

NADA Member Needs Assessment Responding to the needs of members

November 2022

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for the non government alcohol and other drugs sector in NSW. We represent close to 80 organisational members that provide services in over 100 locations across NSW. They provide a broad range of services including health promotion and harm reduction, early intervention, treatment and continuing care programs. Together, we improve the health and wellbeing of people who use, or have used, alcohol and other drugs across the NSW community.

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ABOUT NADA

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for non government alcohol and other drugs services in NSW. We advocate for, strengthen and support the sector. As a member driven peak body, NADA's decisions and actions are informed by the experiences, knowledge and concerns of its membership.

We represent close to 80 organisational members that provide services in over 100 locations across NSW. They provide a broad range of alcohol and other drugs services including health promotion and harm reduction, early intervention, treatment and continuing care programs. Our members are diverse in their structure, philosophy and approach to alcohol and other drugs service delivery.

We provide a range of programs and services that focus on sector and workforce development, data management, governance and management support, research and evaluation, sector representation and advocacy, and actively contributing to public health policy.

Together, we improve the health and wellbeing of people who use, or have used, alcohol and other drugs. NADA has award level accreditation under the Australian Services Excellence Standards (ASES), a quality framework certified by Quality Innovation and Performance (QIP).

To learn more, visit <u>www.nada.org.au</u>.

PREPARATION OF THIS ASSESSMENT

The purpose of the needs assessment is to inform the development of NADA's programs, services and advocacy. NADA has compiled this document on behalf of its members.

This assessment has been undertaken through the annual NADA member and workforce surveys and regular engagement with members and member networks. A content analysis was undertaken with qualitative feedback provided by NADA members. Additional information collected via our NADA's strategic planning consultation process has been included, where relevant and appropriate. Comparisons with the Needs Assessment from 2021 are also included. Additional information was received from members at the NADA 2022 Annual General Meeting and results were then validated.

NADA contact for this assessment

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POLICY AND ADVOCACY NEEDS

What were the priorities and recommendations in 2021?

The top three priorities included:

- Increased and sustainable funding
- Improving NGO contracts and compliance
- Increased access to services and improved referral pathways

The recommendations included:

- 1. NADA to use the following advocacy points on behalf of members when meeting with Ministers, government departments and key stakeholders:
 - Implementation of the recommendations of The Special Commission of Inquiry into the Drug 'Ice'
 - Increased and sustainable funding
 - Improved contracts and compliance
 - Increase access to service delivery and improved referral pathways (e.g. mental health, housing).
- 2. NADA to respond to drug policy issues that impact people who access AOD treatment, to address the impact of stigma and discrimination and the impact of penalties and criminal records on access to treatment, future employment and housing.
- 3. NADA to provide resources to support member advocacy as part of the NADA Advocacy Toolkit.

NADA's activity in response to the recommendations. Examples include:

- Continued advocacy with the NSW Government to respond to the recommendations of The Special Commission of Inquiry into the Drug 'Ice' and the need for a whole-of-government AOD strategy in NSW.
- Meeting with funders to request implementation of standard set of indicators across NGO AOD contracts as a recommendation of the Performance Measurement Study.
- Request NSW Ministry of Health to release the Business and Funding Model Study Report and consult with members on how this will be used to improve approach to NGO AOD funding.
- A submission to the new <u>National Alcohol and other Drugs Workforce Development Strategy</u> and an issues paper <u>Challenges and opportunities for the non government AOD workforce</u> including advocating for strategies to attract, develop and support the workforce.
- Called for all NGO AOD funders to match wage increases and consistently apply indexation at a level that reflects real costs.
- NADA provided a range of other policy and advocacy activities available on the NADA website.

Analysis of 2022 data:

The top three priority areas for policy and advocacy identified by members included:

- 1. NSW Government response to the Special Commission of Inquiry into the Drug 'Ice'
- 2. Increased and continuous funding, with a focus on i) supporting AOD workforce attraction, support,
 - development, innovation and retention and ii) funding technology support and advancement.
- 3. Improved NGO contracts and compliance
- **NSW Government response to The Special Commission of Inquiry into the Drug 'Ice'** and for the implementation of recommendations from this inquiry. Interestingly, the remaining priorities below are reflected in the inquiry recommendations.

