

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

The NSW Government is committed to supporting individuals, their families, and communities impacted by illicit drugs.

Illicit drugs cause immense health, social, and economic harm to users, their families, and our community.

That is why we established the Special Commission of Inquiry into the Drug 'ice' (**the Inquiry**) to identify opportunities to improve our response to crystal methamphetamine ('ice') and other amphetamine-type stimulants (**ATS**).

The NSW Government acknowledges the efforts of the Inquiry, led by Commissioner Dan Howard SC, and the broad range of experts, health practitioners, service providers, and other people on the front line of service delivery who provided valuable contributions to the Inquiry's important work. We especially thank the people with lived experience, their families and loved ones for contributing to the work of the Inquiry.

After carefully considering the Inquiry's comprehensive findings and recommendations, the NSW Government is pleased to announce it supports or supports in principle 86 of the Inquiry's recommendations and notes 14 recommendations.

A health response, not just a criminal justice response, is required to tackle addiction and address drug use.

The NSW Government will be making a landmark investment of almost \$500 million over four years to fund a range of rehabilitation services and justice initiatives.

This is the single largest investment in alcohol and other drug services that NSW has ever seen.

These health and justice measures will change many lives for the better by addressing illicit drug dependency and associated offending at every stage of an individual's engagement with the health and criminal justice systems.

This substantial investment will deliver positive outcomes for priority populations identified by the Inquiry, particularly Aboriginal people and communities, people in regional and rural NSW, and young people.

New funding of almost \$500 million will address treatment gaps and improve the lives of people impacted by the use of ATS and other substances in NSW through a suite of cross-government initiatives, including more treatment services in rural and regional NSW, through investing:

- \$163.8 million to increase and enhance access to evidence-based treatment, support and early intervention services, especially in rural and regional areas;
- \$96.2 million to provide more integrated and coordinated approaches to care;
- \$11.7 million to enhance digital capability and virtual healthcare;
- \$66 million to expand the alcohol and other drug workforce;

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- \$20.2 million to improve the use of data and evidence to inform system priorities, management, monitoring and evaluation; and
- \$141.1 million to expand justice initiatives including the Magistrates Early Referral into Treatment (**MERIT**) program (\$35.1 million), Circle Sentencing (\$4.2 million), Justice Reinvestment (\$9.8 million), the Youth Koori Court (\$5.8 million), and the Drug Court (\$82 million).

This investment builds on existing work and previous Government commitments including the 2020-21 investment of \$7.5 million for a purpose-built facility for withdrawal management and residential rehabilitation in Dubbo and the investment of \$27.9 million for the expansion of the NSW Drug Court to Dubbo.

Addressing the harms of alcohol and other drugs is a shared responsibility between the Commonwealth Government (which has responsibility for primary care), state Governments, non-government organisations, peak bodies, and communities.

The NSW Government will continue to reduce the harm and minimise the impact of ice and other ATS on individuals, families, and communities and work with stakeholders to improve the coordination of alcohol and other drug service delivery.

A detailed response to the recommendations of the Inquiry is provided below.

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## Recommendations

- 1 That the NSW Government ensure that all government employees and NGO partners be trained in trauma-informed practice. Such training should be co-designed and delivered by people with lived experience of trauma, including Aboriginal people.

### Support

The NSW Government recognises the importance of trauma-informed training and is working to identify opportunities to incorporate trauma-informed practice into Government policy and service delivery.

The NSW Public Service Commission is developing foundational online trauma-informed workforce training about the Stolen Generations and the impact of past forcible removal policies and practices on their lives and Aboriginal communities for all NSW public sector employees. This is part of a response package to Unfinished Business, the NSW Parliament General Purpose Standing Committee's report on its inquiry into Stolen Generations reparations.

NSW Government agencies, including the Department of Communities and Justice, NSW Health and Education will continue to deliver agency-specific trauma-informed practice in training modules for staff.

- 2 That NSW Health develop and implement a project to reduce stigma, including:
  - a public education campaign about amphetamine-type stimulants and people who use amphetamine-type stimulants, with a focus on raising awareness and dispelling myths
  - the dissemination of existing best practice communication guidelines to government and non-government agencies that come into frequent contact with people who use amphetamine-type stimulants
  - the development and implementation of anti-stigma training resources for government and non-government health workers
  - appropriate community-based strategies
  - the involvement of people with lived experience of drug use in the development and implementation of the project.

### Support

NSW Health is already working on a project to reduce stigma and discrimination of people with lived experience of alcohol and other drug use who access NSW Health funded services. The project aims to minimise stigmatising behaviours amongst the workforce, ensure treatment and care is delivered free from stigma and discrimination and create enabling environments via structural changes, policies and clinical guidance documents.

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<p>3 That the NSW Government work with the Commonwealth, other state and territory governments and the Australian Press Council to strengthen the implementation of the Mindframe media guidelines, including monitoring of media reporting that may contribute to stigma.</p>	<p><b>Support</b></p> <p>The NSW Government will work with the Commonwealth, other state and territory governments and the Australian Press Council to strengthen the implementation of the Mindframe media guidelines.</p>
<p>4 That the NSW Government include people with lived experience of drug use and their representative organisations in the development and implementation of all future drug education, prevention and harm reduction campaigns.</p>	<p><b>Support</b></p> <p>NSW Health delivers education, prevention, and harm reduction campaigns, and will continue to ensure people with lived experience are involved in the development of these campaigns.</p>
<p>5 That the NSW Government develop and implement, as a matter of priority, a whole-of-government AOD policy that:</p> <ol style="list-style-type: none"> <li>1. recognises that the use of drugs is a health and social issue</li> <li>2. prioritises health and social responses to drug use and recognises the harms associated with punitive responses</li> <li>3. is evidence based, consistent with international direction and respectful of human rights</li> <li>4. maintains harm minimisation as the overarching objective, in alignment with the National Drug Strategy but repositions supply, demand and harm reduction as goals, with 'pillars' to achieve these goals including social welfare, prevention, treatment, harm reduction, law enforcement, and legislation/regulation</li> <li>5. ensures an appropriate distribution of resources and activity to meet the overarching objective of harm minimisation</li> <li>6. recognises that drug use occurs across a spectrum of use, and articulates objectives and interventions to prevent the uptake of drugs, as well as for users across that spectrum</li> <li>7. addresses the occurrence and impact of polydrug use</li> </ol>	<p><b>Support</b></p> <p>The NSW Government will develop and implement a whole-of-government Alcohol and Other Drug (<b>AOD</b>) Strategy that outlines NSW's approach to AOD. This AOD Strategy will align with the National Drug Strategy, and use the evidence presented by the Inquiry to highlight the opportunities to address ATS and other AOD-related harms in NSW.</p> <p>Several NSW Government agencies have existing drug and/or alcohol strategies and action plans. This whole-of-government AOD Strategy will build on and complement existing work.</p>

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8. ensures that policy and service responses for people who use drugs and their families address their broader social and health needs holistically
9. acknowledges the social determinants of drug use and of drug dependence
10. recognises and seeks to address the risk factors associated with the use of drugs, including social vulnerability and exclusion, family vulnerability or family history of drug use, history of trauma (including intergenerational trauma), lack of engagement with education and employment, unstable accommodation and poor physical or mental health
11. recognises and promotes protective factors against drug use, including strong and resilient families and communities, education, social interaction and support, good coping and decision-making skills, and good general health
12. recognises and seeks to address the nature, extent and impact of stigma experienced by people who use drugs
13. recognises the needs of priority populations, including:
  - Aboriginal people and communities
  - culturally and linguistically diverse communities
  - people identifying as lesbian, gay, bisexual, transgender, queer or intersex (LGBTQI+)
  - people in contact with the criminal justice system
  - people in particular occupations
  - people living in regional, rural or remote NSW
  - people with a mental health condition
  - people with a cognitive disability
  - pregnant women

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<ul style="list-style-type: none"> <li>• older people</li> <li>• people experiencing homelessness</li> <li>• young people</li> </ul> <p>and incorporates interventions designed to address the needs of each of these groups</p> <p>14. includes in its design the perspective and input of people with lived experience of drug use.</p>	
<p>6 That the NSW Government develop a Drug Action Plan to support the coordinated implementation of activity under the NSW AOD policy, relevant Commonwealth policies, recommendations of this Inquiry and other relevant reviews and inquiries, and that this plan should be accompanied and supported by an agreed set of outcome indicators.</p>	<p><b>Support</b></p> <p>The NSW Government will develop a NSW Drug Action Plan to accompany the NSW AOD Strategy.</p>
<p>7 A. That the Premier appoint a dedicated Minister with a drug and alcohol portfolio to oversee and coordinate the implementation of the Special Commission of Inquiry's recommendations, which should include overseeing the development of the NSW AOD policy and Drug Action Plan.</p> <p>B. That a unit be established in the Department of Premier and Cabinet to lead this work.</p> <p>C. That a Ministerial Advisory Group be established to support the minister responsible for leading the development and implementation of the NSW AOD policy and Drug Action Plan with representation from:</p> <ul style="list-style-type: none"> <li>• the academic, research, justice, health, treatment provision and drug education sectors</li> <li>• Aboriginal organisations or community groups</li> <li>• people with lived experience of drug use and their communities</li> </ul>	<p><b>Noted</b></p> <p>While the Inquiry has identified an opportunity to appoint a dedicated Minister for Drugs and Alcohol, the NSW Government considers that current ministerial responsibilities provide for the strongest opportunity to put in place a cohesive and comprehensive response to drug and alcohol use and misuse in NSW.</p> <p>The NSW Government will look for opportunities to ensure consistency and collaboration across portfolios. Implementation of recommendations will be owned by respective agencies and NSW's overall approach to alcohol and other drugs will be outlined through the NSW AOD Strategy and accompanying Action Plan.</p>

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<ul style="list-style-type: none"> <li>• each of the priority populations identified in the NSW AOD policy.</li> </ul>	
<p>8 That NSW Health and the NSW Department of Communities and Justice collaborate with the Commonwealth Government and with other states and territories to improve national leadership of AOD policy by:</p> <ul style="list-style-type: none"> <li>• advocating to increase the frequency of Ministerial Drug and Alcohol Forum meetings</li> <li>• working with Ministerial Drug and Alcohol Forum members to develop a work plan with clear actions and deliverables</li> <li>• tracking the Ministerial Drug and Alcohol Forum's progress against the workplan</li> <li>• producing appropriate briefings and documents to support the Ministerial Drug and Alcohol Forum and the work plan.</li> </ul>	<p><b>Support in principle</b></p> <p>The Independent Review of COAG Councils and Ministerial Forums recommended disbanding the Ministerial Drug and Alcohol Forum, among other forums, but noted the group can meet to consider one-off issues. The NSW Government will continue its active involvement in the National Drug and Alcohol Health Officials Network to promote collaboration on health-related alcohol and other drug initiatives.</p>
<p>9 That the NSW Government introduce a specific AOD outcome indicator into the outcome-budgeting framework.</p>	<p><b>Support in principle</b></p> <p>The NSW Government will consider the inclusion of a specific AOD outcome indicator as part of the NSW Government outcome budgeting framework.</p> <p>The NSW Health Outcome and Business Plan report to Treasury includes an AOD specific key performance indicator (KPI)- Hospital Drug and Alcohol Consultation Liaison. The intended outcome of this KPI is: to enhance the safety, quality, appropriateness, efficiency of services and outcomes for patients with substance use disorders in hospital settings.</p>
<p>10 That the NSW Government consider making additional funds recovered under <i>the Confiscation of Proceeds of Crime Act 1989</i> (NSW) and the <i>Criminal Assets Recovery Act 1990</i> (NSW) available for the provision of AOD treatment.</p>	<p><b>Support</b></p> <p>The NSW Government will consider making additional funds recovered under the <i>Confiscation of Proceeds of Crime Act 1989</i> (NSW) and the <i>Criminal Assets Recovery Act 1990</i> (NSW) available for the purpose of providing alcohol and drug treatment services.</p>

