

2016-2018 STRATEGIC PLAN

VISION

Coolmine believes
that everyone should
have the opportunity
to overcome addiction
and lead a fulfilled and
productive life.

MISSION STATEMENT

Coolmine provides
a range of quality
community and residential
services to empower
people and their families
overcome addiction
and support long term
recovery.

VALUES

DIGNITY & RESPECT

We ensure the dignity and respect of individuals by actively listening and holding a non-judgmental attitude which is supported by our service standards.

SAFETY & SECURITY

We believe in the physical and psychological safety and security for all through the implementation of sound policy and procedure.

COMPASSION

We believe that compassion is demonstrated through responsible love, concern and understanding for each other.

HONESTY, CONSISTENCY AND RESPONSIBILITY

This value lies at the core of what we believe and is demonstrated by accountability and transparency in all areas of our organisation.

COMMITMENT TO QUALITY

We are committed to quality through evidence based practice, research and continuous improvement of our standards and resources.





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Charles started taking drugs at age 12 and has spent much of his life in prison. "The longest time I spent out of prison was 18 months, before I was locked up again," With two weeks to run on his prison sentence, he was referred by his counsellor to Coolmine. He spent 5 months as a resident in Coolmine. "They are very, very good in Coolmine. You are part of a community once you go in there. Everyone is given a role and mine progressed over time and I became the client co-ordinator," Charles said. This essentially means he is the go-between clients and management to cross check service delivery and effect change. Charles is currently studying in UCD and has been clean for 18 months. Coolmine's work strives to achieve quality outcomes such as this example.

Our Strategic Plan 2016 - 2018 is about achieving quality outcomes for clients - by setting goals and determining actions to achieve those goals, positive and quality outcomes are achieved.

Board members, staff and stakeholders participated in drafting this Plan and the process included 25 face to face consultation meetings with government departments, funders, strategic partners and peer agencies.

The Strategic Plan contains the overall objectives, with corresponding actions, key performance indicators and target dates. Our Strategic Plan Implementation Group is comprised of client, staff and management members who meet every 6 weeks to ensure the Plan is on track. Progress is monitored at every Board meeting.

Our Board has ensured that we have fulfilled and continue to review the actions for compliance with the Governance Code for Voluntary and Charitable Organisations.

We have a relentless commitment to the quality of services we provide. Our Clinical Advisory Group ensures clinical excellence in all of our interventions with clients. Our quality standards are audited and accredited by the Royal College of Psychiatry UK and their Special Committee on Professional Practice and Ethics, and the CCQI Quality Standard has been awarded for Coolmine's two residential sites. We receive feedback from clients on a daily basis and every topic raised is brought to our 6 weekly Client Forum meetings with management, staff and client representatives. We conduct regular audits and surveys with both clients and staff to action improvement in the services provided. A monthly programme of staff training and development is scheduled. But at the heart of our work is our commitment to using the best available evidence to inform decision making about the care of individuals, and the services we provide to marginalised populations.

Thank you to all who contributed time to developing this Plan. I would also like to thank our funders, supporters and friends who make providing the vital service we do, possible. Thank you to our partners – our Strategic Plan cannot succeed without planned collaboration with partners. We will develop and strengthen these partnerships during 2016-2018.

On behalf of all board members, I wish to commend the work of our highly skilled and committed staff, under the expert guidance and leadership of our Chief Executive.

Coolmine board members contribute their time and expertise to achieving Coolmine's vision on a voluntary basis and I thank them all individually.

Alan Connolly Chairman





Coolmine is committed to vision of recovery which strives for an enhanced quality of life greater than just abstinence from drugs and alcohol. Through service provision embedded in a continuum of care, we support clients to stabilise, detoxify and remain drug and alcohol free. Furthermore, we are committed to assisting them to improve their quality of life; enhance family and interpersonal relationships, progression of health, housing, educational, training and employment needs.

This improvment in quality of life is reflective of the traditional Coolmine ethos and also in more recent years the national, European and international call for rigorous drug treatment programme evaluation and rehabilitation outcome studies. In response to the first national longitudinal drug treatment outcome study 'Research Outcome Study in Ireland **Evaluating Drug Treatment Effectiveness'** (ROSIE) Coolmine are delighted to contribute to national and international literature through the imminent publication of our longitudinal study. The findings are encouraging including that 71% (n=80) of study participants reported to be free from illicit drug use two years after intake to a Coolmine service.

Further evidence of the impact of Coolmine's work, is the significant progression made on the implementation of the previous strategic plan 2012-2015, set within a difficult economic backdrop as core funding was being reduced. Notwithstanding this position, the organisation's capacity to think innovatively resulted in the following key achievements being progressed largely from within existing resources:

 Refined the length of stay of the therapeutic community residential treatment phase and established a dedicated step-down programme with life-long aftercare initiatives to support long term recovery.