'Advocate for a response to the Special Commission, not just for more treatment places, but for systems change'

'Implementing recommendations from Ice Inquiry'

• Increased and continuous funding continues to be a top advocacy priority, with feedback calling for funding increases to a range of particular program types and priority populations. The need for consistent annual **application of indexation** was also raised to ensure funding covers the rising costs of wages and other program related expenses. Members also discussed the relationship with the Commonwealth as well as impact of the upcoming state election as opportunities for advocacy.

'continued funding', 'increased funding' and 'funding and contractual certainty'

'increases in indexation year by year to address increasing cost of both wages and other program related expenses'

'investing in our technology is key to service delivery and staff retention'

• Improved NGO contracts and compliance remains an important issue requiring advocacy. Members seek funding certainty through long term and rolling contracts which would also reduce reporting burden and administration. Contract arrangements were also linked to the ability to attract and retain staff. Establishing a register of AOD treatment providers was suggested as a means to reduce burden of tender applications.

'Less reporting and admin from funding bodies'

'Longer term contracts to enc(ourage) workers to stay long term'

• Improved service access and referral pathways was raised as an ongoing priority with the need for increased access to services, simplified referral processes as well as increased awareness of available services. Availability of youth rehabilitation programs, withdrawal services and earlier support for people prior to exiting custody were important for members. Collaboration and ease of referral across sectors, such as mental health, housing and criminal justice was highlighted along with improved transfer of care between public and non government services.

'Referral pathways and access to AOD support - simplified referral'

'increasing awareness within DCJ of how the NGO sector is comprised and operates to foster a consistent and bilaterally respectful relationship in support of clients'

'improving housing access pathways for clients'

'improved referral pathways (e.g., mental health, housing)'

• A **workforce strategy** for the sector including strategies to address current workforce issues. Particular reference was made to strategies to support the Aboriginal AOD workforce and peer workforce.

'Addressing workforce strategy for sector - especially Aboriginal workforce'

'workforce strategy that includes sufficient funding to provide worker wellbeing activities and initiatives in addition to wages for service delivery so that the worker wellbeing initiatives reduce worker fatigue and burnout and will in turn support improved client outcomes'

'Incentives for staff retention in AOD sector'

'Capacity building for lived experience workers' and 'peer led supervision'

'we are facing a workforce crisis that needs immediate attention'

'developing and supporting a peer workforce can help to future proof the sector'

Recommendations in the area of policy and advocacy

- 1. NADA will continue to advocate on the following advocacy priorities when meeting with Ministers, government departments and other key stakeholders:
 - Increased and continuous funding, including ensuring a strong and secure workforce
 - Improved NGO contracts and compliance
 - Improved service access and referral pathways
- 2. With the recent NSW Government response to The Special Commission of Inquiry into the Drug 'Ice' and accompanying funding investment, NADA will advocate to ensure that the views of the NSW NGO AOD sector are represented with NSW Government on the development and implementation of the NSW AOD whole of government strategy as well as to ensure the \$500m investment is allocated to priority areas identified within the NGO sector.
- 3. NADA will continue to advocate on the current workforce challenges and opportunities in the non government AOD sector. This will include collaboration with the NSW Ministry of Health in the development of a NSW AOD Workforce Development Action Plan, submitting feedback on draft National WFD Strategy and meetings with key stakeholders to seek action on strategies to attract, retain and support the workforce.

SERVICE DELIVERY NEEDS

What were the priorities and recommendations in 2021?

The top three priority areas included:

- Enhance continuity of care and collaboration, e.g., improved referral pathways across NADA member organisations and other service sectors, including Local Health Districts (LHDs), mental health
- Building service and workforce capacity
- Treatment access and equity, e.g., waiting times and intake, availability particularly in regional and rural areas

The recommendations included:

- 1. NADA to advocate to policymakers and funders on the range of service gaps and issues impacting service delivery for members linked to recommendations under *Policy and Advocacy* priorities.
- 2. NADA to continue supporting current member networks and focusing particularly on building networks to support regional and rural members and improve continuing care across the sector.
- 3. NADA to continue to deliver a range of sector capacity building activities to respond to member's needs.
- 4. NADA to continue to implement projects and activities based on the recommendations from the Access and Equity Study.
- 5. NADA to continue facilitating partnerships with related services and sectors, with a particular focus on LHD AOD services.

