC) to lead **a health and justice outcome study of the MERIT program**, in partnership with the Ministry of Health. The study found that when compared to matched controls, MERIT participants were less likely to offend at 12 and 24 months, less likely to receive a prison sentence and less likely to die of any cause at 24 months.

The Ministry of Health is undertaking further MERIT health outcome studies to explore participant healthcare utilisation and factors related to program completion.

Funding has been provided to the NSW Drug and Alcohol Clinical Research and Improvement Network (DACRIN) and the University of Sydney to undertake a **clinical audit of public antenatal medical records** at two regional and 2 urban/outer urban LHDs, aiming to generate evidence to support policy and service planning for substance using mothers related to the First 2000 days. This information will be used to better understand patterns of AOD use in pregnant women, intensity of use, and how these relate to subsequent clinical actions including the advice, support and management of substance use issues, referral options used and referral uptake.

A series of **rapid evidence reviews** were commissioned to provide a comprehensive understanding of priority AOD policy and practice areas, to ensure currency, and bridge knowledge gaps. These included reviews of the impacts of drug checking services; the key domains for youth outcome measurement in AOD treatment; the impact of depenalisation, diversion and decriminalisation for personal use and possession of controlled drugs; the impacts of involuntary AOD treatment and client and staff perspectives of involuntary AOD treatment.

## Enhanced drug surveillance capability and early warning systems

Multiple organisations have been funded to enhance drug surveillance capability and early warning systems in NSW. Key activities include:

- *Increasing availability of toxicological testing* – there is investment in laboratory capacity to increase the availability of toxicological testing for the purpose of patient care in cases of unusual acute toxicity and withdrawal management.
- *Expansion of laboratory capacity* – there is investment in resources to support laboratory capability to test for novel substances.
- *Collecting surveillance data from new sources* – CAOD is working with university partners to collect additional surveillance data. In addition to the National Drug Wastewater Monitoring program, wastewater samples are being collected and analysed from 5 additional regional sites in NSW. CAOD has partnered with university partners to undertake analysis of discarded injecting equipment in response to harm signals. Data from ambulance attendances in NSW that have been coded for key alcohol and other drug findings is now being received by CAOD and used for surveillance purposes.
- *Implementing a trial of drug residue testing post-overdose* - CAOD is working with the Uniting Medically Supervised Injecting Centre, NSW Health Pathology and academic partners to assess the feasibility of collecting and analysing drug residue samples (post-use). The trial will evaluate equipment for use in non-lab settings suitable for drug surveillance and how the results can integrate with early warning systems in NSW.
- *Working collaboratively to gather information* – CAOD has ongoing projects in collaboration with NSW Pathology and NSW Police, to ensure that NSW Health has access to timely information about drugs circulating in NSW.

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## Prevention and education

In collaboration with the Department of Education, CAOD has engaged Monash University and partners Royal Melbourne Institute of Technology University, Deakin University, Turning Point and the National Centre for Education and Training on Addiction to revise the **2004 Principles for Drug Education in Schools**; supporting best practice, evidence based AOD prevention in NSW schools. A resource co-designed by students and teachers aims to assist the school sector implement the revised principles.

The Matilda Centre has implemented the recommendations from the Preventure program review, enhancing its effectiveness for regional and rural NSW. Preventure is an early intervention program aimed at delaying young people's introduction to alcohol and drug use. Additionally, the Matilda Centre is preparing a report on alternative school-based prevention programs developed in Australia for CAOD's consideration.

Four ACCHOs have been funded to deliver community-based prevention programs that prioritise Aboriginal young people and strengthen service connections and pathways: Eleanor Duncan Aboriginal Services (Wyong), Greater Western Aboriginal Health Service (Blacktown, Mount Druitt), Maari Ma Health Aboriginal Corporation (Broken Hill) and Durri Aboriginal Corporation Medical Service (Kempsey).

