



Turning Point
Alcohol & Drug Centre

Quality Framework Model ATCA Conference 2013

Associate Professor David Best:
Turning Point Alcohol and Drug
Centre





Project introduction



- The Australian Government, Department of Health has commissioned the Turning Point Drug and Alcohol Centre to continue the development of a quality framework for Australian Government funded drug and alcohol treatment services over the next twelve months.
 - The quality framework aims to complement work completed or currently underway by governments within the drug and alcohol treatment services sector, to better understand and improve service quality and inform future planning needs.
 - The intention is for the quality framework to be developed in collaboration with the alcohol and other drug sector and lead the drive towards quality improvements in AOD treatment service delivery and improved client outcomes.
-



Acknowledgements



- Department of Health
 - Consortium members
 - Professor Steve Allsop
 - Dr Stefan Gruenart
 - Associate Professor Lynne Magor-Blatch
 - Jigi Lucas
 - Wendy Casey
 - Dr Mark DGLISH
-



Areas to be covered



- Current thinking in quality assurance and the development of quality models
 - Outline of project specification
 - Range of services to be covered
 - Draft Quality Framework Model
 - Methods
 - Partnerships
-



Background



- There were around 150,000 closed episodes of alcohol and other drug (AOD) treatment in Australia in 2010/11 (1).
- There is large variability in the types of organisations providing AOD services and treatment modes used across Australia (1).
- This diversity indicates the need for a national system to assure the quality of treatment services.
- This is echoed by The National Drug Strategy which lays out a number of structural priorities including “planning and quality frameworks for treatment services.... to incorporate evidence into successful drug treatments” (2)

(1) Australian Institute of Health and Welfare (2012). *Alcohol and Other Drug Treatment Services National Minimum Data Set 2012-13: specifications and collection manual*. Drug treatment series no. 17. Cat. no. HSE 123. Canberra: AIHW.

(2) Ministerial Council on Drug Strategy (2011). *National Drug Strategy 2010 – 2015*. Canberra: Commonwealth of Australia.



Current Commonwealth



funding



Turning Point
Alcohol & Drug Centre

- A wide variety of treatment services, programs and projects are funded nationally
 - From large national and international organisations to very small NGOs
 - This has impact on capacity to bear financial and human resource burden of accreditation
 - What standards?
 - What processes for ensuring best practice and implementation fidelity?
-



Issues to be addressed



- Determining a method: such as guidelines for guidelines, determining evidence to assess effectiveness, expert consensus
- Problems include inter-observer reliability in interpretation of guidelines, limited applicability of recommendations and unknown effects on patient outcomes
- Problems of translation to field settings
Schaub and Uchtenhagen (2013)





EU Framework for Minimum Quality



Standards and Benchmarks



QUALITY OF INTERVENTION

- Having intended effects
- Minimising unintended effects
- Making best use of resources

QUALITY OF A SERVICE

- Having adequate resources
- Having clear instructions for staff to follow
- Having a satisfactory rate of positive outcomes
- Satisfactory ratio between resources and population served





EU Framework for Minimum Quality Standards and Benchmarks



QUALITY OF A SYSTEM

- Complying with the legal and ethical framework
- Satisfactory cooperation between services
- Satisfactory coverage of the population in need
- Having a satisfactory ratio between resources and overall intervention effectiveness





EQUS model



Turning Point
Alcohol & Drug Centre

	LEVEL 1: INTERVENTIONS	LEVEL 2: SERVICES	LEVEL 3: SYSTEMS AND POLICIES
STRUCTURAL QUALITY	Type of settings needed for interventions	Resource standards	Legal and ethical adequacy standards
PROCESS QUALITY	Implementation standards	Procedural standards	Standards for networking and cooperation among services
OUTCOME QUALITY	Effectiveness standards	Effectiveness standards	Coverage standards
BENCHMARKS	Cost-benefit ratio	Cost-utilisation ratio	Cost-effectiveness ratio



Current approaches



- Current approaches to quality assurance within the AOD sector across states and territories vary considerably.
- WA is the only state to have developed a specific quality framework for the AOD sector: The Standard on Culturally Secure Practice (Alcohol and other Drug Sector) (3).
- Contains seven performance expectations, each comprised of between 1 and 8 standards:
 - Defining and understanding the target community; Rights & responsibilities; Consumer-focussed practice; Evidence-based practice; Staffing, development & support; Agency management; Organisational governance.

(3) WANADA (2012). The Standard on Culturally Secure Practice (Alcohol and other Drug Sector). Perth. Western Australian Network of Alcohol and other Drug Agencies (WANADA).