NADA's activity in response to the recommendations. Examples include:

- NADA organised and facilitated a cross sector forum that involved member services and DCJ child protection, housing, domestic and family violence, and Local Health District services in rural NSW (Dubbo).
- An edition of the Advocate was dedicated to exploring continuing care best practice.
- NADA facilitated a webinar for members that focused on ways to support people accessing AOD treatment who are experiencing homelessness or at risk of homelessness featuring member and cross sector housing services.
- Development of practice guides on Residential Rehabilitation and Engaging men who perpetrate Domestic and Family Violence with associated training events.
- NADA facilitated regular network meetings for the continuing coordinated care programs, women's and youth network.
- NADA co-facilitated two cross-sector Roundtables with DCJ child protection, MOH and NADA members women's specific residential services.

Analysis of 2022 data:

The top three priority areas for service delivery identified by members included:

- 1. Building service and workforce capacity through training opportunities
- 2. Building the peer and Aboriginal workforce
- 3. Enhance referral pathways and collaboration between health and human services eg: between member services, mental health, criminal justice

 Members highlighted that *building service and workforce capacity* was the most important area for development. Members stated that they would like greater access to training and workforce capacity activities, particularly in areas including worker wellbeing, working with gender and sexuality diverse people, cultural awareness and mental health. Networking opportunities were also raised as valuable are available via training, events and NADA networks.

"Tailored training on self-care for AOD workers" "Self care and vicarious trauma training for workers" "Gender diverse training" and "LGBTQI support" "Dual diagnosis training" "mental health and drug use" "continued networking activities"

• Members also reported building **consumer engagement and the peer and Aboriginal workforce** was important area for development. The need to develop a peer worker qualification for AOD was also noted.

"Peer work and consumer advocacy" "Aboriginal workforce" "Consumer engagement" "Supporting the peer workforce"

• **Enhancing referral pathways and collaboration between health and human services** was also stated as a priority for members. In particular the need for improved referral pathways and collaborative practice within the AOD sector and across NADA member organisations and mental health and criminal justice.

"Better collaboration between health and human services" "Pathways out of correctional settings and support within facilities requires partnerships" "Shared care with mental health and other service delivery partners"

Recommendations in the area of service delivery

1. NADA to continue to deliver a range of sector capacity building activities to respond to member needs, including those that support consumer engagement and the peer and Aboriginal workforces.

2. NADA to continue to provide ongoing training opportunities and support member networks.

3. NADA to continue facilitating partnerships with related services and sectors, with a focus on the mental health.

WORKFORCE NEEDS

What were the priorities and recommendations in 2021?

The top three priorities included:

- 1. Accessing a range of free workforce development opportunities for members
- 2. Enhancing manager and leaders capacity to undertake workforce attraction and retention
- 3. Continued workforce advocacy

Recommendations included:

- NADA continues to promote, provide and facilitate access to a range of free workforce development opportunities for members based on member needs, including but not limited to the ongoing provision of NADA's Workforce Development Training Grants program and ensuring access to networking and professional development opportunities for regional and rural members.
- 2. NADA explore the needs of managers and leaders in undertaking workforce attraction and retention.
- 3. NADA continues to advocate for the workforce needs of members, including but not limited to advocating for sustainable funding and ensuring the availability of appropriately qualified and experienced staff to meet service demands.