CAOD has received the final version of the *Alcohol and Other Drug Primary Prevention and Early Intervention Framework* from the National Drug and Alcohol Research Centre (NDARC) with publication planned for mid-2025.

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## Information, access and support

The information, access and support project aims to improve consumer experience of system navigation and access to information about available services. A key initiative in this project is to rebuild the existing Your Room website. The Your Room website is a crucial source of alcohol and other drug information for the NSW community however consumers consistently advise that they require system navigation to be integrated with information sources.

The new site will be built with extensive consultation with consumers and people who have experience seeking information. It will increase visibility of all available services including those newly funded by the Ice Inquiry. The website rebuild will be easy to navigate, with clear information to assist people who use AOD, and their families and carers to better understand AOD use and harms, treatment options available, and how to navigate the service system. The site will be designed with inclusivity in mind, with plain English resources explaining what to expect from AOD services and treatments.

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## Looking forward

### Areas of focus for 2025/2026

- Continued implementation and support of new services and programs, including ongoing monitoring (program and system level) and evaluation.
- Targeted workforce development activities to focus on skills and capability, training content and career pathways. This includes targeted support for the growing lived/living experience and Aboriginal workforces.
- Building the evidence base and utilising data assets to support collaborative planning, proactive system responses and effective prevention and treatment responses.
- Working as a sector to manage and, where possible, mitigate the challenges arising from implementation of such a significant upscaling of capacity, including identifying strategies to assist with workforce development and/or recruitment.

### Strategic opportunities:

Over the next 12 months, CAOD will work toward the following goals:

- Ensuring the CAOD builds upon and leverages existing Ice Inquiry programs of work, delivering a coordinated and strategic approach to implement the Government response to the Drug Summit.
- Focusing on system integration, no wrong door' and service pathways. Strengthening service networks and partnerships across new and existing services (public, NGO, ACCO and primary care) to promote visibility of AOD services, and enhanced collaboration and coordination of care.
- Working across portfolio areas to enhance system integration within and outside of health, including partnerships to better address social determinants of health.
- Continuing to align with related government strategic directions and priorities (Closing the Gap, Future Health, Suicide Prevention, Homelessness).

- Connecting all related activities associated with quality improvement; experience and outcomes measurement; stigma and discrimination; better use of data and evidence; workforce development and best practice clinical and corporate governance (including the value-based health care program of work).

## Appendix: Ice Inquiry funding update: allocations to NGOs, ACCOs and LHDs for services and programs by district/region

District	Services and/or programs	Provider and/or location
Hunter New England	Residential rehabilitation and withdrawal management for young people 12-17 years	The Ted Noffs Foundation (Newcastle)
	Post-Custodial Support Program	Odyssey House in partnership with Drug and Alcohol Health Service (Hunter Valley)
	AOD Treatment and Support Hub for priority populations	Social Futures (Singleton) St Vincent de Paul (Armidale)
	Family, Carer and Friends service enhancement	Social Futures (Singleton, Muswellbrook, Maitland, Cessnock, Kurri Kurri)
	Family, Carer and Friends service enhancement	Odyssey House (Singleton)
	Improved access to Hospital Consultation Liaison services	Manning Base, Tamworth Base, Maitland and Calvary Mater Newcastle Hospitals
	Improved access to youth AOD services including withdrawal management	Newcastle, New England and lower mid north coast
	Improved access to the Substance Use in Pregnancy and Parenting Service (SUPPS)	District-wide
	Child and Adolescent Drug and Alcohol Service (including inpatient, ambulatory and outreach services)	John Hunter Children's Hospital (Newcastle)
	Magistrates Early Referral Into Treatment (MERIT) program expansion  (including new Residential rehabilitation or withdrawal management beds)	Newcastle, Taree, Foster, Muswellbrook, Scone, Raymond Terrace, Singleton, Toronto, Tamworth, Maitland, Cessnock, Armidale, Inverell, Glen Innes  SVDP – Freeman House  Toronto
	Drug Court expansion  Family, Carer and Friends service enhancement for Aboriginal people	Tobwabba Aboriginal Medical service (Forster)

