

**DRUG AND ALCOHOL  
TREATMENT  
ACTIVITY WORK PLAN  
2016 - 2019**

# Primary Health Networks

## Drug and Alcohol Treatment Activity Work Plan 2016-2019

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# Introduction

From 2016-17, PHNs will undertake drug and alcohol treatment planning, commissioning and contribution to coordination of services at a regional level, to improve sector efficiency and support better patient management across the continuum of care. PHNs will identify the appropriate service mix and evidence based treatment types suitable to meet the regional need.

The activities under the Drug and Alcohol Treatment Services will contribute to the key objectives of PHN by:

- Increasing the service delivery capacity of the drug and alcohol treatment sector through improved regional coordination and by targeting areas of need, and
- Improving the effectiveness of drug and alcohol treatment services for individuals requiring support and treatment by increasing coordination between various sectors, and improving sector efficiency.

This Drug and Alcohol Treatment Activity Work Plan covers the period from 1 July 2016 to 30 June 2019 and consists of the following parts:

1. The Strategic Vision specific to drug and alcohol treatment
2. The Drug and Alcohol Treatment Services Annual Plan 2016-2017 to 2018-2019 providing:
  - a) A description of planned activities funded under the Schedule: Drug and Alcohol Treatment Activities – Mainstream Drug and Alcohol Treatment Services
  - b) A description of planned activities funded under the Schedule: Drug and Alcohol Treatment Activities - Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander people

This Activity Work Plan is a refresh of the AWP published in 2016 and covers the period from 1 July 2016 to 30 June 2018.

A comprehensive needs assessment was undertaken by Primary Health Tasmania to inform this Activity Work Plan. The *Needs Assessment Priority Area* noted in the AWP aligns to the priority area identified as part of the needs assessment process.

The Activity Work Plan has been developed in consultation with local communities, Clinical Councils, Community Advisory Committees, state/territory governments and Local Hospital Networks as appropriate; and articulates a set of activities that Primary Health Tasmania will undertake, using the Needs Assessment as evidence.

# Strategic Vision for Drug and Alcohol Treatment Funding

It is Primary Health Tasmania's view that a whole-of-system approach and response is critical to improved health outcomes of Tasmanians and underpins our philosophy and strategic thinking. This approach is based on three distinct elements targeting system integration, professional provider interactions and consumer and community engagement.

In collaboration and in partnership with stakeholders it will be important to acquire knowledge and intelligence to ensure a thorough understanding of the specific AOD needs of service users, carers, families, individuals and communities. Working in collaboration and in partnership will ensure the development of a statewide agreed set of clear outcome-focused strategic priorities in which to invest to meet the current and future needs of people with AOD issues.

Primary Health Tasmania will work with stakeholders to increase service delivery capacity via a comprehensive commissioning process resulting in the design and commissioning of AOD services that are responsive to the needs of local communities and are balanced across the continuum of care offering a range of interventions. Primary Health Tasmania has drawn on the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health Service and the ATDC and draws its membership from the Tasmanian State Government, community sector, users group and private health providers. Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.

Service specifications will be focused on clinical quality, evidence based treatments, integration and coordination, measurable outcomes and positively impact on the service user experience. Services will be encouraged and supported to collect data to inform innovation and continuous improvement in service design optimising health and well-being for service users.

As part of our commissioning strategy and intent Primary Health Tasmania has embarked on a comprehensive sector engagement initiative which, although set within a challenging timeline, will ensure a shared vision and a commitment to joint decision making. Primary Health Tasmania is taking steps to commence collaborative processes to progress and establish a stepped model of care for drug and alcohol treatment within Tasmania that aligns with similar activity in mental health. We are very cognisant of the challenge that lies ahead with regard to this work due to the complexity of the Tasmanian mental health and drug and alcohol sectors, comorbidity and dual system usage with mental health and our own recent involvement in this important area of activity.

Primary Health Tasmania will continue to work with the state government, commissioned service providers, the community sector, other service providers and peak bodies as services are rolled out across Tasmania. These consultations will contribute to ongoing joint planning and quality improvement activities.

Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums convened by the Alcohol, Tobacco and other Drug Council of Tasmania. These forums were held across the state in October 2016.

