

HUME REGION Alcohol and other Drugs Strategic Plan 2003 - 2006



TURNING EVIDENCE INTO PRACTICE

Hume Region -context

The Hume region is composed of 12 local government areas covering north eastern Victoria and the Goulburn Valley.

The regions population is approx. 256,000 persons with major concentrations in Shepparton, Wodonga, Wangaratta, Benalla and Seymour.

Physical features – the region is defined by Great Dividing Range in the east and Murray River in the north with the Goulburn Valley area to the west.

Hume Region – map with boundaries

- Add map here

Unique features of Hume Region.

- Significant ATSI population mainly in Shepparton
- No major centre but a number of centres
- Cross border issues with NSW along Murray River
- Growth in Wodonga, Shepparton and Mitchell Shire –younger population profile
- Stable/declining population in outlying areas
- CALD presence – new arrivals in Shepparton/Cobram - Iraqi population.
- Regional economy is mix of primary production transport, service sector, administration and tourism.

Alcohol and Drug Service Profile – Hume Region

- Alcohol and Drug Treatment services are predominantly delivered through the region's four Community Health Services
- Total budget is approx. \$3.3m
- Workforce in sector – approx 46 persons

Hume region –AOD Strategic Plan - Implementation

- AOD plan launched in May 2004
- Plan contains 54 strategies under 6 key directions
- Direction 6 “Enhancing the quality and availability of drug and alcohol data”
- Implementation committee established to guide the plans implementation
- Slender resource base
- City of Greater Shepparton identified “minimisation of drug and alcohol misuse” has a key goal in their Municipal Public Health Plan
- Provided opportunity for a joint approach to Turning Point.

Turning research into practice –where we are

- The Turning Point profile highlights a number of areas which have tended not be addressed at the regional level.

For instance:

- Working with hospitals in Hume Region
- Stronger health promotion approach
- Capacity and approaches in reaching other population groupings
- Stronger partnerships with the wider sector including internal DHS programs, local govt.and other relevant govt.departments.

AOD Projects informed by the profile. Alcohol Screening in public hospitals.

- **Introduction of alcohol screening tool [AUDIT] and brief interventions in Wangaratta and Wodonga hospitals.**
- **Both hospitals have been funded for two years to trial the AUDIT screening tool for Emergency departments and admitted patients.**
- **Pilot is being conducted in conjunction with local Drug Treatment Services and in the case of North Eastern Health [Wangaratta Base] the strong support of the Mental Health team**
- **The AUDIT questionnaire is voluntary and will be offered to all presenting patients. A Brief Intervention will be provided to patients who screen positive for alcohol misuse with the option of a referral to the local drug treatment service.**
- **A important component of this trial is raising nursing staff awareness re health impacts of AOD and better linkages to DTS.**
- **It was decided to focus initially on alcohol given resource levels etc**

Drunk Disorderly Diversion –Triple D

– Goulburn Valley CHS and Shepparton Police

- The City of Greater Shepparton has an active and vibrant nightlife at weekends.
- This has led to concerns for public safety and wellbeing.
- This project aims to offer assessment of and brief treatment to those people who have been charged with the summary offence of drunk and disorderly.
- The project aims to strengthen relationships between Community Health, Police, Ambulance and Local Govt.
- Participation is voluntary

AOD Health Promotion Initiatives.

- Goulburn Valley Primary Care Partnership working with GPs to encourage referring to QUIT.
- Identification of “reducing of harmful affects of alcohol and tobacco” in PCPs Health promotion plans.
- Ovens and King CHS working with schools, Education Dept. and Police in developing a drug education program in secondary schools.

Evidence into Practice - Challenges

- Need for local information to inform data eg Benalla Rural City rating highest for alcohol and illicit related hospitalisation.
- How does a Drug Treatment Service respond to tobacco addiction?
- Given population slant in DTS's to younger persons ie 20-34 years, how do we ensure that services are responsive to middle and older years ?
- Silos – DHS funded services are not the only providers with an interest in AOD. Role of local government, VicPol and sporting clubs through RSAs.
- The AOD Strategic Plan was directed at strengthening the AOD service sector as opposed to addressing AOD issues within the community.