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<p>11 That in conjunction with increased resourcing for specialist drug assessment and treatment services, the NSW Government implement a model for the decriminalisation of the use and possession for personal use of prohibited drugs, which includes the following elements:</p> <ul style="list-style-type: none"> <li>• removal of the criminal offences of use and possession for personal use of prohibited drugs</li> <li>• at the point of detection, prohibited drugs to be confiscated and a referral made to an appropriately tailored voluntary health/social and/or education intervention</li> <li>• no limit on the number of referrals a person may receive</li> <li>• no civil sanctions for non-compliance.</li> </ul>	<p><b>Not Supported</b></p>
<p>12 In the alternative to Recommendation 11, in conjunction with increased resourcing for specialist drug assessment and treatment services, that the NSW Government introduce a legislated police diversion scheme for use and possession for personal use of prohibited drugs with the following elements:</p> <ul style="list-style-type: none"> <li>• mandatory referral by police of people detected in possession of a prohibited drug to an appropriately tailored health/social and/or education intervention</li> <li>• a maximum of three times that a person may be diverted</li> <li>• threshold quantities that do not unduly limit access to diversion</li> <li>• no requirement to admit guilt.</li> </ul>	<p><b>Support in principle</b></p> <p>The possession and use of illicit drugs in NSW is and will remain a criminal offence.</p> <p>The NSW Government considers that successful implementation of a pre-court diversion scheme is only achievable when relevant services and supports have been established in the health and justice systems. The Government has committed an additional \$499 million to establish new state wide health rehabilitation services and justice initiatives.</p> <p>By 30 June 2023, the NSW Chief Health Officer and NSW Police Commissioner will jointly provide advice to the Government on whether the roll out of services and supports under the Government's commitments is sufficiently advanced to allow commencement of a pre-court diversion scheme. The Government will then make a final decision regarding implementation of the pre-court diversion scheme.</p> <p>The proposed NSW pre-court diversion scheme includes the following elements:</p>

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	<ul style="list-style-type: none"> <li>• expand the current Criminal Infringement Notice scheme to introduce penalties for low level drug offending;</li> <li>• allow NSW Police in their discretion to issue a maximum of two Criminal Infringement Notices to be issued for low level drug offending state-wide, with a Court Attendance Notice being issued for subsequent offences;</li> <li>• allow for the fine associated with the Criminal Infringement Notice to be waived upon the completion of a specific health intervention provided via NSW Health; and</li> <li>• retain NSW Police discretion to charge a person and issue a Court Attendance Notice instead of a Criminal Infringement Notice.</li> </ul> <p>This arrangement will include low level drug offences only, including possession in a small quantity, for self-administration, and possession of certain Schedule 9 or prescribed restricted substances, and operate under existing provisions in the <i>Criminal Procedure Act 1986</i>.</p>
<p>13 That the NSW Government adequately resource the MERIT program to ensure access for all eligible defendants across NSW.</p>	<p><b>Support in principle</b></p> <p>The NSW Government recognises the role of court diversion programs in reducing drug and alcohol harms and is investing \$35.1 million over four years, with ongoing funding of \$12 million per year, towards the expansion of the Magistrates Early Referral into Treatment program. In the first four years, this will provide at least 8,650 additional adult offenders with a rehabilitation program.</p>
<p>14 That the NSW Government expand and adequately resource the Drug Court of NSW to meet demand at existing locations and to progressively expand the Court to priority regional areas, together with appropriate support for local services.</p>	<p><b>Support</b></p> <p>The NSW Government recognises the importance of the NSW Drug Court. On 17 June 2021, the NSW Government announced funding of \$27.9 million over four years to expand the NSW Drug Court to Dubbo to increase diversion into treatment for those who need it. In addition, the Government will invest an additional \$2 million per annum to provide treatment services to the Dubbo Drug Court and \$82 million over four years, and ongoing</p>

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	funding of \$24.1 million per year, towards expanding the Drug Court in Sydney from one sitting day per week to five per week, including an Aboriginal List in the Dubbo, Parramatta, and Sydney Drug Courts.
15 That further to the expansion of the Drug Court of NSW, Corrective Services NSW be resourced to expand the operation and availability of the Compulsory Drug Treatment Correctional Centre, including to make it available to women and in additional locations.	<p><b>Support in principle</b></p> <p>The NSW Government supports the expansion of the operation and availability of the Compulsory Drug Treatment Correctional Centre, subject to funding and infrastructure requirements.</p>
16 That the NSW Government appropriately adapt and resource the MERIT program for young people and make it available across NSW.	<p><b>Support in principle</b></p> <p>The NSW Government supports suitable diversion options for children and young people but notes that the adult MERIT model is not suitable for young people, particularly in areas where there are limited treatment options.</p> <p>The NSW Government will consider alternative options for the expansion of pathways into treatment for children and young people in contact with the criminal justice system, in conjunction with work to increase treatment options.</p> <p>Youth Justice NSW currently manages contracts with Mission Australia to operate Rural Residential Rehabilitation Adolescent AOD Services in Dubbo and Coffs Harbour to provide an intensive AOD program in a residential setting to assist young people to address their alcohol and other drug misuse connected with their offending behaviour. The NSW Government recognises the existing challenges with access to suitable detoxification options for young people prior to entering rehabilitation, particularly with regard to resourcing.</p>
17 A. That the NSW Government implement the following recommendations and findings of the Inquiry into the adequacy of youth diversionary programs in NSW: <ul style="list-style-type: none"> <li>• Recommendations 1, 2 and 4</li> </ul>	<p><b>Noted</b></p> <p>In August 2019, the NSW Government publicly committed to a review of the <i>Young Offenders Act 1997</i>, as part of the Government Response to the 2018 Parliamentary Inquiry into the Adequacy of Youth Diversionary Programs in NSW. In line with that response, the Department of Communities and Justice (including Youth Justice NSW) and the NSW</p>

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<ul style="list-style-type: none"> <li>• Findings 7 and 8</li> <li>• Recommendation 23</li> <li>• Recommendation 51.</li> </ul> <p>B. That the NSW Government review the <i>Young Offenders Act 1997</i> (NSW) to consider whether offences involving the supply of drugs should continue to be excluded from the operation of the provisions of that Act.</p>	<p>Police Force are co-leading a targeted review of the <i>Young Offenders Act 1997</i>:</p> <ul style="list-style-type: none"> <li>• The purpose of the review is to improve the legislative framework for youth diversion in NSW to increase appropriate diversion of children and young people from the criminal justice system.</li> <li>• Expert stakeholders have been consulted throughout the review.</li> </ul> <p>Youth Justice NSW has developed a specific program for Aboriginal girls and young women: My Journey My Life (Yinnar). Youth on Track was also expanded to Riverina police district on 1 July 2019. In June 2020, Youth on Track expanded referral pathways to include Youth Justice, Justice Health, Community Services, out of home care providers, Community Health, the Family Referral Service, and solicitors.</p> <p>The Government is investing \$5.8 million over four years, and ongoing funding of \$1.5 million per year, to expand the Youth Koori Court to Dubbo Children's Court, operating for up to one day per week, which will assist up to an additional 160 young people over four years. It will also ensure judicial oversight of all three sites at Parramatta, Surry Hills, and Dubbo. The site was selected based on the significant population of Aboriginal young people who may benefit from the program.</p>
<p>18 That for the purposes of the <i>Criminal Records Act 1991</i> (NSW), the period of time before which a conviction for use or possession of a prohibited drug may be spent is reduced from 10 years to two years, or in the case of a child or young person, from three years to one year.</p>	<p><b>Support in principle</b></p> <p>Support in principle to reduce the period of time before which a conviction for use or possession of a prohibited drug may be spent, from 10 years to five years for adults, subject to further consultation with stakeholders.</p>
<p>19 That consideration of section 25C <i>Crimes Act 1900</i> (NSW) be referred to the NSW Law Reform Commission.</p>	<p><b>Noted</b></p> <p>The NSW Government acknowledges the benefit of reviewing section 25C of the <i>Crimes Act 1900</i> but notes that it is not necessary for a review of this section to be undertaken by the NSW Law Reform Commission. The NSW</p>

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	<p>Government notes that the introduction of section 25C of the <i>Crimes Act 1900</i> was recommended by the expert panel on music festival safety in October 2018 and commenced in November 2018. To date there have been no convictions for this offence. The impact of this amendment has not yet been evaluated. The NSW Government will continue to monitor the operation and impact of this section.</p>
<p>20 That the NSW Government support local, community-driven collective impact initiatives, including justice reinvestment initiatives, that aim to respond to the local drivers of drug use, and actively support the further expansion of such programs, in consultation with local communities.</p>	<p><b>Support</b></p> <p>The NSW Government supports the adoption of local, community-driven collective impact initiatives, including justice reinvestment initiatives, to respond to drug use in communities.</p> <p>The Commonwealth Minister for Health previously provided \$1.5 million over five years for the Maranguka Justice Reinvestment Project under the Commonwealth Stronger Places, Stronger People program with an additional \$300,000 funding from the NSW Government. The NSW Government committed a further \$320,000 to the second year of funding, administered by the Department of Planning, Industry and Environment.</p> <p>The NSW Government is investing \$9.8 million over four years to expand justice reinvestment initiatives, including funding for:</p> <ul style="list-style-type: none"> <li>• commissioning robust Justice Reinvestment trials;</li> <li>• capability-building and centralised coordination to support project management, data collection, and monitoring and evaluation.</li> </ul>
<p>21 A. That the NSW Government develop a whole-of-government education strategy that considers drug education in school and non-school-based settings, with the objectives of improving understanding across the community of:</p> <ul style="list-style-type: none"> <li>• the harms associated with amphetamine-type stimulant use</li> </ul>	<p><b>Support</b></p> <p>The NSW Government will develop a comprehensive drug education strategy that considers drug education in school and non-school based settings. A particular focus will be on young people. The Department of Education will work with NSW Health to finalise any changes to drug education as part of the NSW curriculum review. Any changes will continue to ensure the curriculum is aligned with the National Drug Strategy. For non-school based settings, NSW Health will continue to deliver a range of</p>

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<ul style="list-style-type: none"> <li>• how to reduce the harms associated with amphetamine-type stimulant use</li> <li>• how to access services and support to manage drug use.</li> </ul> <p>B. That this education strategy include specific strategies and messages targeted at the priority populations identified in the AOD Policy and at different types of drug use.</p>	<p>population-based community engagement and education programs along with targeted resources for priority populations.</p>
<p>22 That in consultation with relevant experts and young people, the NSW Department of Education review the Life Ready program to ensure it meets the drug education needs of students, including consideration of:</p> <ul style="list-style-type: none"> <li>• the emphasis given in the program to drug education</li> <li>• the content of the program relating to drug education</li> <li>• whether Life Ready should be made available to non-government schools.</li> </ul>	<p><b>Support</b></p> <p>The Department of Education will review the Life Ready program in consultation with relevant experts.</p>
<p>23 That the NSW Department of Education establish a panel of recommended external providers of school-based drug education programs. In establishing this panel, the Department should:</p> <ul style="list-style-type: none"> <li>• ensure that programs are evidence based and strengths based</li> <li>• ensure that programs are aligned to the objectives of the syllabus</li> <li>• help schools determine which provider is best suited to their local context</li> <li>• publish this panel to the non-government sector.</li> </ul>	<p><b>Support in principle</b></p> <p>The Department of Education will consider establishing a panel of recommended external providers of school-based drug education programs following the ongoing review of the curriculum and the review of the Life Ready program.</p>
<p>24 That the NSW Government develop further KPIs related to AOD treatment services that include a mix of output and outcomes for inclusion in all local health district service agreements.</p>	<p><b>Support</b></p> <p>NSW Health is working towards output and outcome measures. An Alcohol and Other Drugs Outcomes Register has been established to identify and</p>