District	Services and/or programs	Provider and/or location
	Family, Carer and Friends service enhancement for Aboriginal people	Tamworth Aboriginal Medical Service (Tamworth)
Illawarra Shoalhaven	Residential rehabilitation and withdrawal for Aboriginal women (including pregnant women and/or with young children)	Waminda - South Coast Women's Health and Wellbeing Aboriginal Corporation (South Nowra)
	Day rehabilitation and/or counselling for young people aged 12-17 years and young adults aged 18-24 years	Lives Lived Well (Nowra)
	Counselling for young people 12-17 years and young adults 18-24 years and community-based withdrawal for adults	Directions Health (Ulladulla region)
	AOD treatment and support Hub for priority populations	Australian Community Support Organisation (Shellharbour)
	Safe Assessment Unit	Shellharbour Hospital
	Social worker in violence, abuse and neglect for public AOD services	Illawarra Shoalhaven LHD District-wide
	New Assertive Case Management service	Illawarra and Shoalhaven
	Methamphetamine case management support for OTP consumers (social worker and registered nurse led)	Bungora
	Expansion of the mobile van treatment team to include AOD	District-wide
	Expansion of SUPPS	Shoalhaven
Mid North Coast	Increased access to youth AOD counselling	Shoalhaven
	Increased access to general AOD counselling	District-wide
	Community based withdrawal management, case management and counselling	(The Buttery (Community withdrawal management via outreach and telehealth))
	Day rehabilitation and counselling for young people	(The Buttery (Port Macquarie))
	Post-Custodial Support Program	(The Buttery (Port Macquarie, Kempsey, Coffs Harbour))

District	Services and/or programs	Provider and/or location
	AOD treatment and support hub for priority populations	Aboriginal Community Housing (Kempsey)
	Community-based prevention programs that prioritise Aboriginal young people: Durri Youth AOD Prevention and Education Program	Durri Aboriginal Corporation Medical Service (Kempsey)
	Family, Carer and Friends service enhancement	The Buttery
	Improved access to inpatient withdrawal management	Port Macquarie Base Hospital
	Multi-disciplinary team providing in reach and outreach support	Port Macquarie, Kempsey and Coffs Harbour
	Methamphetamine case management support for OTP consumers (registered nurse led)	District-wide
	Expansion of SUPPS	District-wide
Northern NSW	Magistrates Early Referral Into Treatment (MERIT) program expansion (including new residential rehabilitation or withdrawal management beds)	Port Macquarie, Macksville, Kempsey
	Day rehabilitation and case management for people with dependent children	The Buttery (Lismore, Tweed, Casino and Byron Bay)
	Community based withdrawal management, case management and counselling	The Buttery (Binna Burra and outreach/telehealth)
	Post-Custodial Support Program	The Buttery (Grafton, Ballina, Byron Bay, Lismore, Tweed Heads)
	AOD treatment and support hub	The Buttery (Nimbin)
	Family, Carer and Friends service enhancement	The Buttery
	Medical workforce expansion and Clinical Leadership and Traineeship Program	In development
	Establishment of SUPPS services across three locations	Tweed Byron Ballina Richmond Grafton
	Hospital Consultation Liaison expansion (afterhours and weekend service provision)	Lismore, Tweed, Clarence, Byron/Ballina