## Planned Activities - Drug and Alcohol Treatment Services

Planned Activities : AOD1: Develop alcohol and drug service system framework	
Activity Title	<b>AOD1: Develop alcohol and drug service system framework</b>
Existing or New Activity	Existing Activity
Needs Assessment Priority Area	Needs Assessment Priority 4 - Alcohol and Other Drug: Work in collaboration with key stakeholders to develop of a single Tasmanian alcohol and other drugs service (AOD) system framework.
Description of Drug and Alcohol Treatment Activity	<p>Work in collaboration with key stakeholders to develop a single Tasmanian alcohol and other drugs (AOD) service system framework that includes the following scope:</p> <ul style="list-style-type: none"> <li>• Maps the range and type of current AOD treatment services across Tasmania (both state and federal funded and private providers where information is available), including generalist and specialist services.</li> <li>• Review clinical pathways for access to specialist AOD treatment services and opportunities for these to be improved.</li> <li>• Review community-based and inpatient models of care and opportunities for these to be improved.</li> <li>• Estimates the need for AOD services across Tasmania across the spectrum from promotion, prevention and early intervention to specialist treatment interventions, and across the lifespan, and including withdrawal services; psychosocial therapies; residential and community-based rehabilitation; and pharmacotherapy.</li> <li>• Reviews current access to the Inpatient Withdrawal Unit (IPWU), and makes recommendations to increase access to withdrawal management services and to enhance service effectiveness and efficiency across the state including options for ambulatory and home-based withdrawal services.</li> <li>• Develops a rehabilitation treatment service framework for Tasmania incorporating both short and longer term residential stays, step up and step down program(s), community-based rehabilitation and day program(s) as appropriate, using a systems approach to provide the blueprint for alcohol and drug residential rehabilitation services in Tasmania and the commissioning of those services, including assessment of best value buy against that framework within current available resources.</li> <li>• Recommends a service system framework for AOD treatment services in Tasmania including stepped care modelling as appropriate, and that best meets the needs of clients and the Tasmanian community</li> </ul>
Target population cohort	This activity is focused on improving services and clinical pathways throughout the state and is focused on all people in Tasmania who are drug or alcohol dependent.
Consultation	Primary Health Tasmania utilises the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health Service and the Alcohol, Tobacco and Other Drugs Council of Tasmania (ATDC) and draws its membership from the Tasmanian State Government, community sector, users group and private health providers.

	<p>Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.</p> <p>Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums across the state in October 2016.</p>
Collaboration	Primary Health Tasmania has partnered with the Tasmanian Department of Health and Human Services (DHHS) to engage a consultant to undertake this work and will continue to work closely as the development of the framework progresses.
Indigenous Specific	No - however this work will include engagement with Aboriginal Community Controlled Health Organisations to understand Drug and Alcohol issues and consider culturally appropriated solutions as well as align with Indigenous specific activity in this area.
Duration	The project will commence by September 2016 with a project completion forecast of May 2017.
Coverage	All elements of this activity will be directed to the entire state.
Commissioning method	The activity will not include a formal commissioning process.
Approach to market	The consultant will be engaged through an open tender process.

<b>Planned Activities: AOD 2: Co-design and commission delivery of community based drug and alcohol treatment services</b>	
Activity Title	<b>AOD 2: Co-design and commission delivery of community based drug and alcohol treatment services</b>
Existing or New Activity	Existing Activity
Needs Assessment Priority Area	<p>Commonwealth Activity Objectives 2 and 3</p> <p>Needs Assessment Priority 4 - Alcohol and Other Drug: Support the development and implementation of a co designed system wide stepped model of care that is person centre, responsive and evidenced based to meet the current and future needs of the community through a commissioning model and aligned to the system framework.</p>
Description of Drug and Alcohol Treatment Activity	<p>The aim of this activity is to enhance access to community based drug and alcohol treatment interventions to address identified gaps and local need.</p> <p>Needs assessment, service mapping and consultations to date have identified priority areas as:</p> <ul style="list-style-type: none"> <li>• Case management/care coordination</li> <li>• Early intervention</li> <li>• Relapse prevention</li> <li>• Workforce development</li> </ul>