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	<p>monitor health outcomes for people accessing alcohol and other drug treatment using linked data from a number of NSW Health sources.</p> <p>NSW Health funded non-government organisations report against a set of core indicators to monitor and improve service quality and patient safety and client reported outcomes. Services delivered by local health districts report against alcohol and other drug activity indicators articulated in the Service Level Agreements.</p>
<p>25 A. That NSW Health continue to use the Drug and Alcohol Service Planning Model as one input into service planning processes.</p> <p>B. That to ensure that the Drug and Alcohol Service Planning Model is being used in the most effective manner, NSW Health:</p> <ul style="list-style-type: none"> <li>• engage an appropriate expert to periodically review and update the Drug and Alcohol Service Planning Model to reflect current use patterns and associated harms and treatment needs related to amphetamine-type stimulants</li> <li>• make the Drug and Alcohol Service Planning tool and its relevant outputs and data available for use as a planning tool by all local health districts, NSW primary health networks and non-government AOD service providers</li> <li>• make the Drug and Alcohol Service Planning tool and its relevant outputs and data available to other states and territories, and to the Commonwealth Department of Health.</li> </ul>	<p><b>Support</b></p> <p>NSW Health will continue to review the latest surveillance, epidemiological, population, and service utilisation data to inform service planning processes. This includes utilising the analysis provided by the NSW Alcohol and Other Drugs Outcome Register. NSW Health will share relevant information with service delivery partners.</p> <p>NSW Health is committed to establishing a more strategic, needs based approach to state-wide service planning and will review best practice options for contemporary service planning processes for NSW. \$20.2million in funding will support the better use of data and evidence to inform system and service responses.</p>
<p>26 That NSW Health work with the Commonwealth Department of Health to identify opportunities to better support and facilitate enhanced collaboration and joint AOD service planning between primary health networks and local health districts, including a focus on co-commissioning of services.</p>	<p><b>Support</b></p> <p>NSW Health will continue to work with the Commonwealth Department of Health to improve collaboration and joint alcohol and other drug service planning. This work will focus on the co-commissioning of services.</p>

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<p>27 That the NSW Government:</p> <ul style="list-style-type: none"> <li>• increase standard AOD contract lengths to a minimum of five years</li> <li>• align the terms, performance and data reporting requirement across all AOD contracts (including commissioning terms, procurement criteria and performance reporting).</li> </ul>	<p><b>Support in principle</b></p> <p>NSW Health implemented up to four-year funding arrangements with the non-Government sector in 2019/20. The NSW Government will continue to advocate for the Commonwealth Government to commit to longer term funding arrangements for non-government organisations.</p>
<p>28 That NSW Health work with relevant stakeholders, including professional associations and universities, to increase the amount of AOD content in undergraduate and postgraduate accredited training.</p>	<p><b>Support</b></p> <p>NSW Health will explore opportunities to further engage with stakeholders to increase the amount of alcohol and other drug content in accredited training programs.</p>
<p>29 That NSW Health grow and better utilise a peer workforce in the delivery of AOD services, including by investing in the development of an AOD peer workforce with formalised employment arrangements and structured clinical supervision where appropriate.</p>	<p><b>Support</b></p> <p>NSW Health recognises the value of a peer workforce when planning the provision of services. \$66 million will be invested in increasing the alcohol and other drugs workforce. This includes support for the growth of the NSW peer workforce.</p> <p>As part of this development, NSW Health will continue to engage with relevant stakeholders to utilise the experiences of a diverse range of people.</p>
<p>30 That NSW Health, in collaboration with the NGO sector, develop an AOD workforce strategy to ensure that the government and non-government AOD workforce is well positioned to meet the needs of people who use drugs. This workforce strategy should include the following elements:</p> <ul style="list-style-type: none"> <li>• a detailed workforce profile, including size and key demographics</li> <li>• a forecast of future workforce needs based on projected AOD treatment needs, and strategies to ensure that the required workforce is available</li> </ul>	<p><b>Support</b></p> <p>NSW Health will work with key stakeholders to build on existing workforce development resources to address the elements noted in the recommendation and will incorporate workforce development as part of the NSW Alcohol and Other Drugs Strategy.</p> <p>Supporting and valuing the AOD workforce is essential to providing high quality, responsive person-centred care. Undertaking workforce planning and comprehensive workforce development is needed to ensure a sustainable workforce, capable of meeting future challenges, innovation and reform.</p>

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- strategies to address the difficulties faced by the NGO sector in recruiting and retaining staff
- strategies to move health professionals into AOD specialist positions and to support career pathways to AOD medical and allied health specialties, including scholarships for people living in regional areas to defray the cost of AOD-specific training and accreditation, mentoring by senior clinicians and strategies to support GPs to undertake extended skills training in AOD
- a focus on strengthening the peer workforce, in recognition that peer workers are well placed to engage hard-to-reach people and help them navigate treatment services
- a focus on supporting the unique needs of the Aboriginal AOD workforce
- strategies to ensure the AOD workforce has the necessary skills to meet the specific needs of priority populations identified in the National Drug Strategy and in this report
- strategies to build capacity of regional AOD medical and allied health workforce including by, for example, offering financial and workplace incentives to encourage people to move into regional areas
- strategies to strengthen continuing professional development for AOD workers, such as through interactive online training modules
- strategies to ensure the AOD workforce has appropriate amphetamine-type stimulant specific training and training in mental health.

31 That the NSW Government urgently increase its investment in specialist AOD health services to meet the significant unmet demand for services across the state.

### Support

\$163.8 million will be invested to significantly enhance access to specialist treatment and support, especially in regional and rural areas. This funding will increase the availability of evidence-based services in areas where

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	<p>there is unmet need; provide targeted services for key priority populations, including women and their children, young people, Aboriginal people, people with mental health concerns and families and carers; and build the capacity of generalist and specialist health services to improve the management and referral of AOD presentations.</p> <p>\$96.28 million will be committed to providing more access to coordinated and connected person-centred approaches to care across government for people with multiple and complex needs.</p> <p>\$66 million will be committed to expand the alcohol and other drug workforce.</p> <p>\$11.7 million will be committed to enhancing digital capability and virtual healthcare to extend the reach of specialist treatment services across the state.</p> <p>This is in addition to the 2020-21 Government commitment to fund a purpose-built treatment facility and Drug Court in Dubbo and the 2019 election commitment to fund a rehabilitation service in Goulburn.</p>
<p>32 That as a matter of priority, NSW Health investigate the development of behavioural short-stay units within or co-located with emergency departments for the management of patients with acute severe behavioural disturbance, including by:</p> <ul style="list-style-type: none"> <li>• developing a model of care, including guidance on design requirements, staffing and arrangements for telehealth input between metropolitan and regional, rural and remote locations</li> <li>• prioritising funding for required capital works to support local health districts in implementing this model of care</li> <li>• monitoring and evaluating the implementation and outcomes of the PANDA unit at St Vincent's Hospital.</li> </ul>	<p><b>Support</b></p> <p>A strategic priority for NSW Health is to ensure that the consultation and liaison support in emergency departments assists in the management of patients presenting to hospitals with drug and alcohol issues. NSW Health has issued guidance outlining the requirements for the design and use of Safe Assessment Rooms in NSW Emergency Departments to accommodate the needs of patients with, or at risk of developing, acute severe behavioural disturbance.</p> <p>The NSW Government has opened a Psychiatry and Non-Prescription Drug and Alcohol Unit (<b>PANDA</b>) at St Vincent's Health Network. The Government has provided a funding grant to support this unique specialist unit to provide a safe environment for patients experiencing complex alcohol and other drug and mental health issues.</p>

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	<p>The Government will invest in four short stay, behavioural assessment units to support the safe provide a safe space for patients presenting to emergency departments requiring prolonged emergency care due to acute alcohol and other drug related issues and mental illness; including 2 in regional/rural NSW.</p> <p>The PANDA and short stay units will be closely monitored, and outcomes evaluated.</p>
<p>33 That NSW Health train staff to conduct AOD screening when clinically indicated and refer for treatment as appropriate.</p>	<p><b>Support in principle</b></p> <p>NSW Health staff working in the AOD area are guided by core standards of care to ensure comprehensive assessment and referral into treatment. For non-AOD-specialised staff, NSW Health will continue to provide access to specialist advice and appropriate workplace training to support early identification and referral into treatment, where clinically indicated.</p>
<p>34 A. That NSW Health increase investment in hospital drug and alcohol consultation liaison services through targeted funding for positions that expands state-wide coverage, including for availability outside of business hours.</p> <p>B. That NSW Health engage with local health districts and clinicians to develop appropriate amphetamine-type stimulant-specific training resources for consultation liaison staff.</p>	<p><b>Support</b></p> <p>A strategic priority for NSW Health is to improve access to Alcohol and Other Drug Hospital Consultation Liaison (<b>AOD-HCL</b>) services for people presenting to hospitals with AOD related concerns. These services provide support and training to other clinicians in the identification, management and referral of AOD presentations.</p> <p>New funding of \$4.2 million per annum in AOD-HCL services will significantly improve the capacity for emergency departments across NSW to respond to AOD related presentations, including extended hours of service for areas of highest demand (i.e. evenings and weekends).</p>
<p>35 That, in alignment with Improvement Direction 13 of the Pathways to Residential Rehabilitation final report, NSW Health promote and facilitate increased access to ambulatory withdrawal for amphetamine-type stimulants in clinically appropriate circumstances. This should</p>	<p><b>Support</b></p> <p>NSW Health will promote and facilitate increased access to ambulatory withdrawal where clinically appropriate. The updated NSW Drug and Alcohol Withdrawal Clinical Practice Guidelines will provide guidance to</p>

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	include appropriate support for the workforce, including GPs, to deliver care in non-acute settings.	support the workforce to deliver ambulatory withdrawal in non-acute settings.
36	<p>That NSW Health, as part of the current review and update of the NSW Drug and Alcohol Withdrawal Clinical Practice Guidelines, ensure the Guidelines:</p> <ul style="list-style-type: none"> <li>• address the needs of priority populations who use amphetamine-type stimulants, such as pregnant women and young people</li> <li>• guide the delivery of culturally appropriate and trauma-informed care during withdrawal from amphetamine-type stimulants</li> <li>• include guidance and information on domestic and family violence, mental health conditions and suicide risk, given their association with the amphetamine-type stimulant use.</li> </ul>	<p><b>Support</b></p> <p>NSW Health has completed the update of the NSW Drug and Alcohol Withdrawal Clinical Practice Guidelines in line with the most recent evidence and clinical consensus.</p>
37	<p>A. That to best manage and treat comorbid patients, NSW Health ensure that access to specialist mental health input is available in all alcohol and other drug services, including those provided by non-government organisations.</p> <p>B. That further to Improvement Direction 15 of the Scoping Project, NSW Health work with service providers to:</p> <ul style="list-style-type: none"> <li>• improve equity of access to people negatively affected by current entry requirements to residential rehabilitation</li> <li>• ensure the capacity of residential rehabilitation services to dispense medication, including antipsychotic medication.</li> </ul>	<p><b>Support</b></p> <p>NSW Health recognises the need to ensure clear referral pathways and effective management of people presenting with co-occurring mental health and alcohol and other drug issues. Improved management of comorbidity is a key feature of new investment, with \$66 million in funding towards increased workforce development and \$96.2 million in funding towards more integrated models of care.</p> <p>NSW Health supports ongoing workforce education, policy development, clinical guidance, and processes of care to enable access to specialist care across services.</p>
38	A. That NSW Health implement, as a matter of priority, the 16 Improvement Directions identified in the final report of the Pathways to Residential Rehabilitation Scoping Project.	<b>Support</b>

