



Alcohol and other drugs at the primary care interface - Tasmanian Project ECHO

Wednesday 24 September 1-1.45pm

Acknowledgement of traditional owners

We acknowledge the Tasmanian Aboriginal people as the traditional owners and ongoing custodians of the land on which we are meeting today. We pay our respects to Elders past and present.

We would also like to acknowledge Aboriginal people who are joining us today.

Alcohol and other drugs at the primary care interface – Tasmanian ECHO

To strengthen primary care responses to alcohol and other drug use across Tasmania by connecting providers with specialist knowledge, fostering collaborative learning, and supporting integrated, evidence-

informed treatment approaches.





First, let's hear from you

Your name, location and practice/workplace

Now let's hear from our panel members

- Dr Nicolle Ait Khelifa, Statewide Specialty Director, Alcohol and Drug Service, Tasmanian Department of Health
- Dr Catherine Horan, GP, Alcohol and Drug Service, Tasmanian Health Service
- Monika Petschar, Social Worker, Allied health Workforce Development Consultant, Alcohol and Drug Service, Tasmanian Department of Health
- Dr Diane Hopper, GP and Medical Director, Aboriginal Health Service Tasmania

Working together agreement

Keep your cameras on

Use the raise hand function to speak

Listen, ask, suggest and support.







- Brief presentation overview of the current ADS Service in Tasmania
 - Questions or comments
- Case by participant today we will be hearing a case from our panel member
 Catherine in lieu of a case submission
 - Clarifying questions from participants
 - Clarifying questions from panel
 - Recommendations from participants
 - Recommendations from panel
- Announcements for next session and close

Dr Nicolle Ait Khelifa
Statewide Speciality Director
BMBS FRCPSYCH FRANZCP FACHAM AFRACMA

