



**SANDAS Response to the:
Adelaide PHN Engagement with Alcohol and other Drugs
Stakeholders Briefing Paper**

Due Friday 16 September 2016

INTRODUCTION

SANDAS is the peak organisation for the nongovernment alcohol and other drugs sector in SA.

SANDAS represents over 30 organisational members that provide a broad range of services including drug and alcohol health promotion, early intervention, treatment, and after-care programs. These community based organisations operate throughout South Australia. They comprise both large and small services that are diverse in their structure, philosophy and approach to drug and alcohol service delivery. SANDAS also has individual members who have an interest in alcohol and other drug treatment in South Australia.

SANDAS's vision is to lead and strengthen community responses to the harms caused by alcohol and other drugs.

SANDAS facilitates networking, collaboration, research, information sharing, advocacy, training and policy reviews to reduce the harmful impacts of alcohol and other drugs. We are the voice of our members at national and state levels.

SANDAS is governed by a Board of Directors elected from the SANDAS membership.

Further information about SANDAS, its programs and services is available on the SANDAS website at www.sandas.org.au.

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Response to the Adelaide PHN Engagement with AOD Stakeholders Briefing Paper

In December 2015, the Commonwealth Government announced new funding for alcohol and other drug treatment services under the Taking Action to Combat Ice initiative, with commissioning of these services to be undertaken regionally by PHNs. With the announcement of the new funding, and the likelihood of PHNs being responsible for further funding to the AOD sector in the future, the Adelaide PHN has identified that the AOD sector should become a specific and distinct stakeholder for the Adelaide PHN.

Consistent with the discussion at the APHN AOD Consultation, SANDAS believes the best method for the AOD sector to be represented is by a stand-alone AOD Health Priority Group. SANDAS does not support the establishment of an AOD Reference Group as proposed in the Briefing Paper on the following grounds:

- An AOD Reference Group was not considered as an option at the consultation and has not been considered by the AOD sector. Further, it is understood that responses to this consultation paper have not been sought from the broader AOD sector but is limited to existing HPGs and Councils. This means that the AOD sector has limited input into the final decision making process about its representation.
- The majority of the approximately 60 participants at the AOD Consultation expressed overwhelming support for Option 2 Establish a Separate AOD HPG. Participants who supported the establishment of an AOD HPG represented a significant number of non-government AOD services in Adelaide.
- The AOD sector should be represented at the same level and through the same mechanisms as other sectors with equal standing within the PHN governance model. The proposed reference group would advise and report to the APHN Executive. Whilst all other committees/HPGs have a clear line to the APHN Board this is not apparent for the proposed AOD Reference Group. It is not clear that a Reference Group would have a vote commensurate with HPGs or Clinical Councils.
- Whilst AOD is a significant issue for many complex clients, it is no more 'cross cutting' than any more than other issue represented by a HPG (e.g., mental health, age, culture, disability etc). Consequently, we would maintain that AOD should be treated in the same way as these other issues, through representation by an AOD HPG.
- Membership of an AOD HPG would include current AOD service providers, the peak body and community members with lived experience (direct or as a carer, family member or significant other) consistent with other HPGs.
- Consistent with the expectations for other HPGs, the AOD HPG would provide Adelaide PHN with genuine and honest feedback about the strengths and challenges of the current service delivery system, performance and service delivery gaps, future improvements, strategic planning, community concerns/issues and funding needs as appropriate.
- An AOD HPG would best support the service sector, consumers and carers to develop collaborative relationships with Adelaide PHN.

- The consultation document does not make clear the mechanisms through which an AOD Reference Group could provide AOD related advice/input into the 7 HPGs, the 3 regional Community Advisory Councils and the 3 regional Clinical Councils. It may require considerably more input from the AOD sector to provide input/representation to all these groups. SANDAS believes that all HPGs and Councils should have a role in supporting each other to understand and address the issues facing them, both shared and distinct.
- While it is not confirmed, it is likely that in future the Australian Government will flow service delivery and service improvement funds through the PHN commissioning process. If this is the case it is essential that AOD is on the same footing as other funded sectors and has equal representation in the APHN governance structure and a similar line of communication to the APHN Board.

Finally it is worth noting that a HPG will not replicate the role of a peak body. The role of SANDAS as a peak body is to represent non-government organisations and individuals involved in service delivery within the non-government AOD sector, to a broad range of stakeholders, associated sectors, government and funding bodies. We do not directly represent service users, families, carers, wider community members or government departments (state or federal) that deliver AOD services and may have representation on an AOD HPG.

Recommendation:

That consistent with the intent of AOD representatives as expressed at the AOD consultation and the advice of the SANDAS Board, the APHN establish an AOD HPG.