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<p>B. That further to Improvement Direction 2 of the Scoping Project, NSW Health update its existing withdrawal management and residential rehabilitation services contact page to include information about community-based and day programs, as well as the entry requirements of each service listed.</p>	<p>NSW Health is improving public facing information and service access by seeking to streamline pathways into treatment to complement existing local intake and assessment services.</p> <p>\$11.7 million in funding will support an enhancement of telephone and digital information services in line with the improvement directions identified in the Pathways report. This will assist people to access the AOD information and treatment services they need, and receive active referral, case management and peer support while waiting to enter treatment or between treatment episodes, as required.</p>
<p>39 A. That NSW Health, in areas of need, build upon and enhance models of AOD nurse in-reach services to GP clinics, co-commissioned through a local health district and primary health network partnership.</p> <p>B. That primary health networks in NSW continue to enhance and fund the development of training for GPs to support them to effectively screen for amphetamine-type stimulant use and refer into treatment as required.</p>	<p><b>Support in principle</b></p> <p>NSW Health supports collaborative service delivery partnerships between local health districts, Primary Health Networks and other service organisations such as non-government organisations. NSW Health is also supporting shared care arrangements and the delivery of information and education sessions to the primary care sector.</p>
<p>40 A. That primary health networks in NSW continue to enhance, fund and deliver capability building programs for GPs to support them in utilising mental health and chronic disease care plans for AOD use.</p> <p>B. That NSW Health engage with the Commonwealth and advocate for the inclusion of additional AOD-specific items in the MBS to better enable responses to AOD misuse in primary care settings.</p>	<p><b>Support</b></p> <p>NSW Health will continue to support efforts by the Commonwealth to enhance capacity building programs for General Practitioners in utilising mental health and chronic care plans for alcohol and other drug use.</p> <p>NSW Health will work with key stakeholders to continue to advocate for the inclusion of additional alcohol and other drug specific items in the Medicare Benefits Schedule (MBS), building on the developments during the COVID-19 response that enabled increased access to telehealth.</p>
<p>41 That NSW Health:</p> <ul style="list-style-type: none"> <li>take immediate steps to promote the Drug and Alcohol Specialist Advisory Service to clinicians through local health</li> </ul>	<p><b>Support</b></p> <p>The Drug and Alcohol Specialist Advisory Service (<b>DASAS</b>) provides 24-hour specialist support for clinicians to assist in the management of alcohol and other drug presentations, particularly within primary care settings and in</p>

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<p>districts, primary health networks, professional colleges and associations and other networks</p> <ul style="list-style-type: none"> <li>• support the establishment of formal networks of addiction medicine and addiction psychiatry clinical support between metropolitan and regional/rural locations, ensuring:             <ul style="list-style-type: none"> <li>– capacity of telehealth services for these specialties, including specific funding to support service delivery</li> <li>– funding structures which are adequate to support clinicians in the delivery of these services</li> <li>– necessary technical support is provided to deliver these services.</li> </ul> </li> </ul>	<p>regional and rural NSW. DASAS was enhanced in 2019, with continued efforts to actively promote the service through relevant networks.</p> <p>The NSW Government is committed to ensuring people living in NSW have equal access to quality care close to home. NSW Health is increasing access to specialist support for regional and rural NSW through new virtual care hubs, which will minimise barriers to access and inequity.</p> <p>NSW Health is developing a Virtual Care Strategy, informed by the rapid expansion of telehealth during the COVID-19 pandemic. Specific telehealth guidance is also being developed for the alcohol and other drugs sector.</p>
<p>42 That, in alignment with Improvement Directions 5 and 6 of the Pathways to Residential Rehabilitation Report, NSW Health expand the Alcohol and Drug Information Service to provide outreach and follow-up of calls made to the service, as well as guidance for families and carers who are seeking support, and take immediate steps to more widely and effectively promote, and appropriately resource, this service.</p>	<p><b>Support</b></p> <p>NSW Health will use \$11.7 million in funding to establish an information and access service that will ensure people seeking AOD information and treatment are supported to find and access the services they need, including families and carers. The model will include expansion of digital and interactive technology services to deliver improved AOD information to the NSW community and the establishment of a streamlined telephone and web-based service providing AOD brief intervention, assessment, active referral to treatment, and peer support services.</p>
<p>43 That the NSW Government continue to invest in research on treatment interventions for people who use amphetamine-type stimulants, including pharmacotherapy options.</p>	<p><b>Support</b></p> <p>The NSW Government recognises the importance of research on treatment interventions for people who use amphetamine type stimulants and will continue to invest in this research.</p> <p>The annual NSW Health Translational Research Grants Scheme is designed to build research capability and accelerate evidence translation within the NSW public health system. The priority driven grants program includes alcohol and other drugs as a nominated area.</p>

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<p>44 That in any further review or decision to expand the Involuntary Drug and Alcohol Treatment Program, NSW Health consider how the current geographic inequity of access to the program can be overcome.</p>	<p><b>Support</b></p> <p>The Involuntary Drug and Alcohol Treatment Program is being delivered out of two sites in NSW: Bloomfield Hospital in Orange and Royal North Shore Hospital in North Sydney. NSW Health will consider geographic equity of access upon any review of the Program.</p>
<p>45 That to support dual diagnosis approaches to care, NSW Health introduce mandatory training in mental health for all AOD client-facing roles and mandatory training in AOD for all mental health consumer-facing roles.</p>	<p><b>Support in principle</b></p> <p>NSW Health supports workforce education and training targeted at improving staff capacity to more effectively respond to the needs of alcohol and other drug users, including any mental health issues.</p> <p>NSW Health is investing \$66 million in workforce development, which will include training; and is investing \$96.2 million in more integrated service models, which will support dual diagnosis approaches to care.</p>
<p>46 That NSW Health adopt, implement and resource a 'no wrong door' approach in AOD policy and practice so that all people who access a service are appropriately treated, managed or referred, including by way of assertive follow-up.</p>	<p><b>Support</b></p> <p>NSW Health supports an embedded system response to alcohol and other drug use and work across government.</p>
<p>47 A. That, to foster coordinated and collaborative approaches to health and psychosocial wellbeing of people seeking health and social treatment and support for amphetamine-type stimulants, the NSW Government trial a consortium model of care between various agencies and services, including community, primary and acute care, employment, housing and family support and court advocacy services. The location of this trial should be based on area of need.</p> <p>B. That, to improve care pathways for AOD clients with chronic and complex care needs, NSW Health should:</p> <ul style="list-style-type: none"> <li>• expand the current Strategic Framework for Integrating Care to expressly refer to AOD</li> <li>• develop formalised AOD care coordination protocols in consultation with NSW primary health networks, the</li> </ul>	<p><b>Support</b></p> <p>The NSW Government recognises the importance of collaboration and integrated pathways to care. A NSW Health strategic priority is to embed a health system response to alcohol and other drug use and work across government. NSW Health is supporting this through the delivery of multidisciplinary programs that provide access to holistic health and social supports. Through these programs, people with complex and co-occurring needs can access a range of support services through case management models of care.</p> <p>\$96.28 million in funding will support better integration of systems by providing more access to coordinated, person-centred pathways to care across government for people with multiple and complex needs. This will</p>

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<p>Network of Alcohol and Other Drug Agencies, and the NSW Users and AIDS Association.</p> <p>C. That, to improve care pathways and accountability, NSW Health facilitate the sharing of client information across sectors, subject to clients' informed consent.</p>	<p>include new multidisciplinary services to provide wrap-around health and social support.</p> <p>NSW Health will actively promote the Strategic Framework for Integrating Care across the sector to ensure principles of integrated care are applied to improve care pathways for AOD clients presenting with chronic and complex care needs. NSW Health has implemented the Clinical Care Standards, a set of quality statements about the standard of treatment a client can expect. The standards articulate the need for a continuum of care that is integrated across service systems to reduce fragmentation and optimise outcomes.</p> <p>NSW Health will continue to work with partners to ensure timely access to client information, where clinically indicated and appropriate.</p>
<p>48 That NSW Health, in partnership with people who use amphetamine-type stimulants and clinicians involved in providing care for people who develop health-related harms resulting from amphetamine-type stimulants, develop harm reduction and health promotion initiatives directed toward people who smoke amphetamine-type stimulants.</p>	<p><b>Support</b></p> <p>NSW Health will continue to work with people with lived experience and experts to deliver targeted health-related education and harm reduction support to people who use ATS.</p>
<p>49 That NSW Health trial the non-commercial distribution of safer smoking kits through community health services, such as needle and syringe programs, in order to engage with people who smoke amphetamine-type stimulants. These points of distribution should facilitate linkages to a broad range of services including primary and mental health, specialist AOD treatment and psychosocial services for the purpose of brief interventions and provision of harm reduction and health promotion advice.</p>	<p><b>Noted</b></p> <p>As indicated in its response to recommendation 50, the NSW Government does not support an amendment to the <i>Drug Misuse and Trafficking Act 1985</i> (NSW) to remove the prohibition on the possession of ice pipes. NSW Health recognises the importance of providing harm reduction and health promotion advice. NSW Health currently supports and delivers a range of effective strategies that aim to provide harm reduction and health promotion advice for people that use alcohol and other drugs, as well as enable access to treatment and support. These programs include:</p> <ul style="list-style-type: none"> <li>• Breaking the Ice website - A suite of targeted community education and harm reduction resources about crystal methamphetamine ('ice'). This includes specific resources on harm reduction and methamphetamine use and how to access support services.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Your Room website - A range of resources and a directory of services for people in need of advice about harm reduction and access to help.</li> <li>• Stay OK toolkit - A collection of print and digital creative assets designed to target young people (particularly festival-goers) with important harm minimisation messages.</li> <li>• Partnerships with harm reduction organisations - Organisations funded by NSW Health such as the NSW Users and AIDS Association and the Medically Supervised Injecting Centre provide harm reduction services and resources to their networks and clients.</li> </ul>
<p>50 That the NSW Government remove the prohibition in the <i>Drug Misuse and Trafficking Act 1985</i> (NSW) on possession of ice pipes.</p>	<p><b>Not Supported</b></p> <p>The NSW Government does not support the removal of the prohibition on the possession of ice pipes.</p>
<p>51 A. That the <i>Drug Misuse and Trafficking Act 1985</i> (NSW) be amended to provide for supervised drug consumption services to be provided based on local need, including:</p> <ul style="list-style-type: none"> <li>• to remove the restriction on the number of licences available</li> <li>• to allow facilities to provide for other routes of drug consumption, including inhalation</li> <li>• to allow access for young people aged 16 to 18, subject to clinical assessment.</li> </ul> <p>B. That pregnant women be eligible to access drug consumption rooms (including the Medically Supervised Injecting Centre) as clinically advised.</p>	<p><b>Not Supported</b></p> <p><u>Licences available</u> Consistent with the interim response to the Inquiry, the NSW Government does not support removing the current restriction on the number of licences available. The need for additional medically supervised injecting centres (<b>MSIC</b>) has not been sufficiently established.</p> <p><u>Other routes of drug consumption</u> The NSW Government does not support the facilitation of other routes of drug consumption, including inhalation. The MSIC was established to address issues associated with the injection of illicit drugs, in particular heroin, and those policy objectives remain valid, as confirmed by the 2016 statutory review of Part 2A of the <i>Drug Misuse and Trafficking Act 1985</i> (NSW). The MSIC is not equipped to accommodate other methods of illicit drug consumption such as inhalation, which also create occupational, health, and safety concerns for staff and other clients of the MSIC.</p> <p><u>Access for young people aged 16 to 18</u></p>

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	<p>The NSW Government does not support any change to the current age restrictions that apply to the MSIC. The MSIC was deliberately established as a facility for adults and that is reflected in the statutory prohibition on the admission of children. Allowing young people to access the MSIC would inappropriately expose them to other drugs and drug taking practices. The removal of the statutory prohibition may also be seen as normalising or condoning drug taking behaviour by young people.</p> <p><u>Access for pregnant women</u> The NSW Government does not support an amendment to the current licence conditions to allow the licensee to grant pregnant women access to the MSIC. Support for pregnant women addicted to illicit drugs can be provided without changing the licence conditions. A pregnant woman that approaches the MSIC for assistance can be directed to appropriate treatment options. The NSW Government is investing in additional rehabilitation services for pregnant women with \$7.4m being allocated to expanding the scope of Substance Use in Pregnancy and Parenting Services.</p>
52 That drug consumption rooms be integrated with services addressed to the broader health and psychosocial needs of people who use drugs.	<p><b>Noted</b></p> <p>NSW Health recognises the value of creating strong referral pathways and co-locating health and social services with the MSIC to enable access to a range of supports. Uniting currently provides access to mental health, primary care and harm reduction support, co-located at the MSIC. NSW Health has supported the re-location of Kirketon Road Centre to establish a primary health care service above the MSIC. This will help meet local primary healthcare needs for marginalised populations.</p> <p>Consistent with the response to Recommendation 51A, the NSW Government does not support allowing additional illicit drug consumption methods within the MSIC.</p>