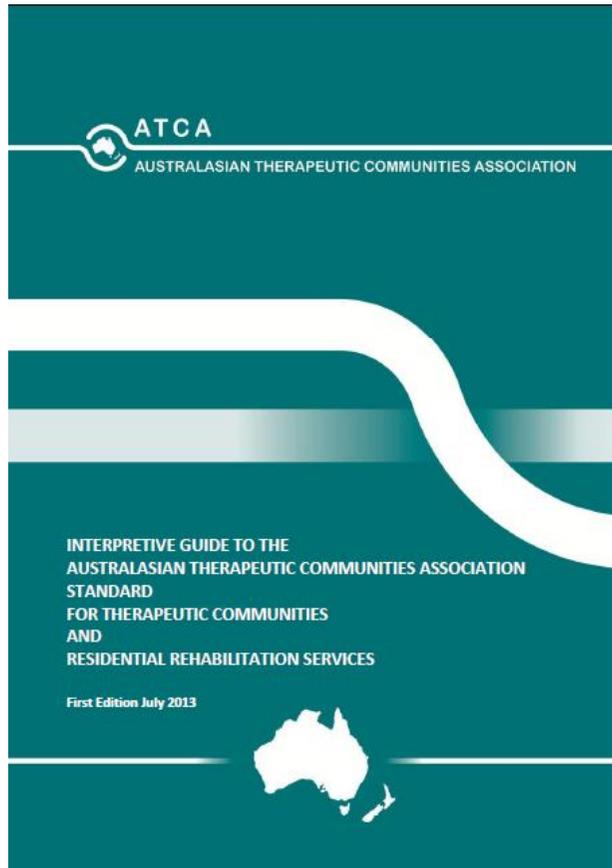
Current approaches



- In the absence of stand alone AOD quality frameworks, services frequently utilise other primary health quality accreditation bodies.
 - E.g. Turning Point has recently been assessed against the 10 National HealthCare Standards and 5 EQulP standards.
 - In essence this means assessment against 256 indicators
- The objective of the Quality Framework project is to develop a framework that describes nationally consistent standards for the delivery of best practice quality alcohol and other drug treatment services.



Current approaches – ATCA standards



- Appropriate and timely service provision;
- Leadership and management principles;
- Consumer participation;
- Strategic human resource management;
- Information management and appropriate use/evaluation of data;
- Holistic health approach; and
- Continuous quality improvement.



Draft Quality Framework



Model – principles



- Build on existing learning
 - Build a collaborative partnership
 - Do not add to burden
 - Celebrate achievements
 - Build evidence-based practice
 - Identify gaps
 - Build a consensus
 - Improve the consistency and quality of the client experience
-



Draft Quality Framework



Model – what is the aim?



For Commonwealth funded services:

- Ensure basic organisational standards and appropriate certification
- Analyse the translation of generic health standards to the needs of the AOD field – system, service and intervention levels
- Apply these within the frameworks established in each jurisdiction
- Assess against best practice indicators for populations and for treatment types



Draft Quality Framework Model



- The framework rests on the assumption that the delivery of quality assured and evidence-based practice requires evidence of activity at three levels:
 - Level 1: Organisational standards
 - Level 2: Organisational standards applied to working with AOD populations
 - Level 3: Service specific standards
 - Context
 - Population
 - Treatment type



Level 1:
Organisational
requirements

All organisations should have generic QA activities relating to organisational governance and management

- Leadership and management
- Physical resources
- Financial management
- Knowledge management
- Risk assessment and management
- Legal and regulatory compliance

Level 2:
AOD specific
requirements

Additionally, all organisations should have QA activities specifically related to their AOD service provision

- Consumer, carer & community involvement
- Evidence-based practice
- Co-ordination with external organisations
- Diversity responsiveness
- Individualised provision of care
- Service access
- Workforce planning, development & support

Level 3:
Service specific
indicators of
good practice

Depending on the LOCATION of the service, POPULATIONS served or MODALITY of services provided, additional quality assurance activities might be appropriate:

3a: LOCATION

ACT
NSW
NT
QLD
SA
TAS
VIC
WA

3b: POPULATIONS

Aboriginal & Torres Strait
Islander
Adult
CALD (Culturally &
Linguistically Diverse)
Comorbid mental illness
GLBTI
Older adults
Veterans
Youth

3c: MODALITY

Prevention, health promotion and addressing stigma and discrimination
Harm reduction
Early identification and intervention
Provision of information, engagement and linkage supports
Problem identification, assessment of strengths and needs, and individualised treatment and support planning
Delivery of substance use and specific and biophysical interventions and supports
Continuing care / recovery monitoring
Delivery of substance use specific and highly integrated psychosocial, medical and psychiatric interventions and supports



DQF process - partnership



- Department of Health and jurisdictional offices – review of contracts
 - Peak bodies
 - State health departments
 - Providers
 - Experts and stakeholders
-



DQF process – Phase 1



process



Turning Point
Alcohol & Drug Centre

- Literature review
- 2-day site visits
 - Peaks / state health / providers
 - Jurisdictional mapping of quality standards and good practice models
 - Innovation and implementation experience
- Survey of providers
- Synthesis of materials
- Gap analysis



DQF process – Phase 2



process



Turning Point
Alcohol & Drug Centre

- Overall Expert Advisory Group
- EAGs to address specific modalities and populations based on the gaps
- Draft QFM
- Second jurisdictional visits
- Development of an appropriate implementation plan will be considered and discussed during the second round of jurisdictional visits and final consultations
- The Project Team will then report and provide an agreed final quality framework model and initial implementation plan to the Commonwealth for consideration



THANK YOU



TO OUR PROJECT TEAM

- TO YOU FOR LISTENING

- Dr Mairtin McDermott (Research Fellow)
- Sarah Flynn (Research Administrator)
- Melissa Elliott (TP quality lead)
- Professor Dan Lubman (Director)

Davidb@turningpoint.org.au; David.best@monash.edu

Mairtinm@turningpoint.org.au; sarah.flynn@turningpoint.org.au