Funding to Mental Health and Drug and Alcohol Services for Nicotine Replacement Therapy (NRT)

In May 2010 $2.17M non-recurrent funding was allocated to Area Health Services, Justice Health and Children’s Hospital Westmead for purchasing Nicotine Replacement Therapy (NRT) for patients accessing mental health and drug and alcohol (D&A) services. The provision of free NRT to these patients is designed to support implementation of the NSW Health Smoke Free Workplace Policy.

The Smoke Free Workplace Policy was released in 1999 mandating that all NSW Health facilities go smoke free. Mental Health Services were originally provided an exemption due to the high prevalence of smoking in this population and the perceived challenges of introducing this policy in these services.

Smoking is recognised as the leading preventable cause of morbidity and premature mortality in Australia. Research indicates smoking is more prevalent among people from disadvantaged communities. Studies show that among injecting drug users, smoking prevalence is 91%, among people admitted to a clinic for alcohol abuse, prevalence is 75-81%. Approximately 32% of people with mental health problems smoke – for those with schizophrenia the prevalence is 62%.

Supply of NRT to Mental Health and D&A service users provides the opportunity to encourage people to address their smoking.

‘You Don’t Need Grog’ Posters

Three new posters promoting responsible drinking to Aboriginal teens are available. Developed by NSW Health in consultation with the Aboriginal Drug and Alcohol Network, the posters encourage Aboriginal parents and teenagers to delay the age of initiation for alcohol consumption. The A4 posters support the ‘Guides to dealing with grog’ booklets for parents and teenagers. The booklets and posters can be ordered cost free at www.yourroom.com.au (click on ‘Campaigns and resources’ for order form) or email drugaction@doh.health.nsw.gov.au

NSW Health promotes healthy lifestyles and supports a smoke free workplace and environments.

In the interests of better health, smoking is not permitted on this campus.
Welcome to the fourth edition of The Buzz. This Spring issue is significant as it marks the first joint newsletter of the Mental Health and Drug and Alcohol Clinical Policy units of the Mental Health and Drug & Alcohol Office.

Yet again, there are movements in the Clinical Policy units; Chris Shipway, former Associate Director, Mental Health Clinical Policy has now moved to the role of Acting Director, Chronic Disease Management Office; Nikki Maloney, former Acting Associate Director, Drug and Alcohol Clinical Policy has been assigned to work on the Health Reform process. Presently Karen Price is Associate Director, Mental Health Clinical Policy and Andrew Putt is Associate Director, Drug and Alcohol Clinical Policy.

MHDAO’s Annual Planning Day was held on 6 August 2010. This year’s theme was around plans for the future, with Jane Caro who guest stars on the Gruen Transfer as MC. Jane’s sense of humour and ability to effectively engage staff was constructive, with staff taking on the challenge of engaging in scenario-based activities. The day also featured presentations, plenary sessions and other group activities. The Planning Day concluded on a high note with staff input well received, and some great ideas being communicated and exchanged.

The units are continuing to enhance the profile of the sector by way of publications and presentations at seminars and conferences. Congratulations to staff who contributed papers and posters at the National Indigenous Drug and Alcohol Conference.

MHDAO encourages you to register for the 2010 Creating Synergy Drug & Alcohol Conference, 3 – 5 November at Wollongong University and attend this affordable state-wide conference [See Page 7 for more information].

We would like to thank the Network of Alcohol and Other Drugs Agencies (NADA), Justice Health and the Alcohol and Drug Information Service (ADIS) for their contribution to this issue.

Input from Mental Health and Drug & Alcohol workers in Area Health Services and the NGO sector is strongly encouraged as we continue to work together with the sector. If you have a program or initiative that you want to promote, please contact The Buzz by email at mhda@doh.health.nsw.gov.au

Associate Professor John Allan has been Chief Psychiatrist of NSW for just over a year. As those who have met him will know, John brings to this role abundant experience combined with personal warmth, an innate respect for others and an ability to quickly grasp the essence of any situation.

He is also an enthusiastic supporter of evidence based clinical care and the clear, open governance of clinical services.

Although he hails from Queensland (which perhaps explains his penchant for the colour orange and array of interesting socks), John is enjoying the cooler climes.

“NSW has a large number of talented people in the academic, clinical and consumer sectors. While we have some challenges, like improving and standardising community mental health care, there’s a willingness to look at things systemically and a general respect for standards in NSW. These things make it easy to work together to improve the care we provide”, John said.