District	Services and/or programs	Provider and/or location
	Expansion and integration of youth AOD services with child and adolescent mental health services	Tweed, Byron, Ballina, Richmond, Grafton
Southern NSW	Community based withdrawal management, case management and counselling for priority populations	Directions Health (Bega and Eurobodalla regions)
	Day rehabilitation and case management for people with dependent children	Karralika Programs (Queanbeyan-Palerang and Cooma LGAs)
	Counselling for young people 12-17 years and young adults 18-24 years	Directions Health (Queanbeyan and Goulburn regions Bega region)
	Post-Custodial Support Program	Directions Health (Goulburn, Moruya, Yass, Batemans Bay, Bega, Eden, Cooma)
	AOD treatment and support hub for priority populations	Directions (Bega and Eden)  Grand Pacific Health (Queanbeyan)
	Family, Carer and Friends service enhancement for Aboriginal people	Katungul Aboriginal Corporation Regional Health and Community Service (Batemans Bay to Eden)
	Family, Carer and Friends service enhancement	Directions (Eurobodalla, Bega Valley and Monaro Regions)
	AOD hospital consultation liaison team expansion	District-wide
	Assertive Case Management expansion	Eurobodalla and Bega Valley
	SUPPS establishment	Bega Valley, Eurobodalla, Cooma, Goulburn and Queanbeyan
Murrumbidgee	Magistrates Early Referral Into Treatment (MERIT) program expansion (including new Residential rehabilitation or withdrawal management beds)	Goulburn, Yass, Batemans Bay, Bega, Moruya, Narooma  We Help Ourselves (Goulburn)
	Community based withdrawal management, case management and counselling for priority populations	Directions Health (Outreach from Wagga and Griffith)

District	Services and/or programs	Provider and/or location
	Post-Custodial Support Program	Directions Health (Wagga Wagga, Griffith and surrounds)
	Post-Custodial Support Program for Aboriginal people	Riverina Medical and Dental Aboriginal Corporation (RivMed) (Wagga Wagga, Junee, Tumbarumba and surrounds)
	Counselling for young people aged 12-17 years and young adults aged 18-24 years	Karralika Programs (Griffith, Temora and Narrandera Wagga Wagga/Hilltops and surrounding areas)
	AOD treatment and support Hub for priority populations	The Salvation Army (Wagga Wagga)
	Family, Carer and Friends service enhancement for Aboriginal people	Riverina Medical and Dental Aboriginal Corporation (RivMed) (Wagga Wagga)
	SUPPS workforce expansion	Wagga with outreach across the district
	Magistrates Early Referral Into Treatment (MERIT) program expansion  (including new residential rehabilitation or withdrawal management beds)	Griffith, Leeton, Narrandera, Albury, Corowa and Holbrook  Calvary Riverina Drug and Alcohol Centre, Wagga Wagga
Nepean Blue Mountains	Day rehabilitation for young people 12-17 years and young adults 18-24 years	Lives Lived Well (Lithgow)
	Family, Carer and Friends service enhancement	Odyssey House (Penrith)
	Safe Assessment Unit	Nepean Hospital (Kingswood)
	AOD hospital consultation liaison team expansion	Nepean Hospital (face to face), Katoomba, Hawkesbury and Lithgow Hospitals (virtual)
	Establishment of Lifespan Clinic for better diagnosis and treatment of health outcomes known to be associated with methamphetamine across the lifespan (including SUPPS methamphetamine clinic, paediatric and adolescent clinic, neurodiversity clinic and cognitive clinic)	Nepean Hospital
	Magistrates Early Referral Into Treatment (MERIT) program expansion	Katoomba, Penrith, Windsor, Lithgow
	Drug Court	District clients of Parramatta Court

