

---

# Adis-Link Direct Referral program

Initiative Type

Service Improvement

Status

Deliver

Added

16 April 2021

Last updated

14 January 2022

URL

<https://clinicaexcellence.qld.gov.au/improvement-exchange/adis-link-direct-referral-program>

## Summary

Adis-Link direct is an innovative referral service that connects callers to local Queensland Health government and non-government organisation alcohol and other drug service providers. By sharing client information via Queensland Health secure file transfer service, Kiteworks, it allows callers to speak to one counsellor initially, who will support them in the next step, rather than the patient having to repeat their story between different service providers.

---

This Queensland Health-funded program is being offered at nine Queensland Health and non-government organisations across 36 treatment services in Metro North, Metro South and Sunshine Coast Hospital and Health Services (HHSs) and is currently being expanded to alcohol and other drug services across Queensland.

### Key dates

Jan 2021

Dec 2021

### Implementation sites

Queensland Health Alcohol and Other Drug Services (AODS) Queensland Non-Government Organisations providing specialist Alcohol and Other Drug support

### Partnerships

Adis receives in-kind support from the Queensland Networks of Alcohol and other Drug Agencies (QNADA).

## Key Contacts

Jenny Mitchell

7452

[Anonymous](#)

Project Officer

Adis 24/7 Alcohol and Drug Support

07 3837 5989

Jenny.Mitchell2@health.qld.gov.au

---

## Aim

The Direct Referral program aims to connect Adis callers to local alcohol and other drug service providers in one phone call for assertive follow-up within two business days. It also aims to enhance service connectedness to make it easier for clients to engage in alcohol and drug treatment at the right place at the right time.

## Benefits

- Streamlines client navigation into alcohol and other drug treatment.
- Reduces barriers associated with accessing alcohol and other drug support including lack of motivation.
- Improves referral pathways to alcohol and other drug services.
- Allows clients to feel heard and supported throughout the referral process.
- Provides service providers with the background information they need as part of their intake process.
- Enhanced client and counsellor knowledge regarding treatment options and intake processes.

## Background

Adis 24/7 Alcohol and Drug Support provides 24-hour, seven-day a week confidential telephone support for people in Queensland with alcohol and other drug concerns, their families and health professionals. Calls with Adis often result in a referral to local alcohol and other drug (AOD) treatment services for face-to-face intervention.

Prior to initiation of direct referral pathways, these were facilitated by either providing the caller with a phone number for the service or transferring the caller, preferably with a three-way conference call to provide a 'warm' handover to a clinician.

Barriers associated with these referral methods, such as calls not being answered or an intake officer being unavailable, mean that the Adis caller will need to repeat their story or make multiple calls before engaging in treatment.

Research has shown that these barriers can negatively impact on the caller's decision to engage in treatment and contribute to lengthier wait times and lower attendance rates seen in the AOD sector compared with other medical specialties

Referral issues identified in an AOD workforce survey conducted by the Queensland Network of

---

Alcohol and Other Drug Agencies (QNADA) in 2017 included a lack of clinician confidence in inter-agency and referral pathway knowledge. These issues were associated with treatment delays in a study into AOD treatment referral gaps.

## Solutions Implemented

An Adis-Link referral commences when the Adis counsellor and caller agree that the caller may benefit from treatment at a participating service provider. The counsellor then collects details regarding the client's situation including alcohol and other drug use and risks, and biopsychosocial information which is then shared with the service provider via the Adis database and the Queensland Health secure file sharing software Kiteworks.

The Kiteworks Secure File Transfer software encrypts the referral file so that files may be shared securely between Queensland Health and external recipients. This level of data security, in addition to the client consent script read verbatim to the referred client, allows Adis to share client information externally in accordance with Queensland Health Information Security guidelines and the Queensland Information Privacy Act 2009.

Service providers are asked to action individual referrals by contacting the client within two business days from referral. Adis can then in Kiteworks track progression of referrals to ensure these are actioned within the agreed 2-business day timeframe and track outcome data to measure the success of the Adis-Link initiative.

