



Drug and Alcohol Services South Australia
(DASSA)

SERVICE AGREEMENT

1 July 2022 – 30 June 2023



Government
of South Australia

SA Health

Version Control

Version No.	Changes Made	By Whom	Date
V1	Draft Service Agreement	J Browne	4 May 2022
V1.2	Funding Sources Table added	M McKinnon	7 July 2022

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PART A: PURPOSE AND GOVERNANCE

Purpose

This Agreement outlines the services that the Department of Health and Wellbeing (DHW) will commission from Southern Adelaide Local Health Network (SALHN) for the provision of Drug and Alcohol Services and the associated responsibilities, funding and performance measures.

Governance

Due to the range of state-wide functions, incorporating whole of government strategies, state and national policy advice, and oversight of SA Health funding of non-government alcohol and other drug treatment services, the governance arrangements for DASSA require a specific, collaborative approach between both Parties.

SALHN must support DASSA to ensure that:

- < All persons who provide a clinical service for which there is a national or South Australian legal requirement for registration, have and maintain current registration throughout their employment and only practise within the scope of that registration. This will be overseen on an operational basis by the DASSA Clinical Director with links to broader SALHN committees or reporting structures.
- < All staff, contractors, visiting private practitioners, volunteers and students are appropriately credentialed. All paid staff included in the SA Health Credentialing Policies are to be entered into the SA Health Credentialing System to ensure visibility of credentials across LHNs and sites, ensuring safe quality practice for patients/clients of SA Health. This will be overseen on an operational basis by the DASSA Clinical Director with links to broader SALHN committees or reporting structures.
- < Clinical supervision is offered to DASSAs Clinical Director (Medical lead), Director of Nursing (Nursing lead) and Director, Outpatient Services (Allied Health lead).
- < The DASSA Clinical Governance Committee works with SALHNs overall clinical governance framework to foster clinical knowledge, experience and learning, including for research ethics approvals, medical records and infection control.
- < Any Rights of Private Practice are administered through SALHNs existing corporate management systems.

The DHW will support DASSA by:

- < Executing contractual agreements for DASSA on behalf of SALHN as specified in any instrument of delegation to Section 8 (2) of the *Health Care Act 2008*.
- < Providing corporate systems to enable and support the activities of DASSA, including the provision of human resources, facilities management support, industrial relations, ICT support, legal advice, corporate records (including freedom of information responses), legislative compliance, risk management, insurance, emergency management, maintenance of the overseas travel register, and work health and safety compliance and management.
- < Providing oversight for the financial performance of DASSA, including any audits and performance against relevant Acts and Regulations, with this advice provided through the DASSA State Director and DASSA Director Business Services to SALHN on a monthly basis. The DASSA Director Business Services will work with SALHN to prepare its statutory financial statements to discharge financial stewardship and accountability obligations within the relevant timeframes laid down by SA Health and the *Public Finance and Audit Act 1987*.

PART B: GOVERNMENT COMMITMENTS

Purpose

Part B describes the Government commitments for DHW and DASSA.

Election Commitments

The Government is committed to improving the State's health care system efficiency and effectiveness through a range of initiatives, including additional community drug rehabilitation beds, drug and alcohol detox beds and increasing support for individuals and families impacted by drug use.

SA Health is responsible for the delivery of a number of Government commitments in 2022-23, and where required, DASSA will work collaboratively with the DHW and provide support to implement these initiatives.

PART C: SERVICES

Purpose

Without limiting any other obligation, Part C sets out the key services that DASSA is required to provide under the terms of the Agreement.

Service Profile

DASSA is a state-wide health service that provides services and policy advice for tobacco, alcohol and other drug issues, including illicit drugs. SALHN has responsibility for the provision and coordination of the following:

- < Providing a range of state-wide treatment services for people with problematic use of alcohol and other drugs, including a 30 bed inpatient alcohol and other drug withdrawal unit based at Glenside Health Services and a 24 bed therapeutic community (the Woolshed), as well as outpatient services across the metropolitan area and in regional areas throughout South Australia.
- < Providing consultation and liaison services, providing support and development assistance to primary health care, hospitals, non-government and private sectors to facilitate provision of a wide range of treatment and support services.
- < Providing and coordinating a range of population programs to address tobacco, alcohol and other drug related problems in South Australia, including tobacco social marketing programs, the police drug diversion program, peer harm reduction programs and the clean needle program for South Australia.
- < Providing policy and planning advice to the Chief Executive of the DHW and the Minister for Health and Wellbeing related to tobacco, alcohol and other drug issues, under the direction of the DHW.
- < Providing for the commissioning of a range of non-government alcohol and other drug treatment services, including funding, monitoring and reviewing services to ensure services are evidence based and effective.