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53	<p>A. That the NSW Government establish a state-wide clinically supervised substance testing, education and information service, with branches at appropriate fixed-site locations, to:</p> <ul style="list-style-type: none"> <li>• provide illicit drug market monitoring functions to inform public health and law enforcement responses, and</li> <li>• reduce drug-related harms through the provision, in conjunction with such testing, of appropriate health interventions, consumer education and information to members of the public.</li> </ul> <p>B. That in addition, with a view to establishing an outreach capacity of the service to settings where there is a high risk of harm through illicit drug use, a trial be undertaken onsite at a music festival, and independently evaluated, to:</p> <ul style="list-style-type: none"> <li>• provide illicit drug market monitoring functions to inform public health and law enforcement responses, and</li> <li>• reduce drug-related harms through the provision, in conjunction with such testing, of appropriate health interventions, consumer education and information to members of the public.</li> </ul>	<p><b>Not Supported</b></p> <p>The NSW Government does not support substance testing and is not satisfied that sufficient evidence exists to justify its introduction.</p> <p>However, the NSW Government will continue to explore early warning systems to reduce harms. NSW Health is already working with the NSW Police Force to test seized samples to inform general harm reduction messaging in the community.</p> <p>NSW Health will also contribute to the Emerging Drugs Network of Australia (<b>EDNA</b>) by sharing the information obtained through the emergency department enhanced surveillance system. EDNA is a national project which fosters collaboration between hospitals, forensic laboratories, public health departments, ambulance services, and user groups across Australia. The aim of the project is to share information in relation to patient drug-related toxicology results in Australia to create a national system that will inform the community about the illicit drugs that are causing harm.</p>
54	<p>That NSW Health develop evidence-based guidelines for the optimal delivery of brief interventions at substance checking services.</p>	<p><b>Not Supported</b></p> <p>The NSW Government does not support substance testing and is not satisfied that sufficient evidence exists to justify its introduction.</p>
55	<p>That the NSW Government ensure that responses to harmful amphetamine-type stimulant use in Aboriginal communities draw on and celebrate the strengths of Aboriginal people, communities and culture and acknowledge the important role that connection with Aboriginal culture plays in healing.</p>	<p><b>Support</b></p> <p>The NSW Government is committed to ensuring that responses to ATS use draw on the strength and resilience of Aboriginal communities.</p> <p>The NSW Government is committed to achieving the objectives and outcomes under the National Agreement on Closing the Gap, underpinned</p>

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	<p>by the acknowledgement that Aboriginal and Torres Strait Islander cultures are fundamental to improved life outcomes for Aboriginal and Torres Strait Islander people.</p>
<p>56 That the NSW Government invest in additional data collection and research to better understand the prevalence of amphetamine-type stimulant use, patterns of amphetamine-type stimulant use and prevalence of harms associated with amphetamine-type stimulant use among Aboriginal people, including at a regional level. This should also include a focus on better understanding Aboriginal people's attitudes and perceptions relating to amphetamine-type stimulant use.</p>	<p><b>Support</b></p> <p>The NSW Government will look to improve data collection and research on ATS use by Aboriginal people as part of broader work to enhance data collection, analysis, and application across Government regarding ATS use. \$20.2 million will be invested to better use data and evidence to inform system and service responses.</p>
<p>57 That the NSW Government ensure that responses to harmful amphetamine-type stimulant use in Aboriginal communities are grounded in a meaningful understanding of the historical, social and cultural context for amphetamine-type stimulant use and are designed, implemented and controlled by those Aboriginal communities. This includes an understanding of Aboriginal definitions of health and wellbeing; the importance of family, community, culture and Country to Aboriginal health and wellbeing; the impacts of colonisation and racism on the health of Aboriginal people; the effects of trauma experienced personally, intergenerationally and culturally; the disproportionate effects of socioeconomic disadvantage; and the principles of self-determination.</p>	<p><b>Support</b></p> <p>The NSW Government is committed to ensuring that its response to ATS use in Aboriginal communities is not only culturally appropriate but ensures that Aboriginal communities are given the tools needed to address the impacts ATS has on their community. The Government will work with Aboriginal communities across NSW to identify new opportunities to empower those communities to drive their response to ATS use.</p> <p>The NSW Aboriginal Health Plan recognises that "Aboriginal health means not just the physical wellbeing of an individual but refers to the social, emotional and cultural wellbeing of the whole community in which each individual is able to achieve their full potential as a human being, thereby bringing about the total wellbeing of their community".</p>
<p>58 That the NSW Government partner with Aboriginal communities and Aboriginal community-controlled health services to urgently develop and to significantly increase the availability of local specialist drug treatment services that are culturally respectful, culturally competent and culturally safe to meet the unique needs of Aboriginal people.</p>	<p><b>Support</b></p> <p>The NSW Government will continue to partner with Aboriginal communities and Aboriginal Community Controlled Health Services (<b>ACCHS</b>) to ensure that local specialist drug treatment services are culturally appropriate and are therefore effective at engaging Aboriginal clients in treatment services.</p> <p>Aboriginal people are a priority population in relation to the investment that the NSW Government is making in a range of new programs and activities to increase the availability of specialist drug treatment. Funding will support</p>

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	<p>new treatment services including withdrawal management, substance use in pregnancy and parenting services, rehabilitation and community-based support. There will also be targeted workforce development activities such as increasing the Aboriginal Health/Nursing Workforce, introducing traineeships, and skills development.</p>
<p>59 That in implementing Recommendation 2 from the 2018 report of the NSW Parliamentary Inquiry into the provision of drug rehabilitation services in regional, rural and remote NSW, which recommends in part that the NSW Government significantly increase funding to drug and alcohol-related health services, the NSW Government ensure that the provision of specific services for Aboriginal people meets the unique needs of Aboriginal people.</p>	<p><b>Support</b></p> <p>The NSW Government provides funding to 41 ACCHS and health related organisations to deliver culturally safe and tailored health services. This funding will be used to support healthy lifestyles, the prevention and management of chronic disease, oral health, and drug and alcohol prevention and treatment. The relevant ACCHS can determine priorities for expenditure, including patient transport, based upon community needs.</p> <p>Aboriginal people are a priority population for the investment that the NSW Government is making in a range of new programs and activities to increase the availability of specialist drug treatment. Funding will support new treatment services including withdrawal management, substance use in pregnancy and parenting services, rehabilitation and community-based support. There will also be targeted workforce development activities such as increasing the Aboriginal Health Workforce, introducing traineeships, and skills development.</p>
<p>60 That the NSW Government expand the Youth Koori Court to regional areas to improve access to culturally appropriate diversion programs for Aboriginal youth.</p>	<p><b>Support in principle</b></p> <p>The 2018-19 Budget announced \$2.7 million to expand the Youth Koori Court over three years to an additional site (Surry Hills). The Government is investing a further \$5.8 million over four years, and ongoing funding of \$1.5 million per year, to expand the Youth Koori Court to Dubbo Children's Court, operating for up to one day per week, which will assist up to an additional 160 young people over four years. It will also ensure judicial oversight of all three sites at Parramatta, Surry Hills, and Dubbo. The site</p>

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	<p>was selected based on the significant population of Aboriginal young people who may benefit from the program.</p>
<p>61 That the NSW Government implement the Walama Court proposal, including through adequate funding and resourcing, to improve access to culturally appropriate diversion programs for Aboriginal people.</p>	<p><b>Noted</b></p> <p>The Government has provided support for a Walama List pilot that commenced on 31 January 2022.</p> <p>The Government is investing \$82 million to expand the Drug Court, which includes an Aboriginal List at the Dubbo, Parramatta, and Sydney Drug Courts. This will enable the recruitment of an Aboriginal identified case coordinator at each location and the creation of a brokerage fund for participants to enable them to access culturally appropriate services.</p> <p>The Government is also investing \$4.2 million over four years, and ongoing funding of \$1 million per year, to expand the Circle Sentencing program to additional courts in areas with eligible defendants and significant Indigenous populations. With the expansion, these courts will be able to offer an alternative to Local Court proceedings where an offender is sentenced by community members, including Aboriginal elders, with the full sentencing powers of the Court. This will provide up to an additional 2,108 Aboriginal offenders with alternative Local Court sentencing. The NSW Bureau of Crime Statistics and Research found that Aboriginal people who participate in Circle Sentencing have lower rates of imprisonment and recidivism than Aboriginal people who are sentenced in the traditional way.</p>
<p>62 That the NSW Government, through NSW Health, develop and implement an Aboriginal AOD Health Worker Training Program.</p>	<p><b>Support</b></p> <p>NSW Health recognises the importance of Aboriginal AOD Health workers and will explore opportunities to enhance and retain Aboriginal AOD workers. The AOD workforce, including Aboriginal workers, will be addressed as part of the NSW AOD Strategy.</p> <p>Training Services NSW delivers a suite of Aboriginal initiatives that aim to improve training, education, employment, and business outcomes for Aboriginal and Torres Strait Islander people and communities in NSW. One of these initiatives has a focus on providing culturally appropriate mentor</p>

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	<p>support for Aboriginal trainees and apprentices to improve completion rates and post-training outcomes.</p> <p>NSW Health is investing new funding of \$2.5 million annually in new traineeship programs, including Aboriginal traineeships and scholarship opportunities for Aboriginal Health Workers. Participation in traineeships has been found to have positive effects on both employment prospects, skill development, and career satisfaction, with feedback from both employers and participants indicating the value of these programs in embedding culturally safe practices and building a sustained workforce.</p>
<p>63 That the NSW Government provide new specific funding and support to primary care Aboriginal community-controlled health services to build service capacity and staff skills to meet the needs of clients and communities affected by drug use.</p>	<p><b>Support</b></p> <p>NSW Health will continue to work with key stakeholders to build partnerships with Aboriginal community-controlled services and support primary care services to build service capacity and skills to meet the needs of communities affected by drug use.</p> <p>Aboriginal people are a priority population in relation to the investment that the NSW Government is making in a range of new programs and activities to increase the availability of specialist drug treatment. Funding will support new treatment services including withdrawal management, substance use in pregnancy and parenting services, rehabilitation and community-based support. There will also be targeted workforce development activities such as increasing the Aboriginal Health Workforce, introducing traineeships, and skills development.</p>
<p>64 That the NSW Government enhance existing strategies to increase and retain the number of Aboriginal people working in agencies and organisations that provide support and treatment to Aboriginal people affected by AOD, including by implementing the following:</p> <ul style="list-style-type: none"> <li>• scholarships for Aboriginal Health Workers to train in AOD treatment</li> </ul> <p>Recommendation 11 of the 2017 NSW Parliamentary Inquiry into the provision of drug rehabilitation services in regional, rural and remote</p>	<p><b>Support</b></p> <p>The NSW Government is committed to ensuring Aboriginal people are equally represented across all grades, including leadership positions to drive policy and project direction. As part of the Premier's Priorities, the NSW Government is working to increase the number of Aboriginal people in senior leadership roles across the NSW public sector to 114 roles and represent 3 per cent of all staff in non-executive salary classes by 2025.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

