



Australian Indigenous Health/InfoNet

## Alcohol and Other Drugs Knowledge Centre

[aodknowledgecentre.ecu.edu.au](http://aodknowledgecentre.ecu.edu.au)

### Alcohol and other Drug Knowledge Centre – 4 JOQUJ61 Activity Work Plan 1 July 2023 – 30 June 2024

Task	Output(s)	Deliverable(s)	Performance Measure(s)	Timeline for Completion of Task
Provide comprehensive Aboriginal and Torres Strait Islander alcohol and other drugs information on the Alcohol and other Drugs Knowledge Centre (AODKC) website.	<p>Continually update the AODKC website.</p> <p>Health information searched for, updated, curated, expanded and categorised to the various alcohol and other drugs (AOD) topics on the AODKC's online bibliography.</p> <p>The bibliography includes:</p> <ul style="list-style-type: none"><li>• Publications</li><li>• Policies</li><li>• Resources (health promotion and health practice).</li></ul> <p>Other information added includes:</p> <ul style="list-style-type: none"><li>• Programs</li><li>• Organisations</li><li>• Workforce information (events, courses, funding and jobs).</li></ul> <p>Audits of existing information on the AODKC website to ensure content is accurate and free of broken links.</p>	<p>New entries of publications and resources added in the AODKC's online bibliography and other information added about programs, organisations and workforce information (events, courses, funding and jobs).</p>	<p>The number of new entries of publications and resources in the AODKC's online bibliography and the number of new entries for programs, organisations and workforce information (events, courses, funding and jobs).</p>	Ongoing throughout the reporting period

Task	Output(s)	Deliverable(s)	Performance Measure(s)	Timeline for Completion of Task
		<ul style="list-style-type: none"> <li>• Illicit drugs</li> <li>• Tobacco</li> </ul>		
Enhance the usability and relatability of the AODKC website.	Provision of a technologically advanced, best-practice web resource for delivery of comprehensive Aboriginal and Torres Strait Islander AOD information.	A state-of-the-art AODKC web resource to be publicly available for a minimum of 95% of the time.	The percentage of time that the AODKC website is publicly available. Usage statistics for the AODKC website reported in performance report.	Ongoing throughout the reporting period
Produce knowledge exchange products (KEPs) on a key/topical AOD content area.	A comprehensive summary, synthesis, analysis and interpretation of data, statistics and other information compiled for inclusion in the published summary and associated KEPs.	<i>Learning from 50 years of Aboriginal Alcohol Programs: A Summary.</i>	Commencement of the <i>Learning from 50 years of Aboriginal Alcohol Programs: A Summary.</i>	Commenced by 30 June 2024 (to be fully completed, including KEPs, by 31 December 2024).
Facilitate knowledge exchange through the regular posting of AOD content via our 'social media platforms: <ul style="list-style-type: none"> <li>• Facebook</li> <li>• Instagram</li> <li>• X (formerly Twitter)</li> <li>• LinkedIn.</li> </ul>	Ongoing engagement and interaction with users and other stakeholder through the production and dissemination of AOD content on Facebook, Instagram, X and LinkedIn.	Regular social media posts of AOD content on Facebook, Instagram, X and LinkedIn.	The number of social media posts, followers, impressions, engagements and click-throughs.	Ongoing throughout the reporting period.
Compile regular updates of recent and emerging key information on AOD topics for users and other subscribers to the AODKC newsletter.	Regular compilation of recent research, and other information relevant to the specified health topics for distribution via the AODKC newsletter.	At least 8 newsletters produced.	8 newsletters produced.	By 30 June 2024.

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Engage with key stakeholders to inform the AODKC's KE activities and to ensure the health workforce is fully aware of, and confident accessing, the AOD information on the AODKC website.	<p>Ongoing development of strong, reciprocal, collaborative relationships, and/or partnerships, with key organisations in the Aboriginal and Torres Strait Islander AOD sector.</p> <p>Continued strong relationships with the Health/InfoNet's honorary Consultants with expertise in AOD.</p> <p>Continued engagement with the workforce and other stakeholders.</p> <p>.</p>	<p>One online reference group meeting each year.</p> <p>Regular email communication throughout each year. Seek expertise, as needed, for peer review functions and reference group membership as required.</p> <p>Two conference exhibitions, presentations and/or inserts in the year.</p>	<p>One online reference group meeting in the year.</p> <p>At least four email communications with Consultants in the year.</p> <p>Two conference exhibitions, presentations and/or inserts in the year.</p>	<p>September - October 2023</p> <p>By 30 June 2024</p> <p>By 30 June 2024.</p>

## Risk management

The Health/InfoNet operates within ECU's comprehensive governance framework. This assists the Health/InfoNet's operations in terms of human resources, finance, contracts and risk management. The Health/InfoNet receives research-related support from ECU's Research Services team.

The Health/InfoNet also benefits in the area of information technology by operating within ECU. The University's Information Technology Services Centre (ITSC) develops and maintains computer networks, supports computer equipment and essential software, and ensures the security of the overall computing environment. The last includes protection from external IT threats, recovery in case of system faults, and the essential routine back-ups of the Health/InfoNet's work. The Health/InfoNet also undertakes daily backups of the website and these are stored off-site. The Health/InfoNet's IT staff are responsible for the specially developed database and related structures but can call on ITSC staff, or the services of the hosting company, for assistance and/or advice if needed.