To support the prevention and management of alcohol, tobacco and other drug relate issues across South Australia, DASSA is required to:

- < Advise on a whole of government approach to prevent the use of illicit drugs and the misuse of licit drugs.
- < Advise on policy relating to tobacco, alcohol and other drugs and provide expert advice and support to South Australia's role in national policy development.
- < Provide or broker a range of prevention, intervention and treatment programs across the State with a particular focus on high risk groups and behaviours.
- < Advise on evidence-based practice and participate in research.

In conjunction with South Australia Police, DASSA is currently leading the development of the South Australian Alcohol and Other Drug Strategy 2022-2026 (draft Strategy). The draft Strategy is in an advanced stage with public consultation anticipated in the 2022-23 financial year.

DASSA also has responsibility for administering the Tobacco and E-cigarette Products Act 1997 and works in partnership with a range of government agencies to help implement the South Australian Tobacco Control Strategy. DASSA is finalising the development of the South Australian Tobacco Control Strategy 2022-2026 and anticipate its release before the end of the 2021-22 financial year.

PART D: DELIVERY AND PERFORMANCE

Purpose

Part D outlines the performance indicators, associated reporting requirements and monitoring methods that apply to DASSA.

Performance Framework

The SA Health Performance Framework 2022-23 sets out how the DHW, as the leader and steward of the public health system, monitors and assesses the performance of public health services and resources within South Australia. The Performance Framework uses performance indicators to monitor the extent to which the LHN is delivering the high level objectives set out in the Agreement. DASSA should refer to the SA Health Performance Framework for further information about the performance assessment process.

DASSA will endeavour to meet performance targets for each KPI identified in the table below as described under the four domain areas: access and flow, productivity and efficiency, safe and effective care and people and culture. KPI targets that reflects a performance improvement trajectory will be agreed with DASSA and will be used as the basis for monitoring performance in 2022-23.

While DASSA KPI reports will be issued monthly as an internal reporting tool, a formal assessment of the DASSA performance may be completed quarterly. The quarterly progress would include DHW undertaking an initial assessment to be discussed with DASSA to incorporate agreed contextual and qualitative aspects of sustainable performance. This negotiation would inform the final quarterly performance assessment issued. Performance levels are not assigned solely on KPI data, instead a range of other factors are also considered by DHW.

A number of KPIs, including outcome based measures, will be 'monitored' in year and may be considered to transition to Tier 1 or Tier 2 KPIs depending on the health system's performance. A number of KPIs may also be 'shadowed' in year to allow DHW to work with DASSA and/or other business areas to develop clear data and reporting process. Shadow KPIs may be considered to transition to monitor or Tier 1 or Tier 2 as required. Monitor and shadow KPIs do not contribute to the evaluation of the overall Performance level but will inform opportunities for improvement.

More detailed information regarding the 2022-23 KPI architecture, including KPI descriptions, levels (Tier 1, Tier 2 monitor and shadow), calculation methodology, targets and reporting frequency is available in the [2022-23 KPI DASSA Definition Document](#).

Data and Reporting Requirements

DASSA will provide data to the DHW on the provision and performance of health services (including Community data), in a timely manner and as required by the DHW Chief Executive in alignment with the National Health Care Reform Agreement. All data provisions are outlined in the [Enterprise Data And Information \(EDI\) Data Requirements, 2022-2023 Bulletin](#) including routine monthly data submissions and ad hoc requests. It is essential that data is submitted by the date provided within the Bulletin.

2022-23 KPI Architecture - DASSA		
Subdomain	Tier 1	Tier 2
Access and Flow		
Activity	Outpatient Attendances	
	Inpatient Separations (non-hospital)	
	Completed Inpatient Episodes	
	Completed Outpatient Episodes	
Productivity and Efficiency		
		DASSA Outpatient Did Not Attend Rate
People and Culture		
Workforce		Completion of Performance Reviews in Line with the Commissioner's Determination
		Return to work
		Employees with Excess Annual Leave Balance

PART E: FUNDING

Purpose

Part E sets out:

- The sources of funding that the Agreement is based on and the manner in which these funds will be provided to the entity.
- The funding provided for the delivery of the services.