## Evaluation and Results

The 2019-20 expansion of Adis-Link to Metro North and Metro South alcohol and to other drug service providers was evaluated by looking at:

- referral outcomes as indicated in shared Kiteworks folders
- client feedback
- service Provider clinician feedback
- Adis counsellor feedback

### Referral Outcomes

- from the total of 195 direct referrals, 122 (63%) scheduled an appointment and of these, 84% attended their first appointment
- 46 directly referred clients (24%) were unable to be contacted
- 15 (8%) of referred clients declined service when contacted by the service provider
- two (1%) were considered inappropriate by the recipient service provider.

**Client Feedback** 25 responses were received via the Citizen Space survey as at 26 June 2020. Feedback received from the client survey indicated that:

- clients felt heard and supported throughout their call
- the overall service provided by Adis was good or excellent

- 
- the assertive referral process was very easy or easy
  - clients were very likely or likely to continue to engage with AOD treatment.

The main messages from clients were that the Adis counsellor was non-judgmental and the process worked well for them. **Service Provider Clinicians** Overall, service provider staff agreed (61%) or strongly agreed (22%) that they were satisfied with the quality of Adis-Link referrals. Clinicians noted that advantages of Adis-Link included:

- streamlines the process for clients making it easier for them to access treatment
- provides the information they need in the referrals
- provides an option for clients to get support outside business hours due to Adis being a 24/7 phone service.

**Adis Counsellors** Adis counsellors indicated that they think Adis-Link can benefit Adis callers (55% strongly agree, 36% agree) and has improved the relationship between Adis and other participating service providers (36% strongly agree, 36% agree) evaluation data will continue to be collected throughout the current 2021 statewide expansion.

## Lessons Learnt

- keep the referral process consistent across all participating providers
- simplify the Kiteworks feedback folders to make the feedback process easier for service providers
- have a clear protocol for communication regarding progress of referrals

## References

Blevins, C. E., Rawat, N., and Stein, M. D.(2018). Gaps in the substance use disorder treatment referral process: Provider perceptions. *Journal of Addiction Medicine*. 12(4). Doi: 10.1097/ADM.0000000000000400 Milward, J., Lynskey, M., and Strang, J. (2014). Solving the problem of non-attendance in substance abuse services. *Drug and Alcohol Review*. 33. DOI: 10.1111/dar.12194 Quanbeck, A., Wheelock, M. S., Ford, J.H., Pulvermacher, A., Capcoccia, V., and Gustafson, D. (2013). Examining access to addiction treatment: Scheduling processes and barriers. *Journal of Substance Abuse Treatment*. 44(3). doi:10.1016/j.jsat.2012.08.017 Queensland Health (2020). Privacy and Confidentiality. Retrieved from <https://qheps.health.qld.gov.au/csd/business/records-and-information-management/privacy-rti/faqs> Queensland Network of Alcohol and Other Drug Agencies. (2017). Brisbane South Alcohol and Other Drugs Collaborative: Workforce capacity improvement summary report. Retrieved from [https://qnada.org.au/wp-content/uploads/2018/02/Fin\\_20180110\\_Brisbane-North-AOD-options-paper.pdf](https://qnada.org.au/wp-content/uploads/2018/02/Fin_20180110_Brisbane-North-AOD-options-paper.pdf) Queensland Network of Alcohol and Other Drug Agencies. (2017). Supporting the Alcohol and other Drugs Workforce in the Brisbane North Region. Retrieved from [https://qnada.org.au/wp-content/uploads/2018/02/Dra\\_20171206\\_Workforce-Capacity-Improvement-Summary-Report\\_SP.pdf](https://qnada.org.au/wp-content/uploads/2018/02/Dra_20171206_Workforce-Capacity-Improvement-Summary-Report_SP.pdf) Sander, K.,

---

Wilson, H., Kelly, J., and Bligh, A. (2019). Examination of a group entry model into alcohol and other drug (AOD) treatment: Improvements in attendance, retention, and clinical capacity. *Substance Abuse*. DOI: 10.1080/08897077.2019.1635064

PDF saved 20/05/2024