## Potential risks

There are five main risks to the Health/InfoNet's operations:

- cultural appropriateness
- quality control
- financial
- staffing
- information technology.

## **Cultural appropriateness**

For over 26 years the *HealthInfoNet* has been guided by an Advisory Board that includes the CEOs of many peak Aboriginal and Torres Strait Islander peak health bodies including NAATSIHWP, IAHA, CATSINaM and NAACHO. The Advisory Board provides strong cultural governance and oversight. The AODKC is also guided by an expert reference group with membership including significant Aboriginal and Torres Strait Islander sector leaders. There are also strong relationships and partnerships with key stakeholders and peak bodies in the sector which ensures the *HealthInfoNet* remains well known and utilised. Recent user survey data shows that there are very high levels of trust and satisfaction from users. The *HealthInfoNet* was also rated as culturally appropriate and safe.

## **Quality control**

All information and materials specially prepared for inclusion on the web resource are subject to documented quality control mechanisms. Maintaining the quality of the information on the AODKC web resource is dealt with in two ways:

(1) for some substantial documents, such as narrative reviews of AOD topics, formal peer review is undertaken (the *HealthInfoNet*'s honorary Consultants and other experts can provide this service both formally and informally); all the *HealthInfoNet*'s original publications are also subject to post publication peer review. All substantial documents including those that do not require external peer review, and those of a sensitive nature, are checked by the Director.

(2) for less substantial documents and information, quality control is performed internally. The *HealthInfoNet* has inclusion criteria for information added to the website which are strictly observed. It also has developed standard formats for the various types of information to be added to the web resource, and all new additions are subjected to a 'second-setting' process that means that all additions developed by a staff member are checked by at least one other person.

## **Financial**

As noted above, the *HealthInfoNet* operates within ECU's comprehensive governance framework, and works closely in its financial operations with ECU's finance section. In particular, the *HealthInfoNet*'s Business Manager works closely with Kurongkurl Katitjin's Finance Manager and his staff in budgeting and monitoring income and expenditure. The *HealthInfoNet*'s financial statements are prepared by a Business Analyst who is part of ECU's ORI team.

## **Staffing**

Because of the specialised nature of the *HealthInfoNet*'s operations, there are also staffing-related risks. The specialised nature of its works means that there is quite a long orientation/training period before new *HealthInfoNet* staff, particularly those working in the research and IT areas, are fully aware of the complexities and procedures of the operations. These complexities are documented in a formal procedure manual. This has greatly assisted the orientation/training process, meaning that researchers become productive more quickly. Even then, the *HealthInfoNet* still has some risk with staff turnover, particularly with research and IT staff. Any greater-than-normal turnover would have an impact on the *HealthInfoNet*'s productivity. Specialised products, such as reviews, are most vulnerable to these risks.

## **Information technology**

With the *HealthInfoNet*'s products being almost exclusively disseminated via the Internet, there is always a risk with the computer and network systems feeding into the Internet. As is the case with finances, the *HealthInfoNet* is protected to a large degree against these risks by operating within the ECU environment. The *HealthInfoNet* websites are run on an externally hosted virtual server which was procured by ECU IT. Daily backups are run by *HealthInfoNet*, in addition to the regular backups run by the hosting provider. The *HealthInfoNet* backups are stored externally on the Amazon S3 storage system. ECU IT regularly scan the websites for vulnerabilities and provides a report to *HealthInfoNet* with any areas of concern highlighted. Within the scope of capability, these vulnerabilities are addressed. The *HealthInfoNet*'s IT staff are responsible for the specially developed database and related structures but can call on ECU IT staff, or the services of the hosting company, for assistance and/or advice if needed.

## **Budget AODKC activities**

A large proportion of funding, under this agreement, will be used to employ the staff necessary to consolidate, expand and promote the current HealthInfoNet's AODKC web resource. Salary costs, which are based on the ECU current Enterprise Bargaining Agreement (EBA) and anticipated future agreements, include mandatory on-costs (including superannuation, payroll tax, workers compensation, severance pay and leave payments). The salary costs provide for salary increases set out under the relevant EBA.

Funding also covers non-salary expenses, including:

- engagement expenses such as travel and accommodation for conference attendance and expenses related to other engagement events
- consultancy fees for expert assistance in the production of knowledge exchange products
- promotion expenses such as promotional materials, stands at conferences, conference registrations and the printing of the AOD topic review
- general expenses such as postage, freight and computing expenses
- administrative services which covers indirect costs to support and manage the program activities such as communications, photocopying, computing infrastructure costs and accommodation related expenses.

### ***Budget for AODKC activities 2023 - 2024***

<b>Funding</b>		<b>412,000</b>
<b>Less expenses:</b>		
Salaries	309,530	
Engagement	5,000	
Consultancy fees	5,000	
Promotion and printing costs	10,070	
Administrative services	82,400	
<b>Total expenditure</b>		<b>412,000</b>