

YOUTH AOD TREATMENT: BETTER TOGETHER

Enhancing liaison between primary care and secondary care services.

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CADS Altered High

Better identification and management of AOD problems in young people attending primary care is a key component of an effective primary care youth health response. Strategies to achieve this include:

- Equipping primary care agencies with tools to identify AOD problems via brief intervention training
- Developing pathways to facilitate referrals to youth AOD services from primary care
- Improved liaison and consultation between primary care and treatment services

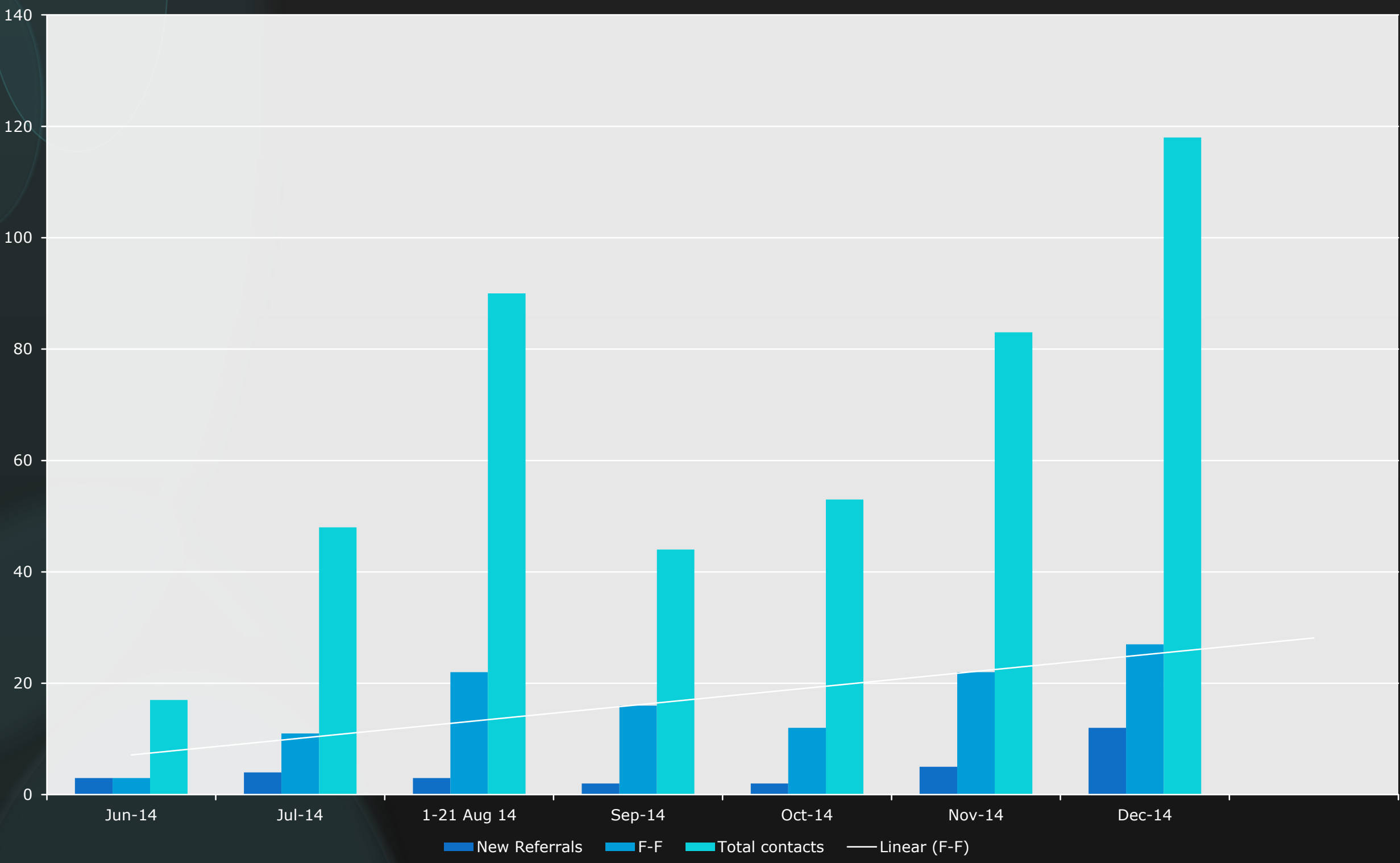
What is the Primary Care Liaison service?

- 3 FTE – Youth AOD Clinicians providing:
- Treatment
 - to young people and families / whanau
 - Liaison
 - Consultation
 - Training
 - to primary care providers