John has worked in forensic psychiatry as well as mental health inpatient and community services, including Aboriginal communities.

As a junior psychiatrist, John became increasingly interested in mental health reform and service development.

“After the Ward 10B scandal I was part of a team that reinvigorated mental health in Townsville. During this time I became convinced that mental health units cannot be run in isolation – especially from the community they serve.

There’s a danger when a service looks only at what it wants to see and does not examine its adverse events, participate in benchmarking or subject itself to external review. It’s important that mental health services aren’t conducted behind closed doors and that many people are aware of how it is conducting its business”, John said.

John sees his role as making sure mental health services reflect community expectations. To achieve this, he will shortly begin consulting with consumers, clinicians and carers to develop clinical service standards for mental health services in NSW.

These standards will cover the key components needed to make mental health services run well, such as consumer participation, professional development and treatment delivery.

John is interested in every level of service delivery, planning and review and looks forward to continuing to meet and work with the community of people involved in supporting mental health and well being in NSW.
WHERE ARE THEY NOW?

AN UPDATE ON THE FIRST GRADUATES FROM THE ABORIGINAL MENTAL HEALTH WORKFORCE TRAINING PROGRAM

The Aboriginal Mental Health Workforce Training Program commenced in 2007 and is a key component of strengthening and growing the Aboriginal Mental Health Workforce across NSW.

Using a traineeship model the Program provides permanent employment within NSW Health for Aboriginal Mental Health Workers, while they undertake a degree course, clinical placements and on the job training.

19 funded positions have been established across AHS in NSW, including Justice Health. The Program rolled out in 2 phases – Phase 1 rolled out 10 positions into rural and regional AHS, while Phase 2 rolled out a further 9 positions into metropolitan AHS.

MHDAO is pleased to report that of the 10 positions which were established in Phase 1, 9 of the Trainees have now graduated from the Program. Of these 9 Graduates, 7 are now working as first year mental health practitioners within NSW Health or for an Aboriginal Medical Service. This is a major achievement for the Program in relation to building the workforce, and also constitutes a major success in relation to building the capacity of mental health services in NSW to address the mental health and social and emotional well being of Aboriginal people.

DEVELOPMENTS IN DIVERSION

– EXPANSION OF THE MAGISTRATES EARLY REFERRAL INTO TREATMENT PROGRAM (MERIT)

MERIT, the highly successful diversion program delivered by NSW Health, is currently undergoing significant expansion and improvement.

NGOs are now being contracted to provide MERIT services with the objective of improving partnerships between NGOs and the AHS. Two NGO based case-workers have been contracted for the delivery of MERIT services for Wollongong, Dubbo and Wagga Wagga Local Courts. The caseworker will be employed by the NGO but be part of the local MERIT team and be given day-to-day supervision by the MERIT team manager. In addition, Upper Hunter Drug and Alcohol Service has been contracted to set up and provide ongoing MERIT services to the Coffs Harbour Local Court.

Addressing alcohol related harms has become a national priority and the MERIT program is responding by expanding to include services for those with alcohol problems. The North Sydney Central Coast MERIT team is now providing alcohol MERIT services to Manly Local Court and the South East Sydney Illawarra MERIT team will be providing alcohol MERIT to Wollongong Local Court.

This new model of service delivery and the move towards managing alcohol within MERIT will be independently evaluated.

Closing the Gap on Aboriginal life expectancy is also a national priority and strategies are being adopted to improve Aboriginal participation in MERIT. MHDAO has funded the Aboriginal Health and Medical Research Council to develop a set of guidelines and a check list to assist MERIT teams to improve the participation of Aboriginal people. In addition, the new Coffs Harbour team will employ an Aboriginal trainee in their team and the new NGO-based caseworker to start in Dubbo will be an Aboriginal position.

The new developments in the delivery of MERIT will further improve the ability of NSW Health to address the underlying health, mental health and social welfare issues of defendants with drug and alcohol problems who come into contact with the criminal justice system.

As a result of this Program I am now more confident in myself, feel ready to further my education to a post graduate level, and begin to advocate on behalf of Aboriginal people to achieve better health outcomes.

Contact Kate Williamson
A/Manager Treatment Service Implementation
on Ph 02 9424 5791
for more information
LINKING PHYSICAL AND MENTAL HEALTH…IT MAKES SENSE

International and national research confirms that the physical health of people with a mental illness is poor, and that poor physical health is associated with impaired mental health.