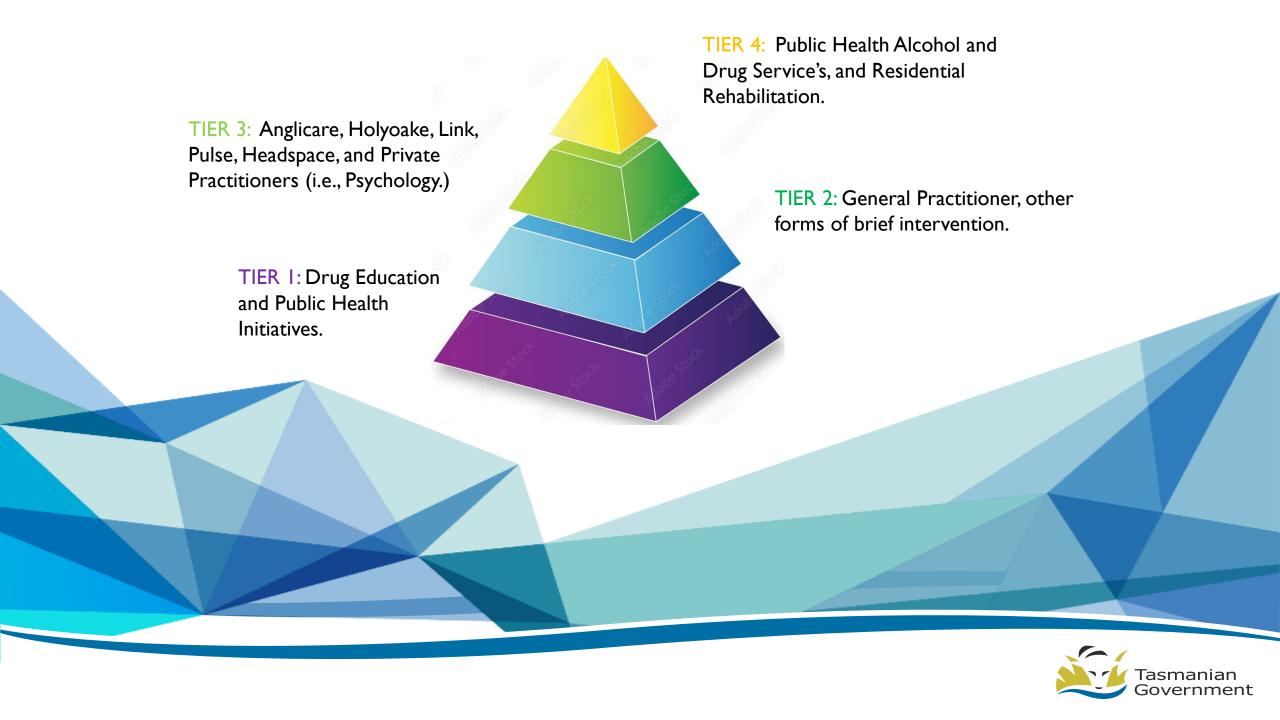




- The Alcohol and Drug Service is a statewide specialist service that provides treatment to individuals and their families for alcohol, tobacco and other drug issues.
- Our services are free, voluntary and confidential(within limits).
- We work under a harm minimisation model
- We believe in social justice and self-determination in that all people have the right to access treatment and to make and have control over their own life choices.







ADS Services

The Alcohol and Drug Service is a statewide service that provides treatment to individuals and their families for alcohol, tobacco and other drug issues.

Smoking Cessation

- Brief and Extended Intervention (Acute referrals ONLY)
 - Education

Consultation Liaison

Provides advice and information to services for treating alcohol and other drug issues.

- RHH
- LGH
- NWR and Mersey
- Homeless
- Prison

Inpatient Withdrawal Unit

Medically supervised withdrawal from AOD

Community

Outpatient (community based) treatment

Counselling / Therapy

- Ongoing counselling / therapy
- Brief Intervention
 - Secondary Consultation

Pharmacotherapy

- OpioidPharmacotherapy
- Alcohol
- Pharmacotherapy
- Pharmacy





Inpatient Withdrawal Management

Who are we and what do we do?

- Supervised withdrawal management with a full medical team (Medical Officers, Nurses, and Detox Officers).
- 24 hour care, in a safe, structured environment tailored for withdrawal management.
- Eligibility Criteria:
 - Planned Treatment
 - Adult (18+ years of age) *
 - Substance use at a severity that is appropriately matched for withdrawal management.
 - Confirmation of aftercare supports





Community Team

- Multidisciplinary team
- Drug and Alcohol Counselling, Therapy & Treatment
 - Youth and Adult
 - St John's Park, New Town; Mulgrave Street Launceston; Grove Street Ulverstone
 - Community outreach clinics





Pharmacotherapy (Opioid Replacement Treatment)

Who are we and what do we do?

- Treatment for individuals with opioid use disorder, by providing a substitute long-acting medication that stabilises the patient and disrupts the crisis-cycle of short-acting opioid use.
- Buprenorphine (Subutex / Suboxone), methadone, and LAIB.
- Supplemented with a case management model, with regular nurse and medical officer reviews.
- Eligibility Criteria:
 - Adult (18+ years of age) * younger clients need 2 specialists
 - Clear evidence of opioid use disorder





Numbers on ORT 2025

Methadone 214

LAIB 482

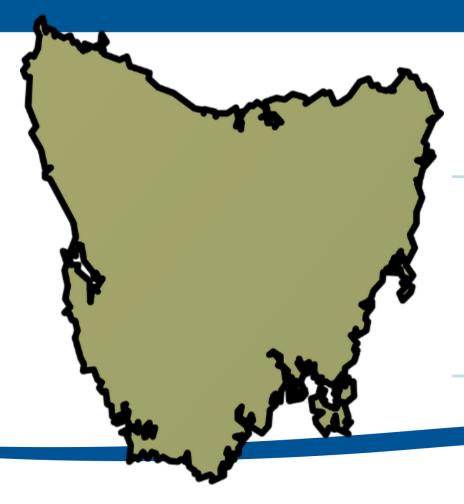
Suboxone 205

Subutex 49





Numbers in ORT treatment



North west 127

North 182

South 775



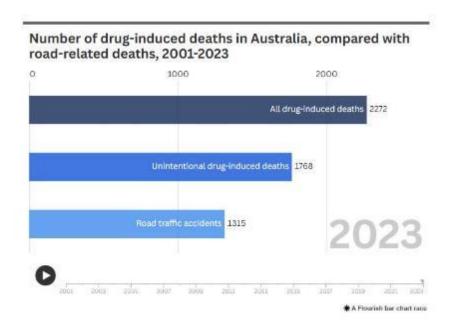


Ambulance attendances related AOD

Between 2021 and 2023 the rate of alcohol and drug-related ambulance attendances fluctuated across jurisdictions. Across all AOD attendances Tasmania had the largest increase (28.5%, from 777.5 per 100,000 population in 2021 to 998.9 in 2023), while the rate in the Australian Capital Territory decreased 14.7% (from 277.8 attendances per 100,000 in 2021 to 203.5 in 2023).

Amphetamine-related ambulance attendances increased across all states. Tasmania had the highest increase (94.7%, from 46.9 to 91.3 attendances per 100,000), followed by Queensland (49.8%, from 73.5 to 110.1 attendances per 100,000).

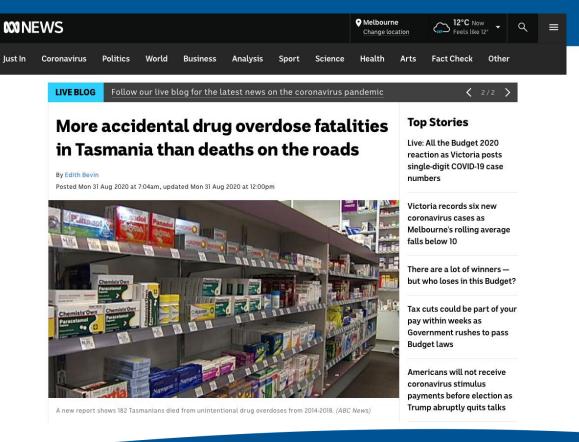
Pennington Institute 2025







Unintentional
Drug Induced
Deaths







Naloxone Prescribing

- 2 Easy to use preparations
 - Intranasal Naloxone 1.8mg
 - Naloxone prefilled syringe
- Both prescribable on PBS, free from some pharmacies without Rx
- Need education for patient/partner/family etc.
- Provide patient leaflet to support

https://www.health.nsw.gov.au/aod/programs/Factsheets/naloxone-factsheet-nyxoid.PDF

OR

https://www.penington.org.au/resources/cope-overdose-firstaid/





HOW TO REFER?

- If someone would like support with their alcohol or drug use they may be suitable for our service.
- We accept self-referrals or referrals from other agencies. We prefer agencies use our referral forms where possible. (available health pathways)
- We accept referrals via telephone, fax, email, or people can also walk in to speak to us in person.
- Anyone is welcome to contact us to make an enquiry or for an informal chat to see if our service may suit.





WHAT HAPPENS NEXT?

- After we receive a referral we contact the client and complete a brief intake assessment (usually by telephone) and discuss what our service can offer.
- Intakes are then discussed with the team to determine initial service suitability and to allocate the client for follow-up.
- The client would then be contacted and if suitable, a face-to-face appointment for a comprehensive assessment would be offered.
- Once completed, the assessment is shared with the team and treatment planning discussed. The client would then be allocated to a worker to commence treatment if suitable.
- Treatment can be as brief as one session or can be ongoing based on the client's needs and goals.
- There is no limit as to how many times a client can exit and return to our service.





ADS Northwest
11 Grove Street, Ulverstone
03 6464 3131

ADS North
13 Mulgrave Street, Launceston
03 6777 1234

ADS South
Clive Hamilton Building, St Johns Park, New Town
03 6166 0736

Drug and Alcohol Clinical Advisory Service (DACAS) after hours service for Tasmanian health professionals 1800 630 093





Discussion

Any questions from the audience?

Any additional comments from our panel?

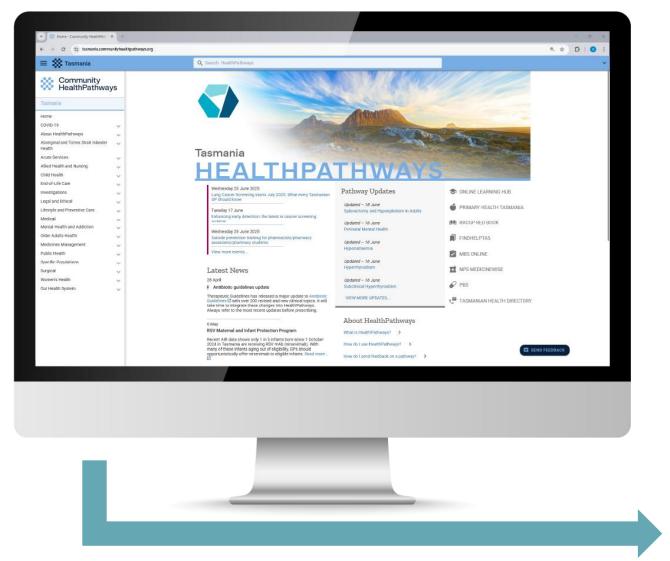




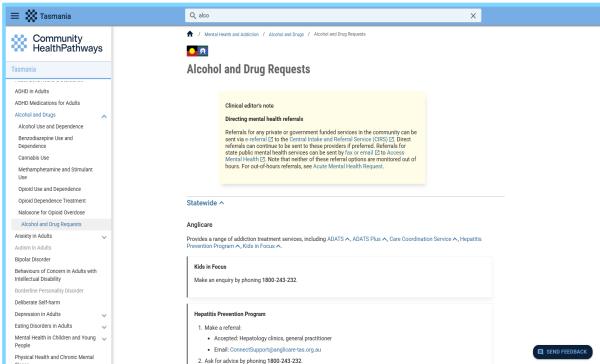
Tasmanian HealthPathways

is a web-based information portal developed by Primary Health Tasmania. It is designed to help primary care clinicians plan local patient care through primary, community and secondary healthcare systems.

tasmania.communityhealthpathways.org









To gain access to HealthPathways, please email healthpathways@primaryhealthtas.com.au

Some final words

For event queries, please contact <u>events@primaryhealthtas.com.au</u>



Thank you





Next Session: Wednesday 19 Nov 2025 1:00-1:45pm

Alcohol Use Disorders in Primary Care: Engagement,
Assessment and Management(TBC)







Stay informed



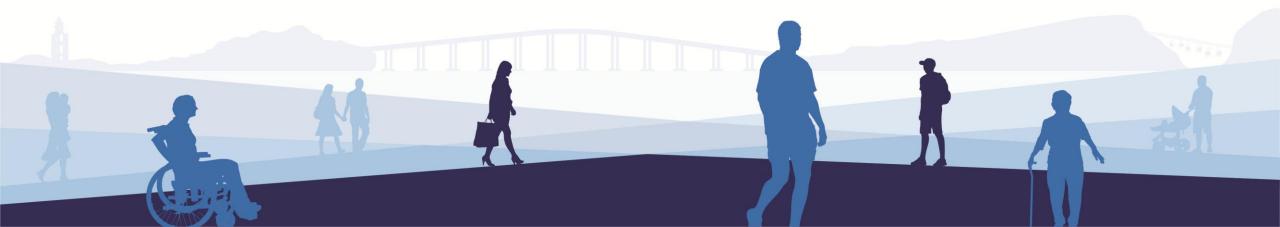
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