District	Services and/or programs	Provider and/or location
Central Coast	Day rehabilitation and case management for people with dependent children	Yerin Eleanor Duncan Aboriginal Health (Wyong)
	Community-based prevention programs that prioritise Aboriginal young people: Buridjga Youth Program	Eleanor Duncan Aboriginal Services (Wyong)
	Family, Carer and Friends service enhancement for Aboriginal people	Eleanor Duncan Aboriginal Services (Wyong)
	Family, Carer and Friends service enhancement	The Glen (Wyong and Chittaway)
	SUPPS enhancement	Gosford and Wyong
	AOD hospital consultation liaison team expansion	Gosford Hospital and Wyong Hospital
	Assertive Community Management service establishment	Outreach
	Magistrates Early Referral Into Treatment (MERIT) program expansion	Central Coast MERIT team (Wyong and Gosford)
Far West NSW	Day rehabilitation for young people 12-17 years and young adults 18-24 years	Mission Australia (Broken Hill)
	Family, Carer and Friends service enhancement for Aboriginal people	Maari Ma Health Aboriginal Corporation (Broken Hill and Wilcannia)
	Community-based prevention programs that prioritise Aboriginal young people: Empowering our young people and our community: AOD youth prevention and intervention in far west NSW	Maari Ma Health Aboriginal Corporation (Broken Hill)
	Integrated model of care	Broken Hill and Buronga
	Virtual care/telemedicine services	District-wide
	Magistrates Early Referral Into Treatment (MERIT) program expansion	Wentworth
Western NSW	Post-Custodial Support Program for Aboriginal people	WACHS: Wellington Aboriginal Corporation Health Service (Dubbo region)
	AOD treatment and support hub for priority populations	Orange Aboriginal Medical Service

District	Services and/or programs	Provider and/or location
		(Orange, Bathurst, Cowra)
	Establishment of an integrated mental health and drug and alcohol acute care virtual service	District-wide (plus ad hoc in person clinics with hospitals and multi-purpose services)
	Expansion of the virtual Community Mental Health Team to include specialist AOD staff	District-wide (i.e. virtual and outreach)
	Magistrates Early Referral Into Treatment (MERIT) program expansion (including new Residential rehabilitation or withdrawal management beds)	Mudgee, Bourke, Brewarrina, Walgett Lives Lived Well - Wyla
	Drug Court Program expansion	District clients of Dubbo Court
Sydney	AOD treatment and support hub for priority populations	Bill Crews Foundation (Ashfield)  Mission Australia (Inner West/ Inner Sydney)
	Counselling for young people 12-17 years and young adults 18-24 years exiting custody	Community Restorative Centre (CRC) (Based in Canterbury with assertive outreach to Greater Sydney Metropolitan region)
	Family, Carer and Friends service enhancement	Odyssey House (Redfern)
	Addiction psychiatry support	LHD outreach to three women's residential rehabilitation centres (locations withheld)
	Hospital Consultation Liaison expansion	Concord Repatriation General Hospital and Royal Prince Alfred Hospital (Camperdown)
	Establishment of a centralised intake and virtual care hub	District-wide (i.e. telehealth, virtual)
	Expansion of integrated services for women/parents with children (SUPPS model)	District-wide
	Youth AOD treatment and support expansion	District wide outreach
	Drug Court Program expansion  MERIT priority access residential rehabilitation	District clients of Downing Centre, Sydney Court Delivered by We Help Ourselves (WHOs)

District	Services and/or programs	Provider and/or location
<b>South Western Sydney</b>	AOD treatment and support Hub for priority populations	Gandangara Aboriginal Health Services (Miller)
	Counselling for young people 12-17 years and young adults 18-24 years exiting custody	Community Restorative Centre (CRC) (Liverpool, Fairfield, Bankstown)
	Family, Carer and Friends service enhancement	Odyssey House (Bowral, Liverpool, Ingleburn, Eagle Vale Campbelltown)
	Families with dependent children residential rehabilitation	Odyssey House Eagle Vale
	Expansion of Aboriginal AOD services	SWSLHD Drug Health Services SWSLHD Aboriginal Chronic Care, Tharawal AMS, Gandangara Health Services AHS (Liverpool)
	Establishment of an AOD and Mental Health Care Navigation team	In reach/partnership arrangements with LHD Hospitals, Drug Health Services, Mental Health Services and local non-government organisations
	Expansion of youth services	District-wide (i.e. digital and virtual care and support)
	Magistrates Early Referral Into Treatment (MERIT) program expansion (including new residential rehabilitation or withdrawal management beds)	District wide Odyssey House
	Drug Court Program expansion	Parramatta Court
<b>South Eastern Sydney</b>	AOD hospital consultation liaison team expansion	Prince of Wales Hospital (Randwick), St George Hospital, Sutherland Hospital and Sydney Eye Hospital
	SUPPS enhancement	District wide: Caringbah, Kogarah, Randwick
	Safe Assessment Unit	Prince of Wales Hospital
	Drug Court Program expansion MERIT priority access to residential rehabilitation	District clients of Downing Centre, Sydney Court District contracting Odyssey House
	Establishment of an inpatient withdrawal ward	Blacktown Hospital

