

Alcohol and Drug Telephone Intervention Model

Engagement

- Establishing rapport is central to client engagement.
- Workers utilise micro counselling such as open questions, reflections and summarising to gain a frame of reference for the client.

Assessment

- Assessment level suitable to intervention.
- Biopsychosocial assessment including level and history of substance use, health, mental health, social, legal, and employment.
- To establish impact of substance use or assist with treatment matching the use of screening tools such as DSM, AUDIT, K10, DAST or others may be utilised.

Treatment Matching

- Treatment options provided follow best practice treatments and match level of use, stage of change and client needs.
- Workers should assist clients with prioritising immediate needs.

Mutual Agreement

- Mutual agreement on treatment is established before providing intervention.
- 'Checking in' with the client throughout the call and asking permission when required.

Intervention/Referral

- Interventions for individuals with substance use concerns may include development of a Relapse Prevention plan, Goal setting, General counselling, Craving management, Harm Reduction strategies, Motivational Interviewing, Safety Plan or other interventions.
- Referrals are provided when suitable and are based on assessment and mutual agreement.
- When providing a referral direct transfer of care is recommended and a brief intervention should be included as a part of this process.

Support Self Efficacy

- Workers should indicate with cues that the call is coming to an end.
- Calls are ended with reinforcement of treatment plan with the worker focusing on a strengths based approach.
- Social and community supports are identified and the client encouraged to call back if suitable.