<p>NSW, that 'the NSW Government investigate the efficacy of establishing a scheme to establish a full-time local Aboriginal trainee position alongside every skilled position recruited in areas with a significant Aboriginal population'.</p>	<p>The NSW Government is seeking to promote Aboriginal employment across a range of agencies, including NSW Health, through its NSW Public Sector Aboriginal Employment Strategy 2019-2025: NSW Working Together For a Better Future. This Strategy sets the direction and targets for improving the employment of Aboriginal peoples in the NSW public sector and builds on the success of the 2014-2017 Aboriginal Employment Strategy.</p> <p>New funding of \$66 million will support significant AOD workforce enhancements. This includes the establishment of Aboriginal Health Workers/Nurses and new Aboriginal traineeships and scholarship opportunities for Aboriginal Health Workers.</p>
<p>65 That the NSW Government ensure that staff of all agencies provide services and care to Aboriginal people that are culturally respectful, culturally competent and culturally safe.</p>	<p><b>Support</b></p> <p>The NSW Government has a number of initiatives in place to enhance the cultural competency of Government staff to ensure that Government policy and services are developed and implemented in a culturally appropriate way:</p> <ul style="list-style-type: none"> <li>• The NSW Public Sector Aboriginal Employment Strategy 2019-2025 goes beyond employment targets to include a focus on growing Aboriginal cultural capability for all employees across the sector.</li> <li>• Cultural competency training for administrative and front-line staff has been developed and delivered by Aboriginal staff and providers.</li> <li>• Agencies have developed Reconciliation Action Plans in consultation with Aboriginal staff to ensure that working environments and service delivery are culturally respectful and safe and are focused on empowering Aboriginal people.</li> <li>• Programs that improve outcomes for Aboriginal people and communities, including the whole-of-government OCHRE (Opportunity, Choice, Healing, Responsibility, Empowerment) initiative, NSW Education Connected Communities Strategy, and the Youth Justice Aboriginal Strategic Plan.</li> </ul>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

<p>66 A. That the NSW Government pilot a Housing First approach to support people who use amphetamine-type stimulants and are experiencing housing instability, that provides no-barrier housing, primary and mental health and psychosocial supports to help address drug-related harms in the homeless population.</p> <p>B. That in developing the approach, the Government consider the Portland Hotel Society model and its applicability to the NSW context.</p>	<p><b>Support</b></p> <p>The NSW Government remains committed to providing a safe and secure environment for all residents of NSW, with work underway through the Premier's Priority to reduce street homelessness across NSW by 50 per cent by 2025.</p> <p>The NSW Government delivers its specialist homelessness program in partnership with non-Government agencies. A number of additional programs under the NSW Homelessness Strategy are accessible to people who need AOD supports.</p> <p>The NSW Government is investing new funding of \$6.3 million annually in the establishment of new wrap-around holistic case management and support services to focus on the social determinants of health, such as housing.</p> <p>The NSW Government has committed additional funding for the expansion of the Together Home project, which provides wrap around support to maintain tenancies, including case management, drug and alcohol services, and mental health supports.</p>
<p>67 That the NSW Government ensure that social housing tenants who undertake residential drug rehabilitation or detoxification do not lose their housing while undergoing treatment.</p>	<p><b>Support in principle</b></p> <p>The NSW Government will maintain its existing policy of allowing a 6-month absence from dwelling property for tenants entering drug rehabilitation or detoxification services. Further periods of absence will be considered on a case by case basis to ensure that benefits for existing tenants are maximised, without unduly impacting on the overall level of social housing supply for those seeking assistance.</p>
<p>68 That the NSW Government consider a model similar to the Housing and Accommodation Support Initiative for people who use amphetamine-type stimulants and which includes services that provide a full range of flexible psychosocial supports including access to AOD treatment/rehabilitation.</p>	<p><b>Support in principle</b></p> <p>The NSW Government is committed to a decade-long, whole-of-government transformation of mental health care (2014-2024) and the Housing and Accommodation Support Initiative is an important foundation of the Government's commitment for a greater focus on community care.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<p>Noting the link between mental health and AOD issues, the Government will consider opportunities to enhance current mental health offerings and initiatives to address co-morbidities with AOD use.</p> <p>The NSW Government is committing additional funding for the expansion of the Together Home project, which provides wrap around support to maintain tenancies, including case management, drug and alcohol services, and mental health supports.</p>
<p>69 That NSW Health develop and implement a comprehensive strategy to better meet the needs of families and friends impacted by the use of amphetamine-type stimulants, which includes:</p> <ul style="list-style-type: none"> <li>• a program similar to the NSW Family and Carer Mental Health Program, adapted to support family and friends of people who use amphetamine-type stimulants</li> <li>• ensuring easy, widespread and improved access to comprehensive, up-to-date, evidence-based information and resources for family and friends of people who use amphetamine-type stimulants, including information that helps them identify and contact available AOD services</li> <li>• a focus on the needs of grandparents, young people, Aboriginal families and other priority groups, and friends of people impacted by amphetamine-type stimulant use</li> <li>• the development of a state-wide peer network of families affected by amphetamine-type stimulants to provide support to other families, champion their needs and challenge stigma associated with amphetamine-type stimulants</li> <li>• funding for AOD services to provide family-based interventions to increase access to direct support for family and friends affected by amphetamine-type stimulant use</li> </ul>	<p><b>Support</b></p> <p>NSW Health is committed to a comprehensive approach to meeting the needs of family and friends impacted by the use of ATS, including:</p> <ul style="list-style-type: none"> <li>• New funding of \$3 million annually to support the establishment of a new dedicated AOD family and carer program, to be delivered as a partnership between health districts and non-government organisations, addressing significant unmet support needs for families and carers.</li> <li>• The Alcohol and Drug Information Service (<b>ADIS</b>) and Family Drug Support services are funded to provide 24/7 telephone information and support.</li> <li>• The provision of a range of up to date resources and programs on the 'Your Room' website to support families and friends, including an online directory and interactive map of NSW treatment, support services and programs to support families (Your Service Hub).</li> <li>• Six local health districts have been funded to provide support to families of young people seeking treatment from Youth Treatment Network services.</li> <li>• Health worker training for supporting families has been delivered by the Network of Alcohol and Drug Agencies (<b>NADA</b>) for NSW Health over the last 12 months and a web version of this training module is available through the NADA website.</li> </ul>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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<ul style="list-style-type: none"> <li>improving information-sharing between treatment providers and families and carers of persons in treatment for amphetamine-type stimulant use.</li> </ul>	
<p>70 That NSW Health create and maintain, as a matter of priority, a website directed to the families, carers and friends of people who use drugs that includes information and guidance on all available supports and services that are specific to families, carers and friends of people who use drugs, including people who use amphetamine-type stimulants.</p>	<p><b>Support</b></p> <p>NSW Health provides two websites with AOD related information: the NSW Health website and the Your Room website, which is the primary source of AOD related information and education, including around treatment access, for the NSW public.</p> <p>A priority is to ensure information available on these portals is continually being updated to reflect emerging needs, including with resources for families and friends of people who use drugs. Your Room offers an online service directory, methamphetamine-specific resources, and the interactive ADIS webchat.</p> <p>NSW Health provides funding for Family Drug Support, which offers a range of resources and online and telephone support for families, carers and friends of people who use illicit drugs.</p>
<p>71 That the NSW Government commission further research to better understand the nature of the association between amphetamine-type stimulant use and domestic and family violence.</p>	<p><b>Support</b></p> <p>The NSW Government acknowledges further research is needed to better understand the complexity of the relationships between domestic and family violence and AOD use in order to inform system responses.</p> <p>In response to the Domestic Violence Death Review Team recommendations from 2015-17, NSW Health commissioned a literature review in part to better understand the intersection between AOD use and domestic and family violence. The findings of this will be used to inform system developments around the delivery of more integrated responses to people who present with co-occurring AOD use, mental health concerns, and domestic and family violence.</p>
<p>72 That the NSW Government amend the Domestic Violence Safety Assessment Tool and the Central Referral Point to enable the</p>	<p><b>Noted</b></p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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collection of data concerning the association between domestic violence and drug use, disaggregated by drug type.

The Domestic Violence Safety Assessment Tool is currently under revision in line with recommendations from the independent evaluation of Safer Pathway. The redesign aims to enable administration and assessment of a minimum number of reliable and valid risk indicators to increase predictability of imminent further harm/assault to a domestic violence victim-survivor. The identification and inclusion of relevant risk factors will be based on evidence regarding predictive validity of risk items.

Depending on the outcome of the review, there may be also scope for the NSW Police Force to explore options to extract relevant domestic violence incident data from existing databases such as Webcops.

73 That the NSW Government prioritise AOD services as part of the expansion of referral pathways into the Safer Pathway program.

### Noted

A pilot is underway to assess expanded referral pathways (including AOD services).

The Safer Pathway Steering Group and sub-Referral Working Group will continue to work closely with NSW Health to support AOD and other health services as potential referral points into Safer Pathway as part of broader efforts to expand non-statutory referral into Safer Pathway.

74 That the NSW Department of Communities and Justice monitor and report on the number of children at risk of significant harm and in out-of-home care where parental amphetamine-type stimulant use was a contributing factor.

### Noted

The Department of Communities and Justice collects, monitors, and reports on data relating to the number of children at risk of significant harm and in out of home care. ATS use is one of a range of contributing factors that influences a decision on whether to remove a child or not and needs to be considered alongside other contributing factors, which can be difficult to disaggregate.

75 That the NSW Department of Communities and Justice continue to expand the availability of Family Preservation Packages to families state-wide to ensure access to all families who need it, including those dealing with harmful amphetamine-type stimulant use, subject to final evaluation findings in 2020.

### Support in principle

The Permanency Support Program (**PSP**) including the PSP Family Preservation Package is currently being evaluated. The Government will carefully consider the findings of the evaluation to determine whether there

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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	<p>are further opportunities to improve the support provided to families that need it.</p>
<p>76 That the NSW Government pilot a Family Drug Treatment Court that brings together child protection services with funded drug treatment and other services to improve permanency outcomes for children and their families dealing with amphetamine-type stimulant and other drug use.</p>	<p><b>Noted</b></p> <p>At this stage, the NSW Government maintains existing programs provide a range of supports to families dealing with ATS use.</p> <ul style="list-style-type: none"> <li>• The Department of Communities and Justice caseworkers currently provide assessment and casework support to parents who have drug and alcohol related concerns and who rely upon the availability of health services across NSW. These rehabilitation services are provided on either an inpatient or outpatient basis. This choice may support mothers to retain care of their child whilst receiving treatment.</li> <li>• Other supports include Multisystemic Therapy for Child Abuse and Neglect and Functional Family Therapy through Child Welfare, which aim to assist parents in improving safety for their children, including where use of drugs such as ATS is an issue.</li> <li>• These assessments and supports are completed along the continuum of a family's involvement in early intervention and child protection and are not only provided as part of Children's Court proceedings. Support from the Department of Communities and Justice child protection caseworker operates under the principle of least intrusive intervention.</li> </ul> <p>As part of the \$82 million expansion of the Drug Court, research on the impact of the Drug Court model on improving permanency outcomes for children and their families was considered which suggests that the Drug Court:</p> <ul style="list-style-type: none"> <li>• is likely to achieve positive health outcomes for participants; and</li> <li>• may reduce homelessness, improve employment rates, and reduce child protection involvement for participants.</li> </ul>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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	<p>The Government's expansion of the Drug Court includes funding for a comprehensive outcomes evaluation of the Drug Court. This will focus on outcomes which have been the subject of earlier evaluations (impact on reoffending, cost-effectiveness) as well as building evidence on assumed additional positive outcomes of participation in the Drug Court program (health and wellbeing, family).</p>
<p>77 That the NSW Department of Education include in its mandatory child protection training information on:</p> <ul style="list-style-type: none"> <li>• parental or familial amphetamine-type stimulant use as a risk factor for children and young people</li> <li>• how to identify children and young people who may be impacted by parental or familial amphetamine-type stimulant use</li> <li>• the services available (including those within the Department) to assist educators to support children and young persons affected by amphetamine-type stimulant use</li> <li>• the supports within the Department to assist educators to identify local services available for children and young people affected by amphetamine-type stimulant use.</li> </ul>	<p><b>Support in principle</b></p> <p>All new and existing staff are required to undertake mandatory child protection training. The Department of Education will actively consider opportunities to incorporate the issues noted in the recommendation in mandatory training as part of its regular reviews of course content.</p>
<p>78 That the NSW Government update the Safety Action Meeting manual to require that non-government schools be invited to attend a meeting, where it is known that one of their students is to be discussed.</p>	<p><b>Support</b></p> <p>The Safety Action Meeting manual will be updated to require a student's school to be notified, including non-government schools.</p>
<p>79 That the NSW Government better educate relevant agencies and staff about the operation of Chapter 16A of the <i>Children and Young Persons (Care and Protection) Act 1998</i> (NSW), and the importance of actively sharing information in accordance with the provisions of Chapter 16A to facilitate the provision of services to children and young persons.</p>	<p><b>Support in principle</b></p> <p>In response to the Royal Commission into Institutional Responses to Child Sexual Abuse, NSW prescribed bodies can now share information with statutory child protection bodies in other states and territories. Several other initiatives are also being considered nationally to strengthen information sharing.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