In recognition of this, the Clinical Governance area of the NSW Health Mental Health and Drug and Alcohol Office developed the Linking physical and mental health…it makes sense initiative, which was launched by the Minister Assisting the Minister for Health, Mental Health, in May 2009.

Broad goals of the initiative are to:
- recognise the important link between physical and mental health;
- support a holistic approach to health care; and
- encourage greater collaboration between health care providers, health care consumers, and families and carers.

More specifically, the initiative is focused on improving the physical health of people with a mental illness and supporting those who use a mental health service to access physical health care.

A set of guidelines was released in 2009 (Physical Health Care of Mental Health Consumers Guidelines) along with a policy directive (Physical Health Care within Mental Health Services Policy Directive) to clarify the responsibilities of Area Mental Health Services (AMHS) in relation to providing physical health care. Information materials for all key stakeholders – consumers, carers and families, GPs and mental health staff – were also developed to promote the principles of the Guidelines and inform stakeholders about what to expect from their local mental health service regarding physical health care.

Most recently, an education and training package for AMHS has been finalised that will support the delivery of short local workshops. A web resource portal is also being finalised that will bring together available information, resources and advice for the community, as well as for health professionals, on how to improve the physical health of people with a mental illness and how others have successfully gone about this. Additionally, this portal will provide access to the on-line training based on clinical aspects of the Guidelines and Policy.

GOT IT! – GETTING ON TRACK IN TIME

In March this year the NSW Premier announced funding of $9 million a year over the next four years for prevention and early intervention services. Included in these services was funding of $2.5 million per year for a Program called Got It! – Getting on track in time.

Got It! is a schools based mental health early intervention program for children from kindergarten to Year 2 who display disruptive behaviours and emerging conduct disorders. This Program works with children, parents, carers and schoolteachers and aims to both prevent mental illness and behavioural disorders in later life, and to improve educational outcomes for these children.

The Program is being established in the same locations as the Keep Them Safe Family Referral Services already located at Mt Druitt, Dubbo and Newcastle.

Got it! is being coordinated by MH-Kids through the NSW School-Link Initiative. MH-Kids is the child and adolescent mental health services policy, service development and service planning unit of MHDAO. MH-Kids is based at Gladesville and hosted on a remote basis by The Children’s Hospital at Westmead.

For more information contact Rochelle Kelly, Senior Policy Officer, MHDAO by email: rkell@doh.health.nsw.gov.au

For further information on the Got It! Program please contact Michelle Azizi, Ph 02 9816 0432 or maziz@doh.health.nsw.gov.au

NSW POSITIVE LIVING IN AGED CARE AWARDS

The Positive Living in Aged Care (PLAC) Awards is an initiative of the Older People’s Mental Health Working Group, convened by Mental Health and Drug and Alcohol Office in collaboration with Aged and Community Services of NSW and ACT (ACSA) and Aged Care Association of Australia – NSW (ACAA).

The PLAC Project aims to identify, showcase, and promote innovative strategies that have a positive impact on the mental health and wellbeing of residents of aged care facilities and/or reduce occupational and emotional stress for staff, families and carers. It promotes collaboration and partnerships with mental health services and other key stakeholders, and sharing of good practice approaches amongst residential aged care facilities.

The awards, now in their third year, are open to all residential aged care facilities (RACFs) in NSW. This year again provided strong competition and innovative program ideas with the Hon. Barbara Perry presenting the awards at a function and seminar at Luna Park on 30th August.

For more information on this initiative, please contact Dr Kate Jackson, Manager, Older People’s Mental Health (OPMH) Policy Unit, MHDAO on (02) 6363 8101.

Dr Kate Jackson, MHDAO OPMH, Minister Barbara Perry, and Ms Kay Richards, ACAA
NSW Health has launched a statewide awareness campaign targeting long term users of cannabis.

Developmental research conducted by NSW Health indicated that cannabis is largely considered to be a ‘safe’ drug (often compared favourably to alcohol and tobacco). However the concept of continued use leading to loss of motivation, a failure to reach one’s potential and possible serious mental health issues did resonate with the target groups.

The creative approach for the campaign reflects these concerns and explores three scenarios which frequent cannabis use can have an effect on:
- family;
- potential; and
- social relationships.

The Cannabis can leave you permanently out of it campaign aims to increase awareness of the impact of frequent cannabis use on lifestyle, such as isolation from friends and family and the limiting of potential in such things as employment and/or education.

The campaign will run from August through to November, is a series of posters and advertisements with the key messages that cannabis:
- is a major cause of social problems;
- can have serious negative effects on your health; and
- can lead to missing out on opportunities.