	<ul style="list-style-type: none"> <li>• Increasing availability of counselling/psychotherapeutic services</li> </ul> <p>Priority populations for service delivery have been identified as:</p> <ul style="list-style-type: none"> <li>• Youth</li> <li>• Parents, including expectant mothers</li> </ul> <p>Primary Health Tasmania will:</p> <ul style="list-style-type: none"> <li>• Work with sector partners to undertake co design and commissioning/co-commissioning delivery of evidence-based drug and alcohol interventions that resolve current service gaps and issues.</li> <li>• Encourage and support innovation and continuous improvement in service design and outcomes</li> <li>• Develop, implement and monitor robust data collection mechanisms and methodologies to ensure continued intelligence of current and future needs and best solutions to address identified needs.</li> <li>• Implement the ‘Alcohol and Other Drugs’ pathway (as part of the Tasmanian HealthPathways program).</li> </ul> <p>Commissioning system integration in this area will be achieved through high quality and highly integrated approaches to whole of health stream commissioning responsibility. This will be evidenced and monitored across all commissioned service activity.</p>
<p>Target population cohort</p>	<p>This activity will target people in Tasmania who are drug or alcohol dependent.</p>
<p>Consultation</p>	<p>Primary Health Tasmania utilised the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health Service and the ATDC and draws its membership from the Tasmanian State Government, community sector, users group and private health providers.</p> <p>Engagement with the local hospital network, state government, service providers and peak bodies will continue as newly commissioned services are rolled out across Tasmania.</p> <p>Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.</p> <p>Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums across the state in October 2016.</p>
<p>Collaboration</p>	<p>Primary Health Tasmania will be a joint driver of this activity in collaboration with, the Tasmanian Department of Health and Human Services, Tasmanian Health Service - Drug and Alcohol Services, GPs and other key stakeholders. We are working towards increased collaboration with a user support group.</p> <p>Primary Health Tasmania will be the key funder of community based interventions but there may be opportunity to consider elements of co-commissioned activity with relevant partners.</p>

	<p>Primary Health Tasmania will also engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council. Primary Health Tasmania will leverage the THS Alcohol and Other Drugs Expert Advisory Group as a governance forum for commissioning activities.</p>
Indigenous Specific	<p>No - however this work will include engagement with Aboriginal Community Controlled Health Organisations to understand drug and alcohol issues and consider culturally appropriated solutions as well as align with Indigenous specific activity in this area.</p>
Duration	<p>The planned activity will be three years in duration.</p> <p>Collaboration with regards to planning and development will commence on 1 July 2016.</p> <p>An approach to market will be made in November 2016, informed by the comprehensive needs assessment and extensive stakeholder engagement. Commissioned services are expected to commence by end of May 2017.</p>
Coverage	<p>All elements of this activity will be directed to the entire state in line with identified service gaps and needs.</p>
Commissioning method	<p>Primary Health Tasmania will utilise its Commissioning Framework to guide all commissioning processes</p>
Approach to market	<p>Primary Health Tasmania has established an open market tender process for the procurement of commissioned services. Tenders are evaluated against the following criteria:</p> <ul style="list-style-type: none"> <li>• Appropriate applicant profile including suitable experience and capacity to deliver proposed services with evidence of a clear understanding of the Tasmanian primary health sector and availability of a local workforce</li> <li>• Application of evidence based models of intervention that are relevant to the target client cohort, required accessibility the articulation of measurable outcomes and outputs including client reported outcome measures</li> <li>• Demonstration of the applicants understanding and use of healthcare quality and safety mechanisms and tools</li> <li>• Described and evidenced capacity and capability to meet data and financial reporting requirements and willingness to engage with Primary Health Tasmania and other providers and stakeholders to improve primary healthcare management through planning, co-design, implementation and evaluation of primary health interventions</li> </ul> <p>These services will be monitored and evaluated as follows:</p> <ul style="list-style-type: none"> <li>• healthcare quality and safety arrangements (clinical governance) and quality assurance mechanisms</li> <li>• collection &amp; reporting of patient/client outcomes data</li> <li>• Range of value for money measures including cost per client/intervention</li> </ul>

<b>Planned Activities: AOD 3: Workforce and organisational capability development</b>	
Activity Title	<b>AOD 3: Workforce and organisational capability development</b>
Existing or New Activity	Existing Activity
Needs Assessment Priority Area	Commonwealth Activity Objective 6 Needs Assessment Priority 4 - Alcohol and Other Drug - Explore options for and facilitate targeted education and professional development activity opportunities
Description of Drug and Alcohol Treatment Activity	<p>This activity aims to ensure a competent highly skilled workforce is able to deliver high quality, effective and flexible treatment options.</p> <p>Activities will include:</p> <ul style="list-style-type: none"> <li>• Explore options for and facilitation of education and learning opportunities with an increased focus on demonstrating practice change aligned with evidenced based practice, contemporary treatments and quality and safety.</li> <li>• Explore the opportunity to partner with local and interstate specialist providers to have a holistic and more effective professional development approach.</li> <li>• Resource development</li> <li>• Support a culture of continuous quality improvement as a way of working within commissioned services for innovation and improved service design and delivery.</li> </ul>
Target population cohort	Providers of drug and alcohol treatment services, including community sector organisations and primary care providers.
Consultation	<p>Primary Health Tasmania drew on the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health Service and the ATDC and draws its membership from the Tasmanian State Government, community sector, users group and private health providers.</p> <p>Engagement with the local hospital network, state government, service providers and peak bodies will continue as newly commissioned services are rolled out across Tasmania.</p> <p>Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.</p> <p>Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums across the state in October 2016.</p>
Collaboration	Collaboration will occur with the Department of Health and Human Services to identify shared approaches to professional development and quality improvement, in order to facilitate efficient and effective participation in these processes by commissioned providers, who are at times funded by both organisations.