- Increased service activity to meet presenting client need through more outreach, assessment and pre-entry work; established a Community Alcohol Treatment Programme, Cannabis/Mental Health programme, Recovery through Nature (RtN) programme, and increased medical assessment and care planning supports to enable complex needs and detox admissions (see appendix 4).
- Increased service capacity to meet presenting demand; Coolmine Lodge male residential from an average of 22 placements in 2012 to 32 in 2015 and Coolmine Ashleigh House female residential from an average of 12 placements in 2012 to 24 in 2015 (see appendix 4).
- Developed further partnership collaborations and formal service level agreements with other statutory and voluntary providers enhancing access to treatment, ensuring appropriate care planning and maximising progression to housing, health, education, training and employment supports
- Contributed to formal research at national and international levels as we hosted the European Working Group on Drugs Orientated Research (EWODOR) presenting findings from our longitudinal research outcome study as well as studies that focused on the implementation, integration and impact of evidence based interventions.
- Integration of evidence based interventions including Community Reinforcement Approach (CRA); Mindfulness based Relapse Prevention (MBRP) and Parents under Pressure (PuP) across all our programmes.
- Celebrated our 40th anniversary during 2013 through a series of events

including a 40th commemorative event with a special guest President Michael D Higgins, Coolmine founders, friends, graduates and supporters.

Coolmine's 2012 to 2015 strategic plan will see us build further on these achievements whilst adjusting to a new policy environment. Conscious of the current consultation process to define the direction and work of the next National Drug Strategy here in Ireland, Coolmine welcomes the current commitment to providing a full range of treatment services cognisant of complex presenting needs. Furthermore, we advocate for an emphasis on treatment and rehabilitation outcomes monitoring to improve service provision for people and their families.

This new plan is based on extensive internal and external consultations with clients, staff, and management at Coolmine as well as our external stakeholders and funders (see appendix two).

Set within two distinct strategic areas some of priorities for the next three years include:

GROWTH AND INNOVATION

Establish a drug free prison therapeutic community to increase the service provision for prisoners with problematic substance misuse issues in the Irish Prison estate;

Scope out and develop the expansion of mother and child services, including further programmes for non-stabilised expectant women and the Parenting Under Pressure programme, to meet the identified need in the sector for targeted interventions for high risk families:

CAPACITY AND SUSTAINABILITY

Identify and invest in staff and management structures, skills and systems required to maintain delivery of high quality services and achieve the best possible outcomes;

Annually review Coolmine's governance arrangements, including charity regulation, fundraising principles of good governance, SORP compliance and governance code compliance to further enhance our excellence in charity governance;

I would also like to thank all of those partnership agencies (appendix three) whose support and cooperation we rely on to meet the presenting needs of our clients and we look forward to our continued work together.

I would like to acknowledge and thank all

of our staff and volunteers for their dedication, flexibility and willingness to take on new challenges as we embark on implementation of this strategy.







Coolmine is a drug and alcohol treatment centre providing a range of high quality residential and non-residential services to men and women with problematic substance use and their families in Ireland. Established in 1973, Coolmine was founded, and remains grounded within, the philosophies of the Therapeutic Community (TC) approach to addiction treatment.

THERAPEUTIC COMMUNITY APPROACH

The TC is primarily a self-help approach in which residents are responsible for their own recovery with peers and staff acting as facilitators of change. Within the TC there is commitment to 'community as method' where the primary therapy and the main agent for change is the community itself. The most common features of TCs include that they are operated by residents, are based on a hierarchical structure according to seniority (length of time in the programme) and abstinence is the ultimate goal. Individuals obtain therapeutic and educational impact when they engage in and learn to use all of the activities and relationships of the highly structured programme.

EVIDENCE BASED PRACTICES

Coolmine remains committed, in an explicit way, to adopting evidence based and professional counselling interventions to assist in the provision of quality community and residential services. Many of our staff are trained in cognitive behavioural therapies, motivational interviewing and mindfulness based strategies. All staff are trained in the Community Reinforcement Approach (CRA) the model adopted for our case management system. CRA is a comprehensive behavioural

intervention for the treatment of substance abuse problems that utilises familial, social, recreational, and occupational reinforcers to support individuals in changing their drinking and drug taking behaviours. The goal is to construct an environment that rewards sobriety and discourages substance use. Coolmine has the highest number of trained CRA staff in Europe. The Community Reinforcement Approach Family Training (CRAFT) is offered within our family support services. CRAFT aims to improve the functioning of the Concerned Significant Other (CSO), help reduce the substance use of the Identified Patient (IP) and support the IP entering into treatment.