Another important message of the campaign is that there are support and treatment options available to people who want to reduce or stop their cannabis use. NSW Health operates Cannabis Clinics throughout the State. The Clinics are a free outpatient counselling service for people 16 years and over.

For more information on the campaign visit www.permanentlyoutofit.com.au.
THE BUZZ FROM THE SECTOR...

NGO DRUG & ALCOHOL AND MENTAL HEALTH INFORMATION MANAGEMENT – PILOT PROCESS HAS COMMENCED!
Jo Khoo, Program Manager, Network of Alcohol and Other Drugs Agencies (NADA)
In 2008, NADA received funding from NSW Health to undertake a four year information management project to strengthen the capacity of non government drug & alcohol agencies to collect and use information on client treatment outcomes. The outcomes focus on psychological wellbeing, health and social circumstances, risk behaviour, drug & alcohol use and severity of dependence.

The project was informed by its advisory committee represented by NADA’s members, NSW Health and external experts in the areas of research, data management, mental health, and drug & alcohol policy and service delivery. ‘A Review of Screening, Assessment and Outcome Measures for Drug and Alcohol Settings’ commissioned by NADA and a baseline survey of its members further informed the process.

In late 2009, NADA incorporated the Treatment Outcomes Data Collection Set and a range of outcome report functions for clinicians and managers into its online data system which is available to non government services.

A pilot process with a small group of NADA members commenced in 2010.

Implementation for pilot organisations include training in the data collection set, the database and a change-management component to support agencies to implement the outcome measurement system within their service (as implementation activities differ for each service). A User Guide has been developed to assist agencies to use the Treatment Outcomes Database and ongoing support is provided by NADA staff.

An independent project evaluation will be conducted to inform wider rollout to the non government drug & alcohol sector in 2011.

More information on this project can be found on NADA’s website www.nada.org.au under ‘Projects.’

JUSTICE HEALTH’S CONNECTIONS PROJECT
Dr Sandra Sunic and Stephen Ward

The Connections Project is a Justice Health state wide, proactive approach to release planning for prisoners with drug problems. A successful model focused on social justice and social inclusion, delivers coordinated care for reintegration of prisoners in to the community, reducing drug use, drug related death, re-incarceration and improving engagement with D&A treatment.

There is increasing evidence that poor engagement of patients with health and welfare services post custody results in higher morbidity, mortality, and rates of recidivism, demonstrated by national and international research (Stewart et al 2004, Friedman et al 2007 and Farrell et al 2008).

The Connections project works within the principles of The Personal Strengths model of care and has been well researched in both in-patient and community based settings. A recent comparison study found that participants in the strengths based group were 2.13 times more likely to link with drug and alcohol treatment than those in the other study groups (Rapp et al 2008).

Outcomes after engaging with Connections post-release

- 87% of patients continued AOD treatment in the community. Of these 42% reported commencing an additional AOD treatment.
- 74% of patients with treatment arranged for their physical health engaged in treatment.
- 60% of patients requiring on-going mental health care continued treatment.
- More than one fifth of patients (20.3%) engaged with education/training or employment within four weeks of release.

- 90% of patients indicated that they had been better prepared to return to the community as a result of their involvement with Connections.
- 65% of patients on Connections remained out of custody longer than previously.
- On average, participants who remained in the community at annual review spent almost seven months longer in the community than on their previous release.
- Overall Indigenous and non-Indigenous patients reported they were equally prepared for their release. Indigenous patients were as likely to report being assisted by Connections as were non-Indigenous patients.
- The General Health Questionnaire and Short Form 12 (SF-12) indicated improvements in wellbeing, general and mental health for Connections patients who remained in the community.

NEW LOCATION FOR ADIS
David Lester, Manager ADIS

NSW patients now have access to one of Australia’s first purpose built facilities, giving greater opportunities for collocation, collaboration and co-operation to alcohol and drug, mental health, community health and homeless health services with the new state-of-the-art O’Brien Centre at St Vincent’s Hospital. Premier Kristina Keneally and Minister for Health, Carmel Tebbutt officially opened the new centre - a one-stop-shop providing improved homeless accommodation and health treatment options - on 28 May 2010.

