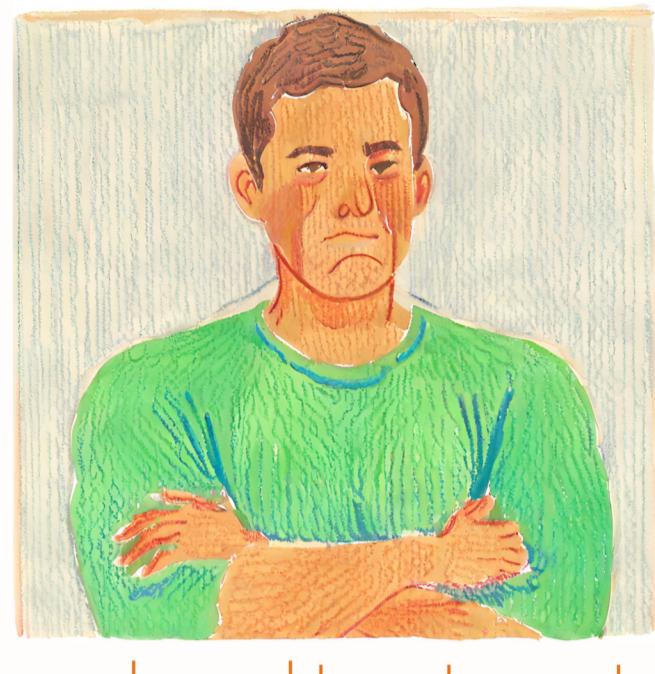


# Building sector capacity: piloting the Alcohol and Drug Cognitive Enhancement (ACE) program in diverse treatment settings.

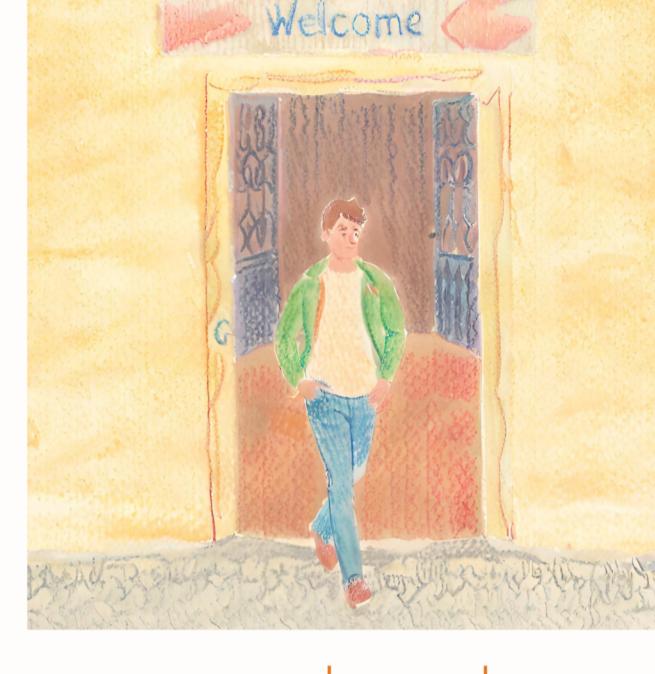
A Tasmanian sector capacity building project

## Why target cognitive impairment?

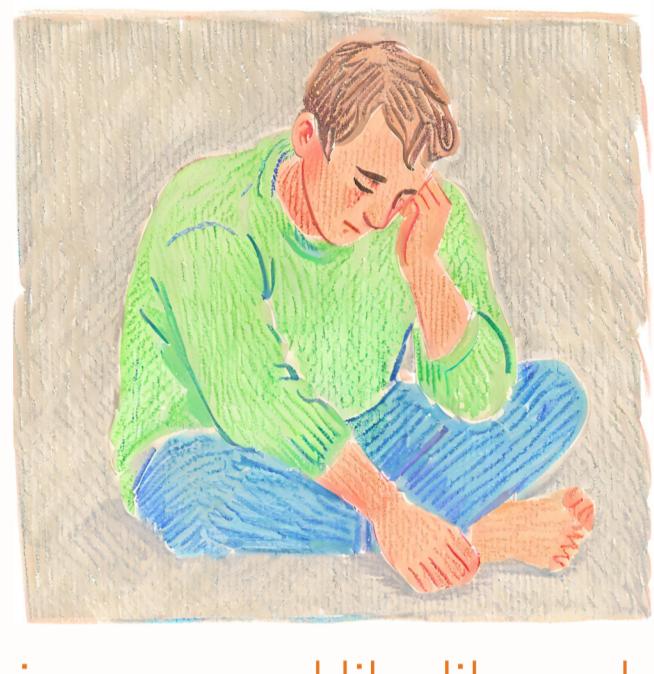
People accessing addiction treatment services often present with co-occurring cognitive impairment impacting treatment outcomes:



reduced treatment adherence



reduced retention



increased likelihood of relapse

The ATDC saw an opportunity to improve client outcomes through the ACE program. With the ability to screen, assess and improve executive functions via the ACE program, we aimed to improve the treatment outcome for clients across a diverse range of treatment settings in Tasmania.