ACCESSIBILE SERVICES

Coolmine believes that accessible treatment services are pivotal to engaging and supporting individuals with problematic substance use. We offer stabilisation and detoxification placements, in our community and residential services. Furthermore, Coolmine are committed to working with low threshold service providers to maximise access to treatment. We demonstrate this through our partnership work with Ana Liffey Drug Project which provides a good practice model for supporting clients with treatment options, responsive needs assessment and ensuring access to treatment and rehabilitation services.

CONTINUMN OF CARE

Coolmine believes that a rehabilitative continuum of care must include access to childcare, education, employment, health, housing and training to allow clients to become meaningful participants in society.

As such, we are committed to an inter-agency

model of working to enhance our client outcomes. Coolmine works in partnership with statutory, voluntary and community agencies. We demonstrate this through our strategic collaboration with Peter McVerry Trust for shared services namely aftercare housing for those in recovery.

QUALITY ASSURANCE

Coolmine have various systems and audits that we complete in order to safeguard our practice. This is co-ordinated through our daily clinical practice and overseen by our Clinical Nurse Manager, Clinical Advisory Group and Clinical Governance lead. Coolmine are active members and supported by the European of Federation of Therapeutic Communities (EFTC) network providing support for organisational policy, practice based and academic research. Coolmine are members of, and avail of staff trainings from, the European Companionship and Education through training by travel (ECEtt) network.

CHILDREN FIRST

Due to the unique nature of our service and the complex issues that many of our clients and their children present with in treatment, Coolmine are committed fully to the implementation of the National Guidelines for the Protection and Welfare of Children. Through our organisational Child Protection Working Group, led by our Clinical Nurse Manager, we examine best practice, develop policies and guide staff in managing child protection and welfare concerns. All staff are garda vetted and some of them have had 'Children First' training. We have 7 Designated Liaison Persons in the organisation.

QUALITY STANDARDS

Coolmine participates annually in the Royal College of Psychiatry (UK) accredited Community of Communities Quality Standards. This is a peer review process of quality standards to ensure best practice in service delivery and identification of areas for improvement using methods and values that reflect the Therapeutic Community model. Both residential communities, Coolmine Lodge and Ashleigh House, are accredited Therapeutic Communities validated from February 2015 to February 2018. Coolmine adhere to Quality in Alcohol and Drug Services (QuADS) good practice policy and procedures also.



SERVICES PROVIDED

Coolmine provides a range of community, day and residential services to support people and their families with problematic substance use as follows:

Contact, assessment & stabilisation services:

We provide access to our treatment services through contact, assessment, keyworking and group supports. We work in partnership with agencies nationally including Ana Liffey Drug Project, ADAPT Community Drug Team, Arbour House Cork, DAISH project, Merchants Quay Ireland and Probation Service for treatment options, assessment and pre-entry group supports.

The following range of contact, assessment and stabilisation services are provided by Coomine:

- · Outreach and assessment in Irish prison estate
- Outreach, assessment and treatment options groups in the community
- Drop in service at Coolmine House, 19
 Lord Edward Street
- Pre-entry groups in Dublin 1, Dublin 2,
 Dublin 15 and Cork
- Stabilisation Day Programme at Coolmine House
- Contingency Management Programme at Coolmine House
- · Cannabis/Mental Health Programme
- Assessment for residential and/or community detox

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2. Primary treatment services:

The TC model is a treatment and rehabilitation approach where clients live in a small structured drug-free community. The goal is to encourage psychological and lifestyle changes to enable people to maintain a drug-free lifestyle. The treatment approach is based on peer support. Participants contribute to the general running of the community and to their own recovery by actively participating in educational activities, group and individual therapy.

The following primary treatment services are provided by Coolmine:

- Residential methadone detoxification placements
- Men's residential TC service, Coolmine Lodge
- Women's & Mother and Child residential
 TC service, Ashleigh House
- Drug Free Day Programme (DFDP) in Coolmine House, 19 Lord Edward Street (community detoxification placements available)
- · Community Alcohol Programme

3. Integration and aftercare services:

We provide a range of integration and aftercare programmes to support clients as they transition from high support to community living, work, training and employment.

The following services are provided:

- Step down programme
- · Aftercare services
- · Community Housing



- · Lifelong graduates service
- Community Employment Scheme

4. Recovery services:

Coolmine recognises the need for a holistic care plan and recovery supports to give clients the best possible chance of maintaining their recovery from problematic drug and alcohol use.

Responding to the various needs identified during case management processes, Coolmine provide the following range of services internally to ensure accessibility for our clients:

- Medical services
- · Health Promotion
- · Housing and resettlement service
- · Career guidance service
- Education and literacy support programme
- · Counselling/Psychotherapy services
- · Parents Under Pressure (PuP) programme
- Recovery Through Nature(RtN) programme
- Client participation strategy

5. Family support services:

Our Family Support Groups offer guidance, help and advice to anyone who is affected by a loved one's addiction. The service has been running since the early eighties and is a peer led service. This is a safe place for families to come together and talk about their issues in a secure environment, with the focus being on those people in the group who are affected by a loved one with an addiction. Family support workers are trained in 'Responding to Alcohol and Drug Problems in the Family; The 5 Step Method' and they meet with each family member on a one to one basis to discuss their individual needs. Each family member is unique and are treated this way.