<p>80 That the NSW Police Force cease the use of drug detection dogs at music festivals and implement other detection practices to target illicit drug supply.</p>	<p><b>Not Supported</b></p> <p>The NSW Police Force maintains its view that drug detection dogs are the best method for police to screen large crowds of people for the presence of drug odours.</p>
<p>81 That the Department of Premier and Cabinet, the NSW Police Force, NSW Health and the NSW Department of Communities and Justice develop strategies to limit the use of strip searches of people suspected of being in possession of prohibited drugs for personal use only, including consideration of the need to amend legislation, policy and/or procedural guidelines.</p>	<p><b>Noted</b></p> <p>Since the release of the LECC Inquiry report, the NSW Police Force has made significant improvements to strip search practices. In particular, the development and introduction of the Person Search Manual and the Charge Room and Custody Management Standard Operating Procedures increase awareness about the requirements of the <i>Law Enforcement (Powers and Responsibilities) Act 2002</i> ('LEPRA') and strengthen accountability and record keeping.</p> <p>The Person Search Manual is the primary source of information for police in relation to the powers and safeguards outlined within the legislation and the instructions provided by the manual have been incorporated into NSW Police Force training.</p> <p>In addition to these policy initiatives, a number of amendments were made to the Computerised Operational Policing System (COPS) to include independent verification of strip search events and the inclusion of pop up prompts and mandatory fields. These changes, coupled with additional training initiatives and internal governance measures, aim to reduce instances of deficient practice and ensure that any concerns are promptly addressed with officers. It is anticipated that these enhancements to policy, procedure and training will increase officer awareness and understanding of the requirements of the LEPRA as they relate to strip searching.</p>
<p>82 That to address the harm caused by the current practice of police strip searching for possession of drugs, the NSW Police Commissioner</p>	<p><b>Not supported</b></p> <p>Since the release of the LECC Inquiry report, the NSW Police Force has made significant improvements to strip search practices. In particular, the</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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issue an operational guideline and/or amend the relevant police handbook to limit strip searches to circumstances where:

- a. there is a reasonable suspicion that the person has committed or is about to commit an offence of supply a prohibited drug, and
- b. there are reasonable grounds to believe that the strip search is necessary to prevent an to prevent the immediate loss or destruction of evidence, and
- c. the reasons for conducting the search are recorded on Body Worn Video before the search commences, and immediate risk to personal safety or
- d. no less invasive alternative is appropriate in the circumstances.

development and introduction of the Person Search Manual and the Charge Room and Custody Management Standard Operating Procedures increase awareness about the requirements of the *Law Enforcement (Powers and Responsibilities) Act 2002* ('LEPRA') and strengthen accountability and record keeping.

The Person Search Manual is the primary source of information for police in relation to the powers and safeguards outlined within the legislation and the instructions provided by the manual have been incorporated into NSW Police Force training.

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- 83 That the NSW Police Force extend the range of drug seizures routinely assessed by the Forensic and Analytical Science Service for content and purity, and for providing data to early warning systems, such as the Prompt Response Network being developed by National Centre for Clinical Research into Emerging Drugs.

### Noted

The NSW Police Force, the NSW Ministry of Health, and the NSW Health Pathology Forensic and Analytical Science Service (**FASS**) jointly commenced Phase 1 of the Combined Surveillance and Monitoring of Seized Samples (**CoSMoSS**) project in November 2019.

The Project aims to develop a system whereby a sample of drugs seized by NSW Police Force is sent for toxicology analysis to enhance surveillance and monitoring of the composition of NSW drug supply. This assists NSW Health to know when high-risk substances are developed. Importantly, it also assists the NSW Police in cracking down on supply and production of harmful drugs.

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	<p>Phase 1 was restricted to particular music festivals and suspected MDMA seizures.</p> <p>Phase 2 of the CoSMoSS Project is underway.</p> <p>It is important to emphasise that the NSW Government does not support pill testing.</p>
<p>84 That the NSW Police Force review the roadside drug testing scheme, with a particular focus on:</p> <ul style="list-style-type: none"> <li>• the deployment of roadside drug testing and equipment more equitably across the state;</li> <li>• the use of test result data to inform policing strategies generally; and</li> <li>• the provision of that test result data to early warning systems, such as the Prompt Response Network being developed by National Centre for Clinical Research into Emerging Drugs.</li> </ul>	<p><b>Noted</b></p> <p>The NSW Government recognises the significant impact of drug driving, and the need to be vigilant to ensure our community is safe on the roads. In January 2018, the NSW Government announced further action to address drug driving, including doubling the roadside drug testing program to 200,000 tests by the end of 2020.</p> <p>Transport for NSW works in partnership with NSW Police Force to determine the deployment of roadside drug tests and will continue to allocate testing across NSW based on current road trauma data. Allocation of testing is based on two factors: whether drugs were a factor in a fatality or serious injury crash on NSW roads, and the NSW population distribution.</p> <p>The NSW Government will continue to encourage road safety measures, as outlined in the Road Safety Plan 2021. To support the success of the Plan, the NSW Government will continue to invest in behavioural research to inform program, policy and education initiatives.</p>
<p>85 That the NSW Police Force conduct a road safety campaign to raise awareness of the dangers of driving under the influence of amphetamine-type stimulants.</p>	<p><b>Support in principle</b></p> <p>Transport for NSW is responsible for road safety campaigns in NSW and will continue to use relevant data to develop and inform road safety campaigns that educate road users about the risks associated with drug driving and aim to deter illicit drug users from driving under the influence or following recent use of these substances.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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	<p>The current campaign, 'Stop it... Or Cop It' is part of Transport for NSW's partnership with the NSW Police Force to reduce risky behaviour and improve road safety. Drug driving is one of the behaviours targeted by this Campaign. High visibility on-road enforcement combined with the perceived certainty of enforcement and immediacy of a penalty is known to provide a strong deterrent to illegal road user behaviour. In addition to television commercials, the NSW Government also promotes road safety messaging including drug driving, on social media, radio, out of home media such as billboards and buses, and NSW Government websites. Where possible, Transport for NSW coordinates location-specific advertising with known NSW Police Force operations to ensure that on-road enforcement and advertising campaigns complement each other.</p>
<p>86 That the NSW Police Force develop a method by which data can be regularly captured and further analysed concerning whether amphetamine-type stimulant use was involved in the commission of a criminal offence.</p>	<p><b>Support in principle</b></p> <p>Although the NSW Police Force supports capturing data in respect of whether ATS use is involved in the commission of a criminal offence, there may be some categories of crime where the collection of such data may not be feasible. The NSW Police Force will consider opportunities to improve data collection where practicable.</p>
<p>87 That in consultation with NSW Health, people with lived experience and the Prison Officers Vocational Branch, Corrective Services develop and implement better training for Corrective Services staff in working with inmates affected by amphetamine-type stimulants and those with AOD and mental health comorbidities.</p>	<p><b>Support in principle</b></p> <p>Corrective Services NSW provides comprehensive training to all staff working with inmates to ensure they are well equipped to work in the correctional centre setting. Corrective Services NSW will review its current training regime and consider the issues relating to working with inmates affected by ATS and those with AOD and mental health comorbidities.</p>
<p>88 That in conjunction with Justice Health, Corrective Services re-introduce the Drug Use in the Inmate Population research program or equivalent, to better understand drug use in the prison population and inform service responses. Such data should be published on a biennial basis.</p>	<p><b>Support in principle</b></p> <p>The NSW Government supports a data and evidence-based approach to address problems associated with drug use by the prison population. Justice Health is able to extract data from Reception Screening assessments of patients' self-reported drug use in the 4 weeks prior to custody and use this to inform overall clinical service delivery. Justice</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<p>Health is also exploring the use of individual patient level data for targeting brief interventions.</p>
<p>89 A. That the NSW Government immediately commission an independent review or Inquiry, with appropriate coercive evidence-gathering powers, into the supply and availability of drugs in correctional centres and the efficacy of efforts to interdict supply.</p> <p>B. Thereafter, that an independent annual review be conducted of the availability and use of illicit substances in correctional centres.</p>	<p><b>Noted</b></p> <p>Corrective Services NSW has rigorous measures in place to disrupt the supply and availability of drugs in correctional centres including regular and unannounced searches of cells and common areas.</p> <p>The Corrective Services Security Operations Group conducts intelligence-based searches using K9 teams and technical devices as well as visitor interdiction operations to prevent the entry of contraband into correctional centres. Corrective Services NSW also works with external law enforcement agencies. The efficacy of measures to stop the supply and availability of drugs is subject to ongoing review.</p> <p>In 2020/21, the NSW Government allocated \$15.2 million to purchase and install x-ray body scanners to identify drugs and other contraband and prevent their entry into correctional sentences. Corrective Services NSW has now installed x-ray scanning across 23 correctional centres.</p>
<p>90 That Corrective Services and Justice Health immediately implement the recommendations of the Corrective Services and Justice Health Harm Reduction Reference Group report, dated May 2018, on condoms, dental dams and Fincol in NSW correctional centres.</p>	<p><b>Support</b></p> <p>Work is underway to implement responses to the Corrective Services and Justice Health Harm Reduction Reference Group report on condoms, dental dams and Fincol in NSW prisons.</p>
<p>91 That Justice Health and Corrective Services, in consultation with the community and people with lived experience of drug use and custody, develop a comprehensive AOD strategy consistent with the National Drug Strategy and NSW whole-of-government AOD policy that is evidence-based, adopts a broad harm reduction approach and reflects international best practice for the treatment and care of people in custody.</p>	<p><b>Support</b></p> <p>Corrective Services NSW is developing an alcohol and other drugs strategy in collaboration with Justice Health that brings together supply, demand, and harm reduction initiatives. This strategy will be informed by input from people with lived experience of drug use, health professionals and vulnerable populations.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

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<p>92 A. That Justice Health review its inmate screening processes to ensure that the AOD treatment needs of every inmate are identified and met on entry into custody.</p> <p>B. That Justice Health be funded to provide adequate services and facilities to inmates who are withdrawing from amphetamine-type stimulants, including those held in 24-hour court cells.</p>	<p><b>Support in principle</b></p> <p>The NSW Government recognises the importance of early engagement with inmates. Justice Health will review its inmate screening process with regard to AOD treatment needs being identified and met on entry into custody.</p> <p>New funding of \$2.5 million per annum, will expand access to alcohol and other drug treatment interventions for people whilst in custody, including withdrawal management.</p> <p>Justice Health is currently reviewing support services provided to inmates, including those held in court cells. All court cells currently have access to 24-hour support services, with on-call AOD support offered after hours (either via telehealth or face-to-face).</p> <p>All patients in custody who require withdrawal medication as a result of physical withdrawals associated with ATS use are provided with medication as required.</p>
<p>93 That Corrective Services and Justice Health ensure that all people in custody who need AOD treatment receive it.</p>	<p><b>Support in principle</b></p> <p>The NSW Government recognises the importance of a holistic approach which addresses the health as well as the criminogenic needs of those in custody. Corrective Services NSW is developing its alcohol and other drugs strategy in collaboration with Justice Health.</p> <p>New funding of \$2.5 million per annum will expand access to alcohol and other drug health services in the NSW correctional system. This will ensure increased access for all people in need of treatment whilst in custody.</p>
<p>94 That Justice Health and Corrective Services review and expand the Intensive Drug and Alcohol Treatment Program and consider establishing this program at additional sites.</p>	<p><b>Support in principle</b></p> <p>The NSW Government notes there is already a strong evidence base for the Intensive Drug and Alcohol Treatment (IDAT) program. Justice Health and Corrective Services will review the operation of the IDAT program.</p>
<p>95 That the State Parole Authority collect and publish annually data about people who are refused parole due to a failure or inability to participate</p>	<p><b>Support in principle</b></p>