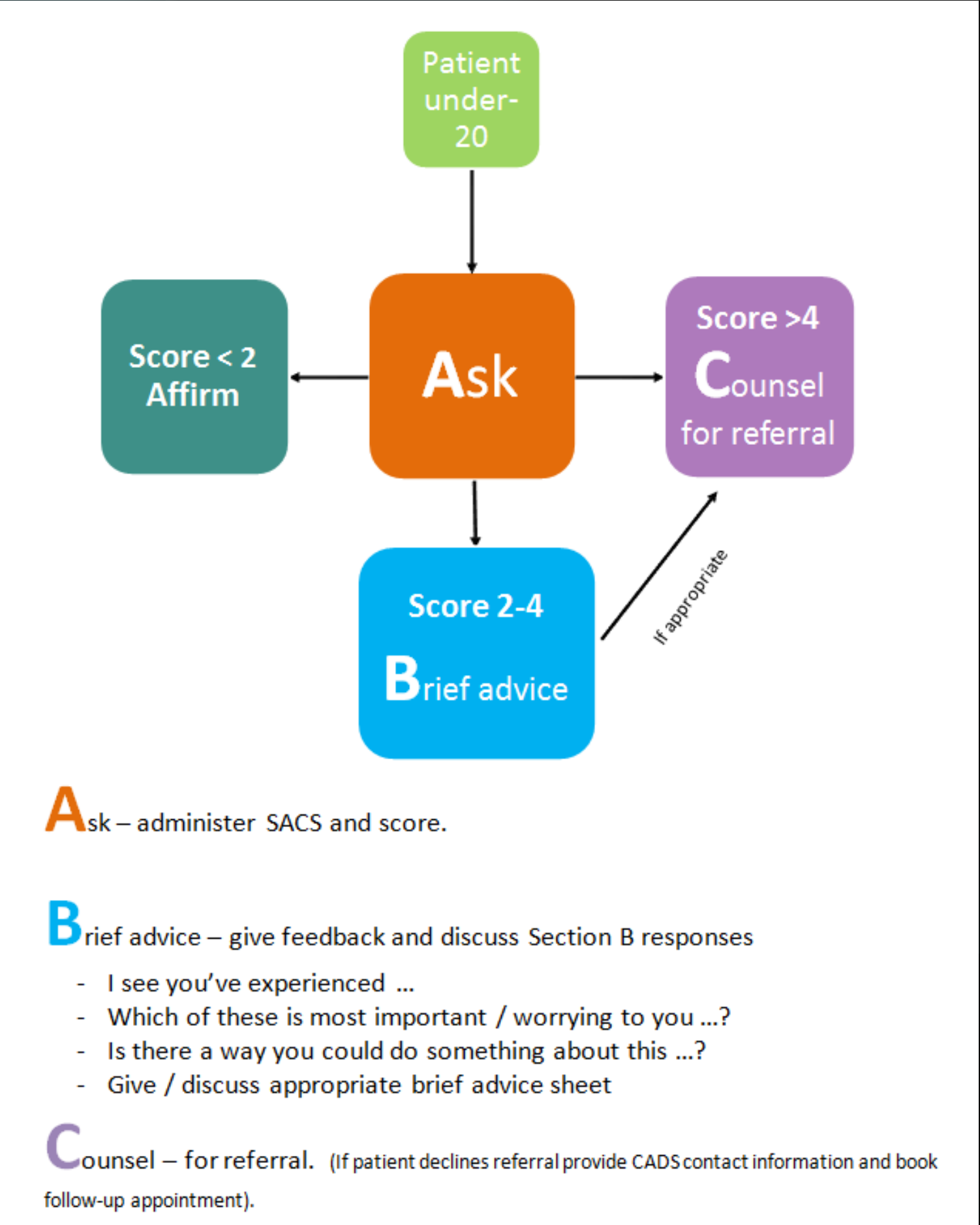
How are we doing this ?

Increasing clinical services provided



Developing a “Youth ABC”

Introducing screening, brief intervention and referral to treatment (SBIRT) for youth to primary care providers via an “ABC” guideline



Enhancing PHO IT systems

Supporting PHOs to incorporate validated, youth-appropriate screening in software used by GPs and practice nurses.

Substances and Choices Scale

You can download a paper SACS questionnaire for the young person to complete manually (and fill in this e-version later)

Patient Details

From: Dr B Beta, Procon Limited

Patient Name: Brian Smith

Date of Birth: 12/03/1954

NH#: ABC1235

Home address: 28 Rust Avenue Whangarei 0110

Postal address: 28 Rust Avenue Whangarei 0110

Home phone: 09 520 9999

Work phone: 09 520 1234

Mobile phone: 021 241 1522

The following questions are about your (young person's) use of alcohol and drugs over the last month. This does not include tobacco or prescribed medicine. Please answer every question as best you can, even if you are not certain.

SACS Part A:

How often did you use each of the following *in the last month*?

	Didn't use	Once a week or less	More than once a week	Most days or more
Alcoholic drinks (e.g. beer, wine, spirits, premixes, RTDs):	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cannabis (e.g. weed, marijuana, pot, dope, buds):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other drugs (e.g. stimulants, hallucinogens, inhalants, sedatives, synthetic cannabinoids, opiates):	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

☐ Ecstasy and other party pills (e.g. 'E', Methadone, BZP)

☐ Hallucinogens (e.g. LSD, acid, mushrooms, ketamine)

☐ Inhalants (e.g. glue, petrol, solvents, paint, nitrous)

☐ Amphetamines (e.g. speed, 'P', ice, whiz)

☒ Sedatives (e.g. sleeping pills, benzos, downers, valium)

☒ Synthetic cannabinoids (smokable herbal highs)

☐ Opiates (e.g. heroin, morphine, methadone, codeine)

☐ Cocaine (e.g. coke, crack, blow)

☐ Other drug not listed above

SACS Part B:

Mark one box (on each row), on the basis of how things have been for you *over the last month*?

	Not True	Somewhat True	Certainly True
1. I took alcohol or drugs when I was alone.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
2. I've thought I might be hooked or addicted to alcohol or drugs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Most of my free time has been spent getting hold of, taking, or recovering from alcohol or drugs.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4. I've wanted to cut down on the amount of alcohol and drugs that I am using.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
5. My alcohol and drug use has stopped me getting important things done.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Conclusion

PHOs and primary care providers have responded positively to consultation and liaison efforts thus far. We anticipate increasing contact with a range of practitioners and organisations across the wider Auckland region over the next 15 months of the project.