NADA's activity in response to the recommendations. Examples include:

- Delivering training opportunities through webinars on various topics including; how to use ATOP in clinical practice, consumer participation in action, the use of take home naloxone.
- Hosting a hybrid forum hosted by the NADA practice Leadership Group (NPLG) on enhancing knowledge and skills to support best practice.
- NADA focussed on enhancing practice to support priority populations through access to Aboriginal Cultural Awareness training, the CALD Audit Project and a Gender and Sexuality Diverse and a project to build capacity to support people with co-occurring mental health needs.
- Supporting workforce through various wellbeing projects, the development of a resource for new workers to the AOD sector (jointly funded with the Ministry of Health) and launched the AOD 101 webinar series to improve AOD knowledge and worker confidence.
- Approved 41 training grants in 2022 FY covering areas of clinical development (MI, ACT, DBT), Aboriginal Culture and Trauma Informed Care.

Analysis of 2022 data:

The top three priorities for workforce development identified by members included:

- 1. Continued access to a range of free workforce and professional development opportunities for members.
- 2. Initiatives to support specific workforce attraction goals, staff retention, and wellbeing
- 3. Access to a range of organisational development initiatives, including a focus on technology advancement, support and required training.

Access to a range of free workforce and professional development opportunities remains the top priority for members again in 2022. This included providing, and facilitating access to education, training opportunities, and resources on:

- Enhancing capacity in responding to the needs of specific populations:
 - people from sexuality and gender diverse backgrounds

- people with a co-occurring mental health issues and suicide prevention
- people who are culturally and linguistically diverse
- Aboriginal people.
- Delivering specific modalities (counselling, case management, group work) and approaches (MI, CBT, DBT, Trauma informed care, family participation in treatment)
- Education and training on specific topics: including cultural awareness, clinical knowledge for frontline staff, blood-borne viruses, and significant interest in nicotine vaporizers
- Initiatives to increase capability and capacity of staff in:
 - · responding to clients presenting with complex needs,
 - developing community specific approaches to treatment and care,
 - understanding and supporting the positions they supervise/support

Members also highlighted the need for workforce development opportunities and resources that:

- have greater availability
- are available in various forms: webinars, F2F, self-paced e-learning,
- can be facilitated through grants program
- free of charge or undertaken with limited budget
- available to the public to support community development around AOD
- recommended for the needs of specific positions and pathways (i.e., frontline workers, staff transitioning from clinical practice into management)
- build or expand on existing NADA resources

Some specific responses included:

"Providing a framework that supports use of the capability framework as intended"

"Listening to community needs, as every community is different which requires alternate care and treatment"

"Supporting management workers to understand the positions they support."

"Short e-learning opportunities in specific mental health issues and what support workers can do to assist"

"Mentoring, coaching, and appropriate clinical supervision supported by funding."

"Continue workforce capacity and understanding regarding asking questions on LGBTQIA and first nations"

"The continuation of webinars to support with development and information sharing"

Supporting a range of Initiatives to achieve **specific workforce attraction goals, staff retention, and wellbeing** emerged as the second priority for members in 2022. Members discussed the 'talent drain' as a result of retirement from the sector and wage disparity with LHDs and other sectors such as mental health as part of the rationale for this priority area.

This included enhancing capacity in:

- Supporting growth of peer and Aboriginal workforces
- Attraction of clinical expertise to rural communities
- Attracting greater number of workers to AOD field
- Attracting a broader/ more diverse range of practitioners
- Support to identify and understand drivers of workforce retention
- Staff wellbeing, specifically:
 - Clinical and collective supervision
 - Self-care, employee assistance programs, HR support
 - Flexible work practices for frontline roles
 - Organisational transparency and accountability

Some specific responses included:

"Identify ways to make the sector more attractive to a broader range of practitioners" "Encourage more workers to the AOD field; possibly by more courses offered in AOD fields" "Understanding how to retain good workers"

Access to a range of **organisational development initiatives** emerged as the third priority for members in 2022.