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<p>in AOD programs in custody due to lack of program availability, waiting list issues or lack of available places in programs.</p>	<p>The NSW Government supports the publication of data relating to parole decisions, noting that: failure or inability to participate in a program may be one of a number of factors informing a decision to refuse parole; program participation is voluntary; the majority of parole decisions are court based parole matters and therefore are not within the purview of the State Parole Authority.</p>
<p>96 A. That the provision of drug treatment services and programs in custody immediately be made the principal responsibility of Justice Health.</p> <p>B. That Justice Health ensure that access to and standards of AOD treatment services and programs provided in custody are equivalent to those in the community.</p> <p>C. That there be a commensurate increase in funding to NSW Health to enable the provision of such services.</p>	<p><b>A. Not Supported</b></p> <p>The NSW Government recognises the importance of an integrated planning process that enables equitable access to services that address the health and criminogenic needs of inmates. The NSW Government will continue to explore opportunities to strengthen this integrated approach. Corrective Services NSW and Justice Health will consult on the development of their alcohol and other drugs strategies. The development of the strategies will be an important driver of a coordinated approach to program delivery.</p> <p><b>B. and C. Support</b> Justice Health is committed to providing evidence-based alcohol and other drug treatment to people in custody, in line with clinical standards of care, and will seek to ensure equitable services and programs are provided.</p> <p>New funding of \$5 million per annum will significantly expand access to alcohol and other drug treatment interventions for people whilst in custody and also increase access to post-release treatment and support.</p>
<p>97 That the NSW Government pilot, and have independently evaluated, a needle and syringe program in one or more custodial facilities in NSW.</p>	<p><b>Not Supported</b></p> <p>The NSW Government does not support a trial of a needle and syringe program in correctional centres due to the potential safety risks to inmates and correctional officers. The NSW Government is committed to the delivery of targeted, evidence-based programs and strategies that address drug-related harm and addiction.</p>
<p>98 That Justice Health consider introducing amphetamine-type stimulant specific treatment services and programs.</p>	<p><b>Support in principle</b></p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	Justice Health is committed to continuous program development to better meet the alcohol and other drug treatment needs of inmates, including for people who use amphetamine type stimulants.
99 That Corrective Services and Justice Health together review their policies relating to release planning and handover of patient care on release, including information sharing with community-based health service providers and drug treatment services.	<p><b>Support in principle</b></p> <p>Corrective Services NSW and Justice Health will continue to work closely together in planning, service provision, and handover of patient care on release.</p> <p>Corrective Services NSW and Justice Health recognise the importance of collaboration and continuous improvement and are currently piloting the Mental Health Transitional Care Program for people exiting custody. This program is a wraparound service for people with a range of service needs and includes measures to improve information sharing between service providers for patients. Upon the review of this program, Corrective Services NSW and Justice Health will look to expand this approach more broadly.</p> <p>Additionally, Corrective Services NSW will continue to develop its alcohol and other drugs strategy in collaboration with Justice Health to ensure a consistent approach.</p>
100 That the NSW Government immediately ensure that no inmate leaves custody without identification that will be recognised by all NSW Government and Commonwealth agencies.	<p><b>Support in principle</b></p> <p>The NSW Government supports inmates having a recognised form of identification upon release from custody. Corrective Services NSW has undertaken preliminary work with Service NSW to identify a suitable option.</p>
101 That Corrective Services and Justice Health ensure inmates at transitional centres receive the same AOD services and programs as other inmates.	<p><b>Support in principle</b></p> <p>Residents housed in transitional centres have a local leave permit which allows them to participate in external employment and access community-based services and programs, including medical services.</p> <p>The function of transitional centres is separate to that of prisons and the residents are at a different stage of their case plan with a significant focus on reintegration requirements. There is also an expectation that offence focussed programs would be completed prior to transfer to these centres.</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<p>The complete suite of prison programs and services would not be replicated in transitional centres.</p>
<p>102 That the NSW Government provide or fund a transitional support service available to all people leaving custody for up to 12 months post-release, which ensures:</p> <ul style="list-style-type: none"> <li>• dedicated case management</li> <li>• safe and stable housing</li> <li>• primary and mental health services</li> <li>• drug treatment services on a health needs basis</li> <li>• support into education, employment and other social support or services.</li> </ul>	<p><b>Support in principle</b></p> <p>The NSW Government is committed to funding transitional support services for people leaving custody. New funding of \$2.5 million per annum is being invested to expand post-release transitional services for people with a history of alcohol and other drug use, which will significantly increase access to wrap-around health and social support for people leaving custody.</p> <p>This funding will build on the NSW Health Connections Program that provides comprehensive pre-release planning and post-release holistic wrap-around support for adults in custody with a history of problematic drug use.</p> <p>The Department of Communities and Justice currently provides a network of time-limited support services to some people leaving custody and those subject to supervised parole orders, including:</p> <ul style="list-style-type: none"> <li>• The Transitional Support Stream of the Funded Partnership Initiative, which provides transitional support services focusing on accommodation and tailored reintegration programs.</li> <li>• The Housing and Mental Health Agreement between NSW Health and the Department of Communities and Justice provides an overarching framework for planning, coordinating, and delivering mental health care, accommodation support, and social housing services for clients experiencing mental illness who are living in social housing or who are homeless or at risk of homelessness. The Housing and Accommodation Support Initiative (<b>HASI</b>) and Community Living Supports (CLS) programs provide psychosocial recovery-based support for people with mental illness via an innovative three-way partnership between NSW Health, and the non-government organisation sector. Both programs are administrated by the Ministry of Health. HASI is intended for people who are homeless or at risk of homelessness, while CLS is aimed at people who are already housed, or who are inappropriately housed with a focus on people in social housing and people leaving custody.</li> </ul>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<ul style="list-style-type: none"> <li>• The Youth Justice Casework Support Program, which funds non-government organisations to provide 12 weeks of reintegration support to some young people leaving custody who have a parole or other supervised order.</li> <li>• Under the Housing Pathways program, clients who are exiting custody can have a holistic assessment of their housing needs undertaken, with a view toward suitable housing post release. Assistance includes temporary accommodation, various products and services to assist securing a tenancy in the private rental market and social housing.</li> </ul>
<p>103 That Corrective Services facilitate AOD assessments for all inmates who seek access to residential rehabilitation.</p>	<p><b>Support in principle</b></p> <p>Corrective Services NSW and Justice Health will work together to support inmate access to residential rehabilitation facilities upon release. Justice Health provides the Connections Program – a state-wide service providing pre and post-release support to prisoners with a focus on the critical first four weeks post-release, to connect participants to a range of health and welfare services. Corrective Services NSW will prepare an Alcohol and Other Drug Residential Rehabilitation Assessment Report, if ordered by the District Court, assessing suitability for, and availability of a place in a residential rehabilitation program. Under current resourcing, Corrective Services NSW is not able to support undertaking non-court ordered AOD assessments.</p>
<p>104 That the NSW Government ensure the availability of residential rehabilitation programs for all people leaving custody as required, including those with a history of sexual or violent offending and mental health comorbidities.</p>	<p><b>Support in principle</b></p> <p>The NSW Government acknowledges the importance of ensuring people leaving custody have access to appropriate treatment and support services, including residential rehabilitation. People who are leaving custody often experience a range of complex needs and comorbidities including chronic health conditions, homelessness, histories of complex trauma and mental health issues.</p> <p>A more holistic approach to addressing these needs will reduce the risk of alcohol and other drug-related harm, including reoffending. As well as considering opportunities to improve access to residential rehabilitation, the</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<p>Government will consider opportunities which involve combining community-based alcohol and other drug treatment with suitable accommodation assistance and other supports. The NSW Government also recognises existing challenges with delivering this service to all people leaving custody, particularly with regard to resourcing.</p> <p>Young people with a sex and/or violent offending history can be accepted, based on risk assessment, into residential rehabilitation programs contracted through Youth Justice NSW in two locations, Dubbo and Coffs Harbour. Youth Justice NSW and Justice Health will continue to collaborate to build rehabilitation and mental health care into client case plans.</p>
<p>105 A. That the NSW Government establish a data working group comprised of relevant government and non-government agencies to support the development and implementation of the NSW AOD policy and the Drug Action Plan, and to devise a comprehensive approach to understanding the prevalence of amphetamine-type stimulant use and harms.</p> <p>B. That the NSW Government establish a process to facilitate the sharing of data between agencies to inform timely responses and a better understanding of drug trends at a state and regional level.</p>	<p><b>Support in principle</b></p> <p>The NSW Government will work to enhance current data collection and presentation through existing channels to develop and implement a more comprehensive approach to understand the prevalence, nature, and impact of ATS.</p>
<p>106 That the NSW Government establish a coronial drug death review team within the NSW Coroners Court to consider and analyse drug-related deaths, identify trends and systemic issues, and assist coroners to conduct inquests and make recommendations concerning matters of public health and safety arising from drug-related deaths.</p>	<p><b>Support in principle</b></p> <p>The NSW Government sees value in the Coroners Court identifying and reviewing categories of cases to assist the Coroners to make recommendations on interventions and prevention strategies. The NSW Coroners Court will continue to explore new ways to better identify common issues across categories of death, including in relation to drug-related deaths.</p>
<p>107 That the NSW Government support and fund research into effective prevention strategies for amphetamine-type stimulants.</p>	<p><b>Support</b></p> <p>The NSW Government will continue to support research into effective prevention strategies for amphetamine type stimulants and will be investing</p>

# The NSW Government's response to the Special Commission of Inquiry into the Drug 'ice'

## Recommendations

	<p>up to \$3 million annually to expand these research opportunities and trial new prevention strategies.</p> <p>The annual NSW Health Translational Research Grants Scheme is designed to build research capability and accelerate evidence translation within the NSW public health system. The priority driven grants program includes alcohol and other drugs as a nominated area.</p> <p>NSW Health will promote the use of the translational research available through the National Centre for Clinical Research on Emerging Drugs to inform system responses to people who use ATS.</p>
<p>108 That the NSW Government invest in research to better understand the nature of amphetamine-type stimulant use. Such research should explore the social determinants of use, the likelihood of use becoming problematic and opportunities to best engage individuals in successful treatment.</p>	<p><b>Support</b></p> <p>The NSW Government recognises the importance of research to better understand the nature of amphetamine type stimulant use and will continue to invest in this research.</p> <p>The annual Translational Research Grants Scheme is designed to build research capability and accelerate evidence translation within the NSW public health system. The priority driven grants program includes alcohol and other drugs as a nominated area.</p> <p>NSW Health will promote the use of the translational research available through the National Centre for Clinical Research on Emerging Drugs to inform system responses to people who use ATS.</p>
<p>109 That NSW Health invest in research into the harms associated with smoking methamphetamine and how such harms can be mitigated, with a specific focus on mental health, cardiovascular health, respiratory health and injuries (whether caused to people who smoke methamphetamine or others) arising from intoxication.</p>	<p><b>Support in principle</b></p> <p>NSW Health acknowledges the need to draw on, and expand, existing research around the impacts of smoking methamphetamines in order to develop targeted information resources, community education, and harm reduction responses and will seek to incorporate available research on harms associated with smoking ATS into harm reduction programs.</p>