District	Services and/or programs	Provider and/or location
	AOD hospital consultation liaison team expansion	Westmead Hospital and Blacktown Hospital with outreach to Mt Druitt Hospital, Auburn Hospital and Cumberland Hospital
	Community-based prevention programs that prioritise Aboriginal young people: Indigenous Youth Services for AOD prevention	Greater Western Aboriginal Health Service (Blacktown, Mount Druitt)
	Family, Carer and Friends service enhancement for Young People age 12-25 years	Youth off the Streets (Blacktown)
	Family, Carer and Friends service enhancement	Odyssey House (Blacktown, Mount Druitt)
	Counselling for young people 12-17 years and young adults 18-24 years	Community Restorative Centre (Parramatta, Blacktown, Mount Druitt)
	Magistrates Early Referral Into Treatment (MERIT) program expansion	Western Sydney MERIT team
	Drug Court Program Expansion	Parramatta Court
<b>Northern Sydney</b>	Assertive Case Management establishment	Royal North Shore Community Health Centre, St Leonards
	Expansion of the integrated Hospital Consultation Liaison and SUPPS service	Brookvale, St Leonards and Hornsby
	Expansion of specialist co-morbidity services for AOD consumers	Hornsby Hospital and Northern Beaches Community Health Centre (Brookvale)
	Intake capacity expansion	District-wide
	Expansion of community counselling services for AOD consumers	District-wide
	Drug Court Program expansion	District clients of Downing Centre, Sydney Court
	Family, Carer and Friends service enhancement	Odyssey House (Hornsby)
<b>St Vincents Hospital Network</b>	Triage, Rapid Assessment and Collaborative Care model (TRACC)	Darlinghurst
	An overarching model of care that aims to meet the needs of complex vulnerable populations accessing SVHN and the wider community	
<b>Sydney Children's Hospital Network</b>	CICADA Adolescent Drug and Alcohol Service expansion	The Children's Hospital at Westmead and Sydney Children's Hospital (Randwick)
	Multi-disciplinary, early intervention AOD service at the Children's Hospitals for 11-17 year olds with moderate to severe substance use.	

District	Services and/or programs	Provider and/or location
Justice Health NSW	Expansion of AOD interventions to people in custody, including those on remand  Enhancement of adolescent mental health and AOD services  Drug Court Program expansion	Multiple locations across NSW
State-wide	Counselling for young people 12-17 years and young adults 18-24 years exiting custody	Community Restorative Centre (state-wide virtual care)
	Family, Carer and Friends service enhancement for Aboriginal people	The Glen (telehealth statewide)
	Family, Carer and Friends service enhancement	Salvation Army (telehealth statewide)
	Family, Carer and Friends service enhancement	Jarrah House (telehealth and virtual)

**Notes:**

- This list is correct to the best of our knowledge at the time of release, LHD and NGO service enhancements or locations may vary slightly as they respond to local needs.
- This table identifies services or programs that have been funded, some may not yet be operational (e.g. some NGOs are in final contract negotiations).
- Recruitment and other operational issues may impact service delivery.
- The locations listed may not reflect the complete service coverage, i.e. outreach, in reach and virtual capacity.
- MERIT locations refer to the Local Courts impacted.
- This table does not include all SCI initiatives (e.g. core workforce and clinical leadership enhancements).