The following family support services are provided:

- · Weekly open support groups
- Community Reinforcement Approach Family Therapy Groups (CRAFT)
- · One to one support

Range of services

Contact and Assessment	Primary Treatment	Integration	Aftercare	Life Long Aftercare
Flexible & ongoing	Minimum 5 months	Minimum 2 months	Minimum 5 months	Flexible & ongoing
Outreach: Prisons & Community	Men's Residential: 32 Participants 4 Methadone Detox Places	Step Down	Clients supported back into the community	Lifelong aftercare which is peer lead
Drop In	Women's Residential: 24 Participants 4 Methadone Detox Places		Graduate Support	
Stabilisation Day Programme	Mother & Child Accommodation			
Contingency Management	Drug Free Day Programme			
Cannabis/ Mental health programme	Community Detox non residential			



Community Employment Scheme



Community Alcohol

Programme





RECOVERY SERVICES

Nursing and Medical services, Counselling and Psychotherapy support Parenting Under Pressure programme, Housing and Resettlement support Career Guidance Service - Transition to employment & Return to education programmes Education and Literacy support programme Client Participation Strategy - weekly service user feedback meetings and six weekly organisation wide client forum meetings

Family Support Services

Weekly open support groups; one to one support & CRAFT groups



OUR COMMITMENT

Coolmine is a registered charity and a company limited by guarantee without a share capital. Its purpose, objectives and how it conducts its business are set out in its Memorandum of Association as available from the Companies Registration Office. The principal activity of the company is the operation, administration and support of therapeutic programmes and communities to support the recovery and resocialisation of persons addicted to drugs and alcohol.

Coolmine is committed to maintaining the highest standard of corporate governance in all our activities. Coolmine's Board of Directors adopted the Governance Code for Community, Voluntary and Charitable Organisations (www.governancecode. ie). Having fulfilled the recommended guideline actions of compliance for a Type C organisation, Coolmine confirmed our compliance on March 31st 2015.

FUNDRAISING GOVERNANCE COMMITMENT

Coolmine has committed to implementing fully the Statement of Guiding Principles for Fundraising. The statement provides Irish charities with good practice standards for fundraising. This process is led by the ICTR (Irish Charities Tax Research Ltd) and supported by the Department of Justice and Equality.

The Statement aims to:

- · Improve the way charities in Ireland raise their funds.
- Promote accountability and transparency among charities.

· Provide clarity and assurances to donors about the organisation they support.

The statement has been formally discussed and adopted by Coolmine's Board of Directors. Coolmine received confirmation from Irish Charities Tax Research Ltd that we meet the requirements for signing up to the Statement of Guiding Principles for Fundraising May 2014.

BOARD STRUCTURE

Directors are recruited based on the skills and expertise they can bring to the Board and subsequently to the work and ethos of the organisation. Following an induction process, inclusive of site visits, all new Board members sign a code of conduct which sets out their role and required considerations for their term of office. The main duties of the Board include the overall strategic management of the business, setting the organisational vision, overseeing the annual operating budgets, review of service activity, overseeing continuous risk review and ensuring effective governance.

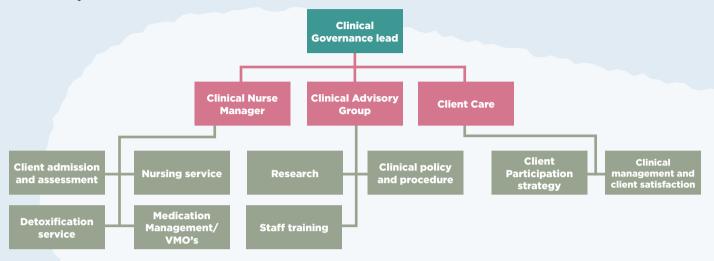
Coolmine's Board has a minimum of seven voluntary directors. As per Coolmine's Protocol for Directors, the term of office for a Board Director is three years, with an option for reappointment for a (maximum) second office term at the Annual General Meeting (AGM). A Board succession plan has been developed and is reviewed.

The Coolmine board meets at minimum four times per year. The board is assisted in its work, ensuring good governance and quality service delivery is maintained, through working groups and the following subcommittees:

- · Finance sub-committee
- · Audit and Risk sub-committee
- · Clinical Advisory Group

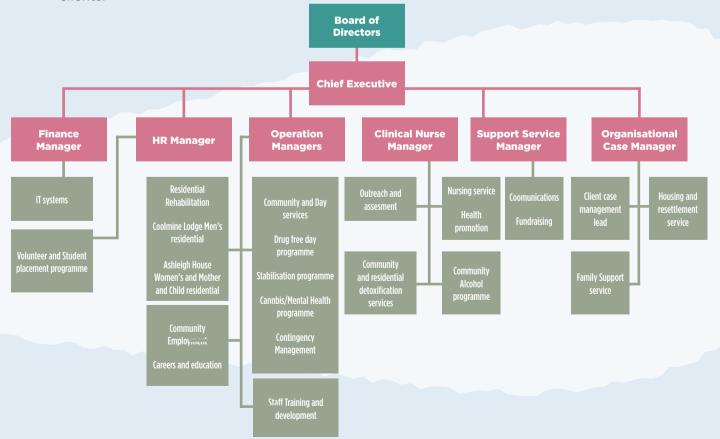
CLINICAL GOVERNANCE STRUCTURE

Coolmine's service activity is assured through our contract-in Clinical Governance lead, Dr. Joanne Fenton, to oversee best practice in daily clinical work across all services.



ORGANISATIONAL STRUCTURE

Coolmine's service activity is provided by over seventy staff. Each staff member contributes to the overall work of the organisation and achieving best possible outcomes for our clients.





METHODOLOGY

The overarching principle underpinning the development of this plan was that all key stakeholders impacted by Coolmine's service activity have the opportunity to learn more about the organisation, to share their perceptions of our strengths and weaknesses, and to discuss critical issues affecting, or likely to affect, Coolmine into the future. As such the following methodology was employed.

1. Getting started

A five phase timeline was developed by the Senior Management Team and ratified at a board meeting March 2015 to guide the development of Coolmine's Strategic Plan 2016-2018 as summarised below:

2. Setting the scene

The Strategic Plan Implementation Group (SPIGs) is the core implementation monitoring tool employed by Coolmine to ensure our strategy stays alive during its lifespan. Meeting approximately 8 times per annum this group is made up of representatives from our clients and staff across internal services. The purpose of the group is to update on the implementation status of Coolmine's strategic plan actions through noting achievements, verifying progress of actions on target and highlighting those requiring a refocus. Through the work of the SPIGs group, led by Coolmine's Operations Manager, the outstanding actions from the last plan, have been brought forward and incorporated where relevant into this strategy.

In May 2015 Coolmine's Board of directors and Senior Management team members participated in a Strategy Planning Day facilitated by an external facilitator, Ms. Yvonne Nolan (Organisation & Role Consultant). A situational analysis consisting of the following took place:

- Implementation status of 2012-2015 Strategic Plan actions
- Statistical trend analysis 2010-2014
- Staff Satisfaction Survey Feedback 2010-2014
- Client Satisfaction Survey Feedback
 2010-2014
- Funding analysis 2010-2014
- Policy environment analysis cognisant of the National Drugs Strategy (2009-2016);
 Department of Justice Probation Service & Irish Prison Service joint strategy (2013);
 Department of Social Protection Drug Rehabilitation Projects (Community Employment Schemes);
 Dublin Regional Homeless Executive Strategy;
 Tusla Child and Family Agency Meitheal Strategy (2014).

The output was strategic priorities represented by 12 draft strategic goals. The goals represent the overall direction for Coolmine into the future and formed the basis of the consultation process.

3. Phase 3: Consultation process

The purpose of the consultation meetings was twofold. Firstly, key stakeholders were asked to comment on Coolmine's role, capacity, profile and service delivery as a treatment and rehabilitation service provider in Ireland. Secondly, key stakeholders were requested to feedback any comments/observations they had in respect of our draft strategic goals.

The internal consultation process engaged 8 focus groups with key stakeholders including family support group members, client participation meetings and client forums. In addition, staff consultation was championed through local SPIGs reps every six weeks and at our Summer Organisational Away Day with staff and volunteers. This consultation phase included review of and commitment to Coolmine's vision, mission, values, logo and tag line into the future.

The external consultation process engaged 25 face to face meetings with government departments, funders, strategic partners and peer agencies. The external process provided invaluable feedback that supported the drafting of the plan.

Coolmine extend a sincere thanks to everyone who kindly facilitated our request to meet during busy schedules, as listed in Appendix 2.

4. Phase 4: Drafting the plan

The internal and external consultation feedback was summarised and channelled through to Coolmine's Senior Management Team (SMT). The SMT held an away day led by the Operations Manager where the strategic goals were broken down further into actions. The actions and resultant Key Performance Indicators (KPIs) provide the framework for the SPIGs group to track implementation progress.

Parallel with this process Coolmine engaged in a process to refresh our logo, tag line and website to reflect more fully the work and range of services provided by the organisation in 2015 and beyond.

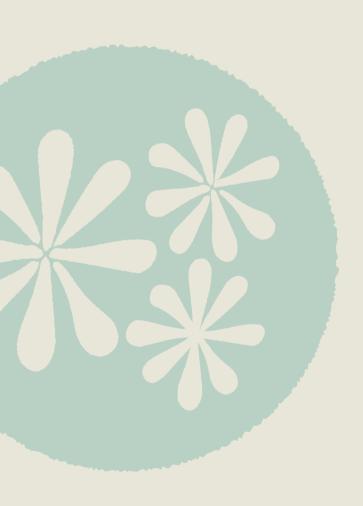
5. Phase 5: Ratification and implementation

The Board of Coolmine deliberated on the Strategic Plan at a special board meeting on November 23rd 2015. The plan was ratified at the Board meeting on 8th December 2015.

The Coolmine Winter Organisational Away Day reviewed and defined SPIGs membership, terms of reference and meeting schedule for 2016.

All key actions in the plan are owned by a manager or project worker, who with the support of their colleagues shall be responsible for annual action plans to progress the strategic goals, monitored through six weekly SPIGs meetings.

Coolmine's Board of Directors shall receive a quarterly strategy implementation report from the Chief Executive who has overall responsibility for the delivery of Coolmine's 2016-2018 Strategic Plan.



2016-2018 2016-2018



STRATEGIC AIM ONE: GROWTH AND INNOVATION

KEY OBJECTIVES:

Develop a drug free prison therapeutic community to increase the service provision for prisoners with problematic substance misuse issues in the Irish Prison estate.

ACTION	KPIs	TARGET DATE
A. Establish a prison TC in collaboration with key stakeholders in particular the Irish prison service.	Provision of 40 drug free prison therapeutic community placements per annum.	Q3 2017
B. Ensure resources are in place for all clients to access community rehabilitation supports including housing, health, education, employment and family support.	Increase retention of prison population completing the full Coolmine programme to 55%.	Q4 2017
C. Provide intensive therapeutic community training, induction supports and succession planning to maximise quality service delivery.	Deliver therapeutic community curriculum training, certification and ongoing supervision supports.	Q1 2016

Scope out and develop the expansion of mother and child services, including further programmes for non-stabilised expectant women and the Parents Under Pressure programme, to meet the identified need in the sector for targeted interventions for high risk families.

ACTION	KPIs	TARGET DATE
A. Develop appropriate clinical governance arrangements and seek funding to establish a residential stabilisation unit for expectant women.	6 expectant women stabilise substance use during pregnancy per annum.	Q4 2016
B. Enhance the multi-disciplinary supports to meet the complex presenting needs of women and children engaged in Coolmine Ashleigh House.	Increase the clinical nursing team by 1 and engage a children and family social worker discipline.	Q3 2016
C. In collaboration with Griffith University Australia implement further the evidence based Parenting Under Pressure programme (PuP) training, ensuring sustainability both internally and externally.	Bi-annual internal PuP programme training & accreditation supports Bi annual external PuP programme training & accreditation supports	Q1 2017

3

Develop services to enhance treatment access, decrease early leavers and to manage crisis during lapse/relapse.

ACTION	KPIs	TARGET DATE
A. Develop a safety net service for early leavers in partnership with key homeless agencies.	Interagency care plan to support those who lapse/relapse to re- engage with primary treatment service within a 2 week timeframe.	Q1 2017
B. Formal establishment of 2 methadone maintenance programme placements for pregnant women to increase access to residential treatment.	4 methadone maintenance placements per annum.	Q4 2016
C. Maximise the use of residential and community detox placements across all services.	Track the number of and measure the outcome for clients accessing stabilisation, detoxification, primary treatment through to aftercare services quarterly.	Q3 2016



Explore the potential for further non-residential community based alcohol treatment services to increase access and treatment support for people with primary alcohol substance misuse issues.

ACTION	KPIs	TARGET DATE
A. Secure funding to sustain delivery of the current Community Alcohol Programme (CAP) and to develop a second CAP programme.	Maintain a minimum 25 client placements in the CAP Dublin 15.	Q3 2016
B. Establish a second Community Alcohol Programme (CAP) in response to the rising demand for alcohol treatment services.	Provide 12 clients placements in CAP in Coolmine House, Dublin 2.	Q1 2016
C. Maximise access to and use of CAP detoxification placements through effective use of interagency protocols.	4 community alcohol detoxification placements per quarter.	Q3 2016



Review and enhance partnership agreements to further increase access to rehabilitation services, support project expansion and maximise aftercare supports nationally for Review and enhance partnership agreements to further increase access to treatment and clients with problematic substance misuse issues.

ACTION	KPIs	TARGET DATE
A. Expand and enhance partnership collaborations to provide pre- entry supports, assessment and aftercare services nationally.	Localised assessments. Localised pre-entry groups. Aftercare groups & 1:2:1 counselling provision in collaboration with local providers.	Q3 2016
B. Ensure access to education, training and career guidance supports for all clients during treatment.	Full-time career guidance service in place that co-ordinates a responsive education programme across all services.	Q2 2017
C. Engage with housing providers to ensure all clients have long term sustainable housing plan in place.	100 housing placements per annum	Q4 2016



Invest in our established research culture to identify opportunities that contribute both nationally and internationally to increased knowledge of evidence based treatment approaches and interventions.

ACTION	KPIs	TARGET DATE
A. Invest in a quality outcome monitoring system to gather accurate data for statistical reporting and in house research.	Monthly outcome reports and annual client tracking outcome reports in place.	Q2 2016
B. Develop partnerships with colleges/universities and other relevant stakeholders to strengthen processes for and increase resources to conduct formal research.	Published research papers to include Dual Diagnosis; Prevalence of complex health needs amongst recovering substance misusers; Impact of Parenting Under Pressure programme (PUP); Tracking prison clients treatment outcomes.	Q3 2016- Q3 2018
C. Host the 2017 European Federations of Therapeutic Communities Conference in Dublin.	Establish local EFTC planning committee, budget and an action plan to deliver EFTC in Sept 2017.	Q1 2016



KEY OBJECTIVES

Identify and invest in staff and management structures, skills and systems required to maintain delivery of high quality services and achieve the best possible outcomes.

ACTION	KPIs	TARGET DATE
A. Review and implement effective induction training, supervision supports and continued performance management system.	Increase in staff retention, staff satisfaction and performance across the organisation.	Q1 2017
B. Resource and launch organisational training plan, consisting of core training and responsive training programmes, for all staff, volunteers and student placements.	Number and percentage of staff trained.	Q1 2016, 2017, 2018
C. Review and enhance organisational volunteer programme inclusive of an annual volunteer recognition event.	12 volunteer placements per annum.	Q2 2016, 2017 2018

Annually review governance arrangements, including clinical governance, charity regulation, fundraising principles of good governance, SORP compliance and governance code compliance to further enhance our excellence in charity governance.

ACTION	KPIs	TARGET DATE
A. Review and implement an annual Clinical Governance audit to ensure quality and safety in service provision.	Adequate clinical resources in place. Maintain compliance Royal College of Psychiatry Community of Communities accreditation. Annual peer reviews of all services.	Q1 2018
B. Maintain full compliance with the Governance Code and Fundraising Principles of Good Governance current quality standards.	Governance policies reviewed and amended if required. Compliance maintained.	Q4 2016
C. Establish policy committee to monitor, review and ensure implementation of all good practice policies and procedures including health and safety, finance and Human Resources.	6 weekly policy committee meetings in place. Annual review of all policies achieved.	Q3 2016, 2017, 2018

Develop comprehensive IT systems, introducing hardware to run the business effectively and software to support evidenced based tracking that demonstrates impact and good practice.

ACTION	KPIs	TARGET DATE
A. Invest in an effective client case management system.	ECASS system full integration.	Q2 2016
B. Complete an annual review of IT infrastructure and make recommendations to improve.	Annual audit of IT hardware and equipment in place. Resource and upgrade essential items.	Q4 2016

Develop an annual maintenance plan for each service that reflects best practice in Health and Safety, is cost effective, realistic and deliverable.

ACTION	KPIs	TARGET DATE
A. Complete an annual maintenance audit that informs a cyclical maintenance plan for all facilities.	Maintenance plan and tracking system in place per site.	Q1 2016
B. Review and improve asset management and procurement processes across all facilities to ensure cost effectiveness.	Manage budget and prioritise necessary maintenance.	Q3 2016
C. Implement a local Health and Safety reporting system incorporating all legislative requirements informed by the Health and Safety Committee.	H&S officer and representatives in place.	Q1 2016

Devise and deliver a communications strategy to enhance the national profile of the organisation and secure our position as treatment and rehabilitation centre of excellence.

ACTION	KPIs	TARGET DATE
A. Annual review and upgrade of website and promotional materials.	New website in place. Refreshed logo & tag lines implemented.	Q1 2016
B. Develop and co-ordinate a system to maintain positive internal organisational communication.	Publish quarterly newsletter. Issue monthly organisational updates.	Q3 2016
C. Devise and deliver an external communications strategy inclusive of social media on relevant subject matter.	Social media strategy in place. Promote position on policy/relevant subject matters. Host bi-annual organisational open days.	Q2 2017

Develop and implement a 3 year fundraising strategy incorporating realistic income targets, sustainable growth and targeting opportunities locally, nationally and internationally.

ACTION	KPIs	TARGET DATE
A. Continue to maintain professional, collaborative and responsive relationships with statutory funders.	Quarterly meetings with core funders to report on service activity and resource new service activity.	Q1 2017
B. Develop further community based fundraising activities and promotion of services at the same.	Calendar of community based fundraising activities in place. 2 fundraising events in place per annum. Fundraising targets achieved.	Q4 2016
C. Seek new funding streams including support from corporate and philanthropic organisations for specific service activities.	Recovery through Nature funding target achieved for 2 years. Education and Career guidance funding target achieved annually. 2% income of overall budget achieved.	Q4 2016



APPENDIX 1

BOARD OF DIRECTORS



Alan Connolly Chairman



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Dr Joanne Fenton Clinical Governance Lead



EXTERNAL STAKEHOLDERS CONSULTATION PROCESS

As part of Coolmine's 2016-2018 Strategic Plan development process a series of face to face consultation meetings were conducted by Chairman, Chief Executive and Senior Management Team members with government departments, funders, strategic partners and peer agencies.

Coolmine extend a sincere thanks to everyone who kindly facilitated our request to meet during busy schedules.

ADAPT Community Drug Team

Aiséirí

Ana Liffey Drug Project

Arbour House Cork

Beaumont Hospital Detox Unit

Blanchardstown Local Drug and Alcohol Task Force

Cork Local Drug and Alcohol Task Force

Coolmine Visiting Medical Officers

Department of Health Drugs Policy Unit

Drug Liaison Midwives

Dublin Regional Homeless Executive

Dublin Simon Community

Exchange House

Fingal County Council

Focus Ireland

Health Service Executive Dublin Mid Leinster

Addiction Services

Health Service Executive National Planning Specialist

Social Inclusion

Health Service Executive North City and County

Addiction Services

Irish Prison Service

Merchants Quay Ireland

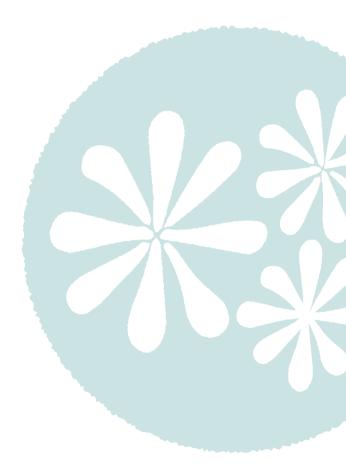
National Drug Treatment Centre

Peter McVerry Trust

Probation Service

South Inner City Local Drug and Alcohol Task Force

Tolka River Project





OUR PARTNERS

Contact and Assessment	Primary Treatment	Integration	Aftercare
Ana Liffey Drug Project	Barnardos	Arbour House Cork	Arbour House Cork
ADAPT Community Drugs Team	Children and Families Social work teams	Clúid HA	Business in the Community
Arbour House Cork	HSE Primary care services	Dublin City Council	CASADH
DAISH Bray	Probation Service	Department of Social Protection	Care After Prison
Drug Liaison Midwives	Visiting Medical Officers	Fingal County Council	Department of Social Protection
Drug & Alcohol service providers		Focus Ireland	Merchants Quay Ireland
Homeless Agencies		Homeless Agencies	Ringsend District Response to Drugs
HSE Addiction Services		Peter McVerry Trust	Tolka River Project
Irish Prison Service		Various county & city councils	
Merchants Quay Ireland			
Probation Services			

We would like to take this opportunity to thank all of our partners for their support and collaboration to deliver, develop and strengthen services for our clients.



OVERVIEW OF SERVICE DELIVERY 2011-2014

Fig 1: Coolmine Community and Day services

	2011	2012	2013	2014	Total
Drug Free Day Programme	42	48	48	54	192
Welcome / Stabilisation programme	48	37	40	54	94
Contingency Management Programme	37	65	41	31	174
Community Alcohol Programme (Commenced May 2014)				28	28
Cannabis/ Mental Health (Commenced Nov 2014)				6	6
Total Number of people worked with in the Community and Day services 2011-2014 (excl outreach)					488

Fig 2 : Coolmine residential services

	2011	2012	2013	2014	Total
Ashleigh House	42	56	63	67	228
Coolmine Lodge	98	120	139	147	504
Total Number of people worked with 2011-2014	732				732

Fig 3: Residential Detoxification service

	2011	2012	2013	2014	Total
No of female detoxification	11	20	13	23	67
No of male detoxification	13	14	10	10	47
Total number of residential detoxifications 2011-2014					114

Fig 4: Family Support Service

Service	2012	2013	2014	Total
Family Support Group	41	26	35	102
CRAFT - Community Reinforcement and family training	45	45	19	109
Total numbers supported 2012-2014 (excl family 3 -way meetings)				211

Fig 5 : Coolmine Outreach ALDP

	2011	2012	2013	2014	Total
Individuals worked with	866	409	518	981	2774

Fig 6 : Housing and Resettlement service

	2012	2013	2014	Total
Individuals worked with	244	216	259	512