Funding Sources			
Funding Source	Revenue (\$)	Expenditure (\$)	Net Result (\$)
DHW Recurrent Transfer	50,787,000	0	
ABF Operating, State-wide, Mental Health & Intermediate Care	1,831,000	52,618,000	
Capital	2,000,000	0	
Non-Cash Items	0	1,365,000	
Allocation	54,618,000	53,983,000	635,000

SIGNATURE

This is a Service Agreement (the Agreement) between the Chief Executive of the Department for Health and Wellbeing (Chief Executive) and the Southern Adelaide Local Health Network Incorporated (the Parties) which sets out the Parties' mutual understanding of their respective statutory and other legal functions and obligations through a statement of expectations and performance deliverables for the period of 01 July 2022 - 30 June 2023.

Through execution of the Agreement, the Local Health Network agrees to meet the service obligations and performance requirements as detailed in Parts A – E of the Agreement. The Chief Executive agrees to provide the funding and other support as outlined in the Agreement.

Mark Butcher

Chair

On behalf of

Southern Adelaide Local Health Network Inc. Governing Board

Signed: ..  Date: 21/02/23

Kerrie Freeman

Chief Executive Officer

Southern Adelaide Local Health Network Inc.

Signed: ..  Date: 21/02/23

Dr Robyn Lawrence

Chief Executive

Department for Health and Wellbeing

Signed: ..  Date: 9.3.2023

APPENDIX 1: COMPANION ARCHITECTURE

Without limiting any other obligations, the delivery of services under this Agreement requires the LHN and DHW to comply with:

[Australian Health Service Safety and Quality Accreditation \(AHSSQA\) Scheme](#)

[Better Placed: Excellence in health education](#)

[Charter of Responsibility](#)

[Clinical Services Capability Framework](#)

Commonwealth Aged Care Quality and Safety Commission (where applicable)

[Disaster Resilience Policy Directive](#)

[Emergency Management Act 2004](#)

[Fifth National Mental Health and Suicide Prevention Plan](#)

[Health Care \(Governance\) Amendment Bill 2020](#)

[Health Care Act 2008](#)

[Integrated Compliance Management Framework](#)

[National Agreement on Closing the Gap](#)

[National Clinical Governance Framework](#)

[National Health Reform Agreement](#)

National Partnership Agreements between the State and Commonwealth Government

[National Safety and Quality Health Service Standards](#)

[NDIS Code of Conduct](#)

[NDIS Practice Standards and Quality Indicators](#)

[Office for the Ageing \(Adult Safeguarding\) Amendment Act 2018](#)

[Public Health Act 2011](#)

[System-wide Integrated Compliance Policy Directive](#)

[SA Health Gender Equality and Diversity Steering Committee: Strategic Directions 2020-2023](#)

[SA Health Policy Framework](#)

[SA Health Aboriginal Cultural Learning Framework](#)

[SA Health Aboriginal Health Care Framework](#)

[SA Health Aboriginal Workforce Framework 2017-2022](#)

[SA Health Accreditation Policy Directive](#)

[SA Health Clinical Placement Requirements for Health Care Students](#)

[SA Health Clinical Services Capability Framework](#)

[SA Health Corporate Governance Framework Summary](#)

[Enterprise Data And Information \(EDI\) Data Requirements Bulletin](#)

[SA Health Performance Framework](#)

[SA Health Research Ethics Policy Directive](#)

[SA Health Research Governance Policy Directive](#)

[SA Medical Education and Training Principles](#)

[SA Mental Health Services Plan – 2020-2025](#)

[Service Agreement Amendment Fact Sheet](#)

[Service Agreement Dispute Resolution Fact Sheet](#)

[South Australian Aboriginal Cancer Control Plan 2016-2021](#)

[South Australian Aboriginal Diabetes Strategy 2017-2021](#)

[South Australian Aboriginal Heart and Stroke Plan 2017-2021](#)

[South Australian Health and Wellbeing Strategy 2020-2025](#)

Standards for General Practice (where applicable)

[State Emergency Management Plan](#)

[State Public Health Plan 2019-2024](#)

[The Mental Health Act 2009](#)

All other [policies and directives applicable](#) to DHW

For more information

**Drug and Alcohol Services South Australia 2022-23 Service Agreement
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