The new $46 million O’Brien Centre includes:
- NSW Alcohol and Drug Information Service (ADIS) including the Drug and Alcohol Advisory Service (DASAS) and Methadone Advice and Conciliation Service (MACS);
- NSW (& ACT) Quitline to assist patients to quit smoking;
- Rankin Court Opioid Treatment Centre;
- Gorman House 20 bed residential Detoxification Unit;
- Stimulant Treatment Program – a pilot program working with Hunter New England Area Health Service;
- Caritas, the residential Mental Health unit;
- Community Mental Health Service & Primary Care Team;
- Community Health Service;
- Homeless Health; and
- CRUFAD, the Anxiety Disorders unit.

Located on the main St Vincent’s Hospital Campus, the new Centre is a joint partnership between the NSW Government and St Vincent’s Hospital. The NSW Government contributed $23 million. The O’Brien Centre is named after Sister of Charity Mary Francis De Sales (1809-1871) who was born Catherine O’Brien in Bordeaux, France. Inspired by Mother Mary Aikenhead, she arrived in Sydney in 1838 to establish the Sisters’ healing mission to the sick and poor.
NURSE PRACTITIONERS IN DRUG AND ALCOHOL

The year 2000 saw authorisation of the first Nurse Practitioner (NP) in Australia. By 2009 the number of NPs had risen to 306, with over a third practising in NSW.

NPs have the opportunity to work at an advanced practice level within a specialty area. The position provides the opportunity to work both autonomously and in partnership with multidisciplinary teams, prescribe medications, request diagnostic imaging and pathology, and referral of patients to medical specialists. Currently there are two NPs employed in the NSW drug and alcohol sector. D&A NPs have potential to perform as a useful adjunct to prescribing doctors working in Opioid Treatment Programs. They can expedite treatment and reduce length of stay for hospital inpatients, and may prescribe for outpatient (or inpatient) withdrawal management or drugs in pregnancy services.

In 2009 the Australian Federal Government announced that over the next four years $59.7 million in funding will be spent to develop the NP role. The full detail of how this funding will be allocated has yet to be provided; it does include allowing NP’s access to MBS and PBS from late 2010.


UPCOMING CONFERENCES

2010 CREATING SYNERGY DRUG & ALCOHOL CONFERENCE

Building on the reputation of providing worthwhile, valuable and relevant regional conferences in the mental health and drug and alcohol field, NSW Health has partnered with the ‘Creating Synergy’ Organising Committee to build this year’s conference on 3–5 November at Wollongong University into a state-wide event.

It will provide a forum for government and non-government drug and alcohol researchers, practitioners and policy developers from across New South Wales to discuss the evidence and models for family inclusive approaches to drug and alcohol and mental health initiatives. With the theme focusing on issues relating to families, partners, carers, children and dependant drug and alcohol using people, it will aim to provide practical information and messages, showcase best practice and evidence-based case studies and research and provide innovative approaches to family-inclusive interventions.

The Creating Synergy conferences commenced six years ago as an initiative of Illawarra-based government and non-government mental health and drug and alcohol practitioners exploring effective ways of working together.

The 2010 Creating Synergy Conference will host respected international speakers Dr Gabriele Fischer (Medical Director of Addiction Clinic – Medical University Vienna), Professor Peter J Adams (Associate Professor Social and Community Health, University of Auckland), Professor Derrick Silove (Associate Professor Social and Community Health, University of Sydney) and Professor Giuseppe Dell’Acqua (Associate Professor Social and Community Health, Vienna), Professor Peter J Adams (Associate Professor Social and Community Health, University of Auckland), Professor Derrick Silove (Associate Professor Social and Community Health, University of Sydney), and Professor Louise Newman (Centre for Developmental Psychiatry and Psychology, Monash University) and Dr Stefan Gruenert (Chief Executive, Odyssey House, Victoria).

Registrations are open and, as in previous years, the Creating Synergy Committee is providing an affordable conference for people working in the field. For more information on the conference and how to register to attend please go to www.creatingsynergy.org.au

More information Ralph Moore, 02 9424 5938

BETTER MENTAL HEALTH FOR ALL – THE 8TH NSW TRANSCULTURAL MENTAL HEALTH CONFERENCE

This year will mark the 8th NSW Transcultural Mental Health Conference and for the first time this conference has been incorporated as part of The Mental Health Services (TheMHS) Annual Conference.

The Transcultural Mental Health Conference – Better Mental Health for All will showcase a range of papers to inform consumers, carers and professionals working in the field of mental health on the current mental health needs of Australia’s culturally and linguistically diverse (CALD) communities. The conference will also highlight recent research, evaluation and evidence-based examples of best practice service delivery models of care for CALD communities.

Participants at the conference will benefit from the insights of high profile mental health experts including the internationally renowned Professor Derrick Silove and Giuseppe Dell’Acqua who will give keynote addresses.

