

NADA Practice Leadership Group Terms of Reference

Establishment Date	8 July 2015			
Chairperson/s	Rotating chair			
Updates to:	NADA Board and Program Staff			
Terms of Office:	2 years	Date endorsed:	21 April 2021	
Version No:	2021	Next review:	April 2023	
Review Process:	Terms of reference will be reviewed biannually by the NADA Practice Leadership Group or where any significant changes are proposed and supported by the Group.			
Meeting frequency	Quarterly, and additional meetings as needed			

The NADA Practice Leadership Group (NPLG) was established in July 2015 and comprises 12 members representing a variety of specialist non government AOD treatment services. All members are clinical practitioners and considered leaders in the sector as evidenced by their professional backgrounds, accreditation status and clinical experience. The NPLG has 1 additional member representing research specialities. Where expertise in addiction medicine is required, the NPLG will invite a representative from the field to take part as a consulting member.

The overall aim of the NPLG is to inform the development of NADA policy and advocacy, and sector program development in relation to person-centred clinical and therapeutic practices. It will provide a mechanism of consultation with experienced, committed and skilled practitioners in advising NADA and other key stakeholders.

Vision

The vision of the NPLG is a diverse, responsive and evidence-based AOD treatment sector that is client-centred, integrated and sustainable. With the dual mission of both clinical leadership and capacity building, the membership of the NPLG will strive to support a culture of measureable treatment outcomes, reflective practice and the advancement of wellbeing for clients and communities in NSW.

Decision Making

Decisions will be reached by consensus. If this is not possible, then at least a two thirds majority agreement of meeting attendees is required – at the discretion of the Co-Chairs.

Rationale

The NADA Practice Leadership Group, referred to in this document as the NPLG, was inaugurated in July 2015. The rationale behind its establishment is for the provision of clinical support, leadership and consultation to the specialist non government alcohol and other drug (AOD) treatment sector in NSW.

Purpose

A primary function of the NPLG will be in the promotion of a professional and evidence-based specialist non government AOD treatment service sector. Furthermore, the NPLG will seek to increase the capacity of the

specialist non government AOD service sector to actively participate in shaping strategic directions at multiple State and Federal policy and planning levels.

NPLG Responsibilities and Functions:

Specifically the NPLG members will be responsible for:

- Participating in regular committee meetings upon commencement
- Determining priorities through sector and stakeholder consultation
- Overseeing the development and implementation of a work plan, and assessment of its effectiveness
- Establishing and leading specialist working groups
- Promoting the NPLG and contributing to an inclusive and collegial ethos
- Participating in program creation for NADA conferences and ad-hoc events, as needed

It is expected that all NPLG members will work together in a collaborative, respectful and collegiate way.

NPLG members are encouraged to participate and represent the NPLG at external meetings, such as at the NSW Health Quality in Treatment (QIT) Committee meeting and the NADA Advocacy Sub-Committee.

NADA's Responsibilities:

NADA has responsibility for providing secretariat support, communication and coordination of NPLG activities.

Reporting Relationships:

An update of NPLG work plan will be provided to the NADA Board and Program staff and may also be communicated to the ACI D&A Network. NADA has established feedback mechanisms between the NPLG and its other Networks; namely the Women's services AOD Network and Youth Network via its membership. NADA is also progressing communication links with AHMRC, ADAN and NARHDAN.

Method of Evaluation:

Biannual review of Terms of Reference against the NPLG Work Plan.

Quorum:

A quorum is required for all meetings of the NPLG representing 50% of the membership plus one. At least one Co-Chair must be present at each meeting.

Privacy and Confidentiality

Where discussions and/or information are tabled at a NPLG meeting that are of a sensitive nature they will be held in the strictest confidence – Chatham House Rules will apply.

Conflict of Interest:

It is the responsibility of all NPLG committee members to make any conflict of interest known to the Co-Chair. Where a committee member is deemed to have a real or perceived conflict of interest in a matter that is being considered at a meeting, the committee member may be excused from discussions and deliberations on the issue.

Membership:

The NPLG is comprised of 12 members representing a variety of specialist non government AOD treatment services – via expression of interest. All members are clinical practitioners and considered leaders in the sector as evidenced by their professional backgrounds, accreditation status and clinical experience. An additional member has been selected from academia, specialising in AOD treatment and research, and a further consulting member has been included who represents Addiction Medicine.

The NPLG accepts membership from practitioners identifying as gender and sexually diverse, from CALD backgrounds, and/or Aboriginal and Torres Strait Island populations.

Members may choose to leave the NPLG at any time. Whilst not official members of the NPLG, NADA Program Staff will also attend NPLG meetings.

Currently there are three members who also participate in related network meetings, namely Women's services AOD Network, Youth Network and Aboriginal Networks. These members will provide a specific point of communication link between the NPLG and the other networks.

Term

In order to both allow for continuity and new participation, NPLG members will be engaged for a 2-year term, with a request for confirmation of continued involvement at 18 months. An expression of interest for two additional members will be issued in May of each year for commencement in July of the same year, at which time two members will be asked to roll off.

Members will then be engaged in 24 month terms, with a review of continued involvement before the end of each term. Expressions of Interest will be called when a member resigns from their position with the NPLG.

List of Current NPLG Members – correct as at January 2023

Name	Position	Email	Contact
Belinda Volkov	Clinical Coordinator	belinda@sdecc.org.au	02 9977 0711
Danielle Breeze	Service Manager	danielle.b@kedesh.com.au	0438 060 328
Dylan Clay	Program Manager – Speak Out Dual Diagnosis Program	dylan@weave.org.au	0449 637 038
Carolyn Stubley	Nurse Manager	carolyns@whos.com.au	02 8572 7471
Emily Deans	Research Strategy & Design Coordinator	emily@youthsolutions.com.au	02 4628 2319
Lauren Mullaney	Senior Psychologist	MullaneyL@missionaustralia.com.au	02 4860 7404
Levii Griffiths	AOD Case Manager	leviig@haymarket.org.au	02 9197 9752
Michele Campbell	Group Manager Clinical Services	michele.campbell@liveslivedwell.org.a u	02 6362 5444
Peter Kelly	Deputy Head of School (Research), School of Psychology	pkelly@uow.edu.au	0403 756 987
Simone Angus-Carr	Programs Manager, Western Sydney	angus-carrs@noffs.org.au	0412 255 603
Sarah Etter	Clinical Director	Sarah@nada.org.au	0412 983 335
Stephanie Hocking	Director, Clinical Services and Programs	Stephanie.hocking@health.nsw.gov.au	0404 943 077