



## Smoking cessation support in the Victorian AOD system.

A sector review for VicHealth

Jo Grzelinska  
Primary Health Care Consultant  
Larter Consulting

November 2015

A stronger primary health system.

## Overview

Setting the scene  
Understanding the Victorian AOD sector  
Key enablers & barriers to embedding systematic support  
Opportunities  
Quick wins  
Key messages

## Setting the scene.

### Sector review

- explored existing smoking cessation practices, and identified opportunities to improve cessation support provided to clients in the Victorian AOD system
- identified enablers and barriers to implementing a systematic approach to smoking cessation in the Victorian AOD system and the once-off and recurrent resources required

### Methodology

- December 2014 - February 2015
- Sector scan, informant interviews, onsite case studies

## Understanding the Victorian AOD sector.

A series of contact points

### Opportunities

- The review found opportunities to provide information and brief advice to stop smoking at every contact with clients
- A prompt for a brief intervention for smoking cessation could be embedded in every tool currently used in the AOD sector



## Key barriers.

**Evidence base:** limited awareness

**Workforce culture change** required at multiple levels (including evidence, resources, tiered training)

**Harm minimisation** v smoking cessation

- a harm minimisation approach is key to change and a tailored approach is needed for this sector

## Key enablers.

**Readiness** (clients, sector)

A **knowledge-enabled** environment

**Leadership** and role modelling

An **authorising environment** (governance structures, statewide policy)

## Key barriers - NRT access.

Existing Therapeutic Goods Administration **indications** for OTC products not likely effective for AOD population

- need flexibility in dose, length of use, combination use

**PBS subsidies** for NRT products

- Limited access to subsidised NRT
- Need greater range of subsidised products (patches alone unlikely to be effective)

### Financial barriers

## Opportunities.

Demonstrate **leadership** in driving integrated process of cultural change, workplace practice change, and sector change, through:

1. Building AOD workforce capacity (brief interventions, evidence base)
2. Developing/ disseminating resources tailored to the AOD population
3. Supporting innovation through a pilot program
4. Advocating to Government (policy, AOD tools, data, service agreements)
5. Advocate for improved access to NRT

## Quick wins.

- Engage AOD catchment planners (inc supply minimum indicator data packages)
- Develop new/rebrand resources for AOD clients (inc NRT guidelines)
- Develop communications strategy for evidence base
- Training grants
- Pilot change strategies to demonstrate proof of concept to sector

## Key messages.

- The sector is **ready for change** and now is the right time (post sector reform)
- A **tailored approach** is needed to work with this population group (inc. harm reduction approaches with cessation goal, polydrug use, multiple withdrawal, cannabis use, relapse prevention)
- **System change** and **multi-level engagement** is needed to embed smoking cessation into usual care
- **Government buy-in** is key to implementing these changes
- A collaborative approach and **long-term partnership work** is required. A comprehensive partnerships strategy must be developed in consultation with the sector

## Comments or questions?

Jo Grzelinska  
Larter Consulting

[jo@larter.com.au](mailto:jo@larter.com.au)  
0418 595 781