Professor Silove holds a number of international academic positions, and has been involved for many years in developing policy, research and clinical services in relation to refugee and other conflict-affected populations in Australia and internationally. He has made extensive contributions to the understanding of mass trauma on the psychosocial well-being of survivor populations living in diverse contexts and cultural settings. Professor Silove will focus his keynote address on what we have learnt in Australia and his thoughts on future directions.

Giuseppe Dell’Acqua is the Director of the Department of Mental Health in Trieste, Italy. He is also the author of several books and has written on the topics of schizophrenia and psychiatric reforms in Italy. Giuseppe’s keynote address will focus on the mental health reforms that have occurred in Italy over the past two decades and will also touch on his work with new and emerging communities groups in Italy.

The 2010 The MHS conference will be held on 14–17 September at the Sydney Convention and Exhibition Centre. For more information, please visit www.themhs.org
**Release of ECT Standards**

Electroconvulsive therapy (ECT) is the most political, controversial treatment in psychiatry – and the most powerful treatment for people suffering severe mood disorders.

To improve the quality of the administration of ECT, NSW Health has recently developed a suite of ECT Standards. The standards provide a clear and comprehensive description of best practice in the administration of ECT.

Dr Adrian Keller, Chair, NSW Branch, RANZCP says: “Patients and their families, as well as the general community, can feel confident that this important piece of work will contribute to improvements in the safety and quality of care, whenever ECT is delivered”.

**Training and Education Resources**

As part of this initiative, a training and education package for Area Mental Health Staff (AMHS) and clinicians supports the delivery of short local workshops on key aspects of physical health care for mental health consumers and provides an on-line training course based on the Physical Health Care of Mental Health Consumers Guidelines. (See Page 4 for details)

A web resource portal is also being finalised that will bring together a range of resources, links and information and provides access to the on-line training.

For more information, contact Rochelle Kelly, Senior Policy Officer, MHDAO on rkell@doh.health.nsw.gov.au

**MHDAO Research Information**

Research on mental health and neurological diseases, including addictions, has broad benefits for hospitals and health systems. It helps to attract and retain the best clinicians, in turn fostering best practice. The NSW Health Mental Health and Drug and Alcohol Office supports research to provide a knowledge base for program and policy development.

Information on research funded through the Mental Health and Drug & Alcohol Program areas, including relevant Frameworks and links to publications can be found at www.health.nsw.gov.au/mhdao/research or if you would like further information please contact Tricia O’Riordan, A/Manager Research and Health System Development on 02 9391 9338 or via email torio@doh.health.nsw.gov.au

**Talent Spotting**

Play Now Act Now is on again in 2010 and on the lookout for the hottest young and emerging talent, aged 16 to 25, in NSW.

Now in its eighth year, Play Now Act Now is an innovative and exciting public health partnership between NSW Health and Metroscreen; driving information and education through a creative competition that allows young people to explore the impact drugs and alcohol have on their lives.

With monthly competitions taking place in June, July, August and September, young people are invited to submit creative works online in three categories: Short Film, Digital Design and Microfiction. Winners can take home a share of $15,000 cash and prizes. For more information go to www.playnowactnow.com.au

**NSW Transport Workers Support Line**

MHDAO has funded a 12-month pilot project of the NSW Transport Workers Support Line 1300 374 837 that commenced 1 July 2010.

Based at the Alcohol and Drug Information Service (ADIS), St Vincent’s Hospital, the Support Line will provide transport workers with assistance 24-hours/7days to reduce the harms of smoking, alcohol and other drug issues.

---

**UPCOMING CONFERENCES**

**Better Mental Health for All – The 8th NSW Transcultural Mental Health Conference**

The 2010 TheMHS conference will be held on 14-17 September at the Sydney Convention and Exhibition Centre. For more information, please visit www.themhs.org

**2010 Creating Synergy Drug and Alcohol Conference**

Between 3–5 November 2010, is the 2010 Creating Synergy Drug and Alcohol Conference at Wollongong University. Registrations are open and, as in previous years, the Creating Synergy Committee is providing an affordable conference for people working in the field. For more information on the conference, please go to www.creatingsynergy.org.au

**CONFERENCE PRESENTATIONS**

Congratulations to staff from the Information and Education team who presented some aspects of our work for an interstate audience at the following conference in 2010:

**National Indigenous Drug and Alcohol Conference, Adelaide**

Amanda Holt, Guides to dealing with Grog.