This included enhancing capacity in:

- Clinical care standards in service delivery
- Growth of organisational data literacy to support improvements to service delivery and benchmarking
- Cross-service collaboration and relationship building
- Continued advocacy around stigma and discrimination
- Support and funding for technology advancement

Specific comments included:

"Data literacy, analysis and interpreting data to improve service delivery"

"Using data for benchmarking"

"Recognition of help from other drug organisations"

"Youth connection services"

Recommendations in the area of workforce:

- 1. NADA continues to promote, provide and facilitate access to a range of free workforce development opportunities for members based on identified needs, with a view to maximize accessibility through delivery frequency and mode.
- 2. Continuation of NADA's Workforce Development Training Grants program.
- 3. Support members to increase capability and capacity around data literacy for service delivery improvement and benchmarking.
- 4. Continue to advocate for and support development of peer and Aboriginal AOD workforces.
- 5. Continue to work with members to improve workforce attraction and retention, with a view toward the translation of research into practice.

RESEARCH AND DATA NEEDS

What were the priorities and recommendations in 2021?

The top three priorities included:

- 1. NADA to use the information to inform the NADAbase work plan, direct member support and capacity development activities to respond to members' data management needs. A communications plan should also be developed to communicate this body of work to members.
- 2. NADA to advocate to research bodies and funders on members' research and data systems priorities.
- 3. NADA to establish DATA and Research Leadership Group to provide guidance to NADA regarding data collection, reporting and research. This should include those working in the prevention and early intervention space to fully understand their needs.

Recommendations included:

- 1. NADA to use feedback to develop the 2022-2025 NADAbase work plan, inform direct member support and target capacity development activities to members' needs in managing and working with data.
- 2. NADA to continue to advocate to research bodies and funders on members' priorities in research, data systems and capacity building.
- 3. NADA to create and redevelop online resources as part of the NADAbase 101 series to target areas of need in research and data identified by members.

NADA's activity in response to the recommendations. Examples include:

- NADA hosted a Data Forum in March 2022 for members to share their current practice in data collection, analysis and evaluation. NADA also collected feedback on what member data collection support should look like over the next 5 to 10 years. This, alongside consultations with stakeholders, IT systems support and the NADAbase team, guided the formation of the NADAbase plan of action 2022-2023.
- Online training focussed on administering client outcome measures, including collecting the Australian Treatment Outcomes Profile (ATOP)
- Senior Research Officer role now has a formal affiliation with the University of Wollongong "Senior Research Fellow, University of Wollongong".
- Stronger relationships and collaboration with Client Management System (CMS) providers to advocate for changes in data collection and reporting

Analysis of 2022 data and member consultation:

The top three priority areas for research and data needs identified by members included:

- 1. Streamlining the reporting of Key Performance Indicators (KPI) to funders
- 2. Additional support for members in the use of data collection, including benchmarking as a strategy to improve service delivery.
- 3. Facilitate research to evaluate outcomes of people in AOD treatment services
- Members repeatedly highlighted the need for **reduced and/or streamlined reporting processes**. Having such varied Key Performance Indicators (KPI's) from funding bodies places unnecessary strain on members, particularly those with multiple funding streams.

"Meaningful data collection" "Reduced/streamlined KPI" "Minimizing of the Data reports" "Database that encapsulates all KPIs funders ask for"

• The need for additional support for members in the use of data collection, including benchmarking was another strong theme. Members reported requiring training on both collecting and interpreting data.

"Most members do need additional support in the use of the data they collect despite acknowledging all NADA has done so far"

"Training face to face for data entry "

"Training for existing workforce to better understand importance of data collection

trends in AOD treatment"

"Using data for benchmarking"

"Comparison of treatment outcomes and sustained recovery between day programs and counselling"

 Members also expressed interest in research to evaluate outcomes of people in AOD treatment services. In particular, members recommended that future research could benefit from measuring outcomes with priority populations, including children, women, clients with co-occurring needs and Aboriginal people.

"Longitudinal study on the outcomes of women and their children who had been in a residential rehab"

"...more longitudinal studies on recovery outcomes for clients"

"Outcomes for First Nations people following mainstream AOD treatment - how does it compare to outcomes from Aboriginal community controlled and delivered services and how to bridge the gap to ensure choice"

Recommendations in the area of data and research

- NADA to continue to advocate for streamlined reporting processes to reduce the burden on members.
- NADA to continue to support members in the provision of data collection and interpretation.
- NADA to continue to be guided by members for areas and opportunities for benchmarking and evaluation initiatives that focus on outcomes for people who access services.