## What is the ACE program?

The Alcohol and Drug Cognitive Enhancement (ACE) program is a manualised approach to cognitive impairment alcohol and other drug settings, consisting of:



the 2-minute ACE Screener: indicates the likelihood of a client having cognitive impairment.



the 30-minute BEAT assessment tool: provides an indication of the level of cognitive impairment and which specific executive function is impacted.



12 group-based cognitive remediation workshops: improves the cognitive performance of clients through empowerment, learning, strategies, hacks, and self-awareness.

The ACE program has been shown to improve client retention across in-patient treatment settings and reduce cognitive impairment rates.

## The pilot in three stages

### Training

Staff from five key community-managed organisations undertook comprehensive training, which included understanding the brain, utilising ACE resources, conducting cognitive remediation workshops, and integrating ACE throughout the organisation. Participants also attended a series of meetings to share knowledge and key learnings.

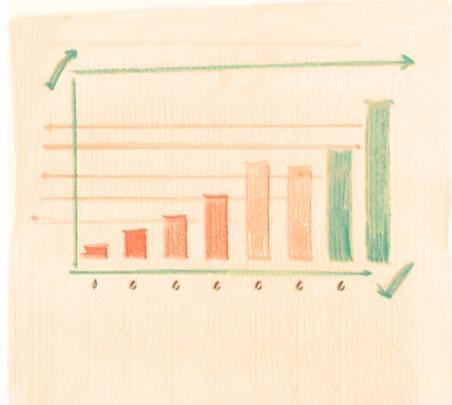
### Implementation

Over six months between July and December 2022, the ACE program was delivered across inpatient, outpatient, and therapeutic community settings (n=328).

### Evaluation

An independent evaluation examining feasibility, program completion and engagement, client outcomes and organisational change was conducted by a master's student at the University of Tasmania.

Data was collected over this period from clients who engaged with some aspect of the program, although a smaller number consented to the study (n=268)



## Results

79% of clients completing the ACE Screener indicated a likely cognitive impairment

58% of clients who completed the BEAT assessment indicated a cognitive impairment

75% of clients (n=20) who completed a median of 11 remediation workshops showed a clinically significant improvement in cognitive function

### Service Outcomes

- + service staff felt the program was useful and easy to understand
- the ACE program was not easily adapted to outpatient settings

### Client Outcomes

- + preliminary data suggests cognitive improvement post-intervention
- some clients found the group-work too complex

## Overall findings

The pilot confirmed that many people in treatment for alcohol and drug dependence in Tasmania indicate cognitive impairment and that this can be improved through the ACE cognitive remediation group-work training.

Further findings are discussed below:

### Feasibility

The program was easier to deploy in inpatient services, with client engagement maintained. The program was less suited to outpatient and community settings where clients were more transient or presenting with other issues. Promisingly, 78% of clients reported they would recommend the cognitive remediation sessions to others.

### Program engagement

Staff and clients reported generally high levels of engagement. However, in community settings, client attrition was high, especially where clients were still actively using substances. 82 clients attended at least one group session with the average sessions being five.

### Client outcomes

Staff reported that clients who actively engaged and completed all activities associated with the workshops improved their knowledge. These clients reported improved general outlook, memory, communication, and attention.

### Organisational changes

Staff reported increased knowledge, and sector collaboration, and felt they had a framework for responding to the needs of clients with cognitive impairment.

## Recommendations

- ★ the ACE program continue to be delivered in Tasmanian residential treatment settings
- ★ program resources be reviewed and refined to suit outpatient settings
- ★ further funding be provided to organisations to support the increased workload associated with the program
- ★ for clients indicating severe cognitive impairment, funding and clearer paths for assessing, diagnosing, and treatment are essential

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Special thanks to the authors of the independent evaluation:  
Vincent, E., Matthews, A., Raimondo, B. (2023). The ACE pilot program in Tasmanian alcohol and drug treatment organisations: final evaluation report. Hobart: University of Tasmania.

I would like to extend my sincere thanks to the clients and staff who participated in this pilot.