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Indigenous Specific	No - however this work will include engagement with Aboriginal Community Controlled Health Organisations to understand Drug and Alcohol issues and consider culturally appropriated solutions as well as align with Indigenous specific activity in this area.
Duration	The activity will be three years in duration to enable appropriate workforce capability building.
Coverage	All elements of this activity will be directed across the entire state in line with location of commission services.
Commissioning method	No formal commissioning approach applied to this activity however, where elements of capability building are provided by external expertise, there may be commissioning principles applied.

## Planned activities: Drug and Alcohol Treatment Services for Aboriginal and Torres Strait Islander people – Flexible Funding

Planned Activities: AOD 4: Intelligence gathering to inform the design and commissioning of services	
Activity Title	<b>AOD 4: Intelligence gathering to inform the design and commissioning of services</b>
Existing or New Activity	Existing Activity
Needs Assessment Priority Area	Commonwealth Activity Objective 3 and 5 Needs Assessment Priority 4 -Alcohol and Other Drug: Develop and implement a system wide response to improve access to both Indigenous-specific alcohol and other drug services and culturally appropriate mainstream services.
Description of Drug and Alcohol Treatment Activity	<p>The activity aims to gather further intelligence to ensure a thorough understanding of local needs and service gaps to develop and implement a system wide response to improve access to both Indigenous specific and culturally appropriate mainstream alcohol and other drug services.</p> <p>This will be achieved through:</p> <ul style="list-style-type: none"> <li>• Comprehensive service and workforce mapping of providers of Aboriginal and Torres Strait Islander drug and alcohol interventions to ascertain sector service capacity and gaps including improved linkages and integration with wider services including the mental health sector</li> <li>• Engaging with local communities and consult with relevant local Aboriginal and mainstream primary health care organisations to identify the specific alcohol and drug service needs of Aboriginal and Torres Strait Islander people;</li> <li>• Determine the most appropriate mix of service delivery modalities for commissioning in each region.</li> <li>• Implement the ‘Alcohol and Other Drugs’ pathway (as part of the Tasmanian HealthPathways program)</li> <li>• Work with Aboriginal organisations and other relevant health providers and stakeholders to co-design and commission drug and alcohol interventions that address the needs of Tasmanian Aboriginal communities.</li> </ul>
Target population cohort	Existing alcohol and drug treatment service providers and Aboriginal community controlled health organisations.
Consultation	<p>Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums across the state in October 2016.</p> <p>Primary Health Tasmania drew on the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health</p>

	<p>Service and the ATDC and draws its membership from the Tasmanian State Government, community sector, users group and private health providers.</p> <p>Engagement with the local hospital network, state government, service providers and peak bodies will continue as newly commissioned services are rolled out across Tasmania.</p> <p>Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.</p>
Collaboration	<p>Collaboration with Aboriginal organisations, DHHS, THS, NGOs, GPs, headspace; and drug and alcohol service providers, private mental health providers and other relevant mental health sector stakeholders will be required to identify current gaps and local needs to co-design and commissioned services that address identified gaps and meet the needs of local Tasmania Aboriginal and Torres Strait Islander people.</p>
Indigenous Specific	<p>Yes</p>
Duration	<p>The planned activity will commence in 2016/17 with a completion date of December 2016.</p>
Coverage	<p>All elements of this activity will be directed across the entire PHN 601 region in line with the findings of the Tasmanian AOD Services System Framework and engagement with Aboriginal organisations and communities with respect to identified gaps and needs.</p>
Commissioning method	<p>The activity will not include a formal commissioning process</p>
Approach to market	<p>The consultant will be engaged through an open tender process.</p>

Proposed Activities: AOD 5: Co-design and commission culturally appropriate evidence based drug and alcohol services for Aboriginal and Torres Strait Islander people.	
Activity Title	<b>AOD 5: Co-design and commission culturally appropriate evidence based drug and alcohol services for Aboriginal and Torres Strait Islander people.</b>
Existing or New Activity	Existing Activity
Needs Assessment Priority Area	Commonwealth Activity Objective 3 and 5 Needs Assessment Priority 4 -Alcohol and Other Drug: Develop and implement a system wide response to improve access to both Indigenous-specific alcohol and other drug services and culturally appropriate mainstream services.
Description of Drug and Alcohol Treatment Activity	<p>The aim of this activity is to enhance access to community based Aboriginal and Torres Strait Islander specific and/or culturally appropriate mainstream services drug and alcohol treatment interventions to address identified gaps and local need.</p> <p>Priorities identified through the comprehensive needs assessment and community consultations include:</p> <ul style="list-style-type: none"> <li>• An increase in the Aboriginal alcohol and other drug workforce, including development of existing workforce</li> <li>• Improving cultural safety of mainstream services, including through workforce development, data collection, resource and policy development.</li> <li>• Case management and care coordination for Aboriginal and Torres Strait Islander people with alcohol and other drug dependence, including referral pathways to clinical and community support services.</li> <li>• Early intervention services.</li> </ul> <p>Primary Health Tasmania will:</p> <ul style="list-style-type: none"> <li>• Work with sector partners to undertake co design and commissioning/co-commissioning delivery of evidence-based drug and alcohol interventions that resolve current service gaps and issues.</li> <li>• Encourage and support innovation and continuous improvement in service design and outcomes</li> <li>• Develop, implement and monitor robust data collection mechanisms and methodologies to ensure continued intelligence of current and future needs and best solutions to address identified needs.</li> <li>• Implement the ‘Alcohol and Other Drugs’ pathway (as part of the Tasmanian HealthPathways program).</li> </ul> <p>Primary Health Tasmania will use an integrated approach to commissioning alcohol and other drug services to ensure alignment between Aboriginal and mainstream services.</p>
Target population cohort	Aboriginal and Torres Strait Islander people who are dependent on alcohol or other drugs.

<p>Consultation</p>	<p>Primary Health Tasmania convened a workshop with the Aboriginal community controlled health sector in September 2016 and with mainstream providers of alcohol and other drug services through a series of forums across the state in October 2016.</p> <p>Primary Health Tasmania drew on the existing Alcohol and Other Drug Treatment Expert Advisory Group as the governance body for all AOD commissioning work. This group is jointly chaired by the Tasmanian Health Service and the ATDC and draws its membership from the Tasmanian State Government, community sector, users group and private health providers.</p> <p>Engagement with the local hospital network, state government, service providers and peak bodies will continue as newly commissioned services are rolled out across Tasmania.</p> <p>Primary Health Tasmania has also engaged and will continue to engage via its internal mechanisms such as the Clinical Advisory Council and Community Advisory Council.</p>
<p>Collaboration</p>	<p>Collaboration with Aboriginal organisations, DHHS, THS, NGOs, GPs, headspace; and drug and alcohol service providers, private mental health providers and other relevant mental health sector stakeholders will be required to identify current gaps and local needs to co-design and commissioned services that address identified gaps and meet the needs of local Tasmania Aboriginal and Torres Strait Islander people.</p>
<p>Indigenous Specific</p>	<p>Yes</p>
<p>Duration</p>	<p>The planned activity will be two years and six months in duration.</p> <p>An approach to market will be made in November 2016, informed by the comprehensive needs assessment and extensive stakeholder engagement. Commissioned services are expected to commence by end of May 2017.</p>
<p>Coverage</p>	<p>All elements of this activity will be directed across the entire state in line with the findings of the Tasmanian AOD Services System Framework and engagement with Aboriginal organisations and communities with respect to identified gaps and needs.</p>
<p>Commissioning method</p>	<p>Primary Health Tasmania will utilise its Commissioning Framework to guide all commissioning processes</p>
<p>Approach to market</p>	<p>Primary Health Tasmania has established an open market tender process for the procurement of commissioned services. Tender are evaluated against the following criteria:</p> <ul style="list-style-type: none"> <li>• Appropriate applicant profile including suitable experience and capacity to deliver proposed services with evidence of a clear understanding of the Tasmanian primary health sector and availability of a local workforce</li> <li>• Application of evidence based models of intervention that are relevant to the target client cohort, required accessibility the articulation of measurable outcomes and outputs including client reported outcome measures</li> <li>• Demonstration of the applicants understanding and use of healthcare quality and safety mechanisms and tools</li> </ul>

	<ul style="list-style-type: none"><li>• Described and evidenced capacity and capability to meet data and financial reporting requirements and willingness to engage with Primary Health Tasmania and other providers and stakeholders to improve primary healthcare management through planning, co-design, implementation and evaluation of primary health interventions</li></ul> <p>These services will be monitored and evaluated as follows:</p> <ul style="list-style-type: none"><li>• healthcare quality and safety arrangements (clinical governance) and quality assurance mechanisms</li><li>• collection &amp; reporting of patient/client outcomes data</li></ul> <p>range of value for money measures including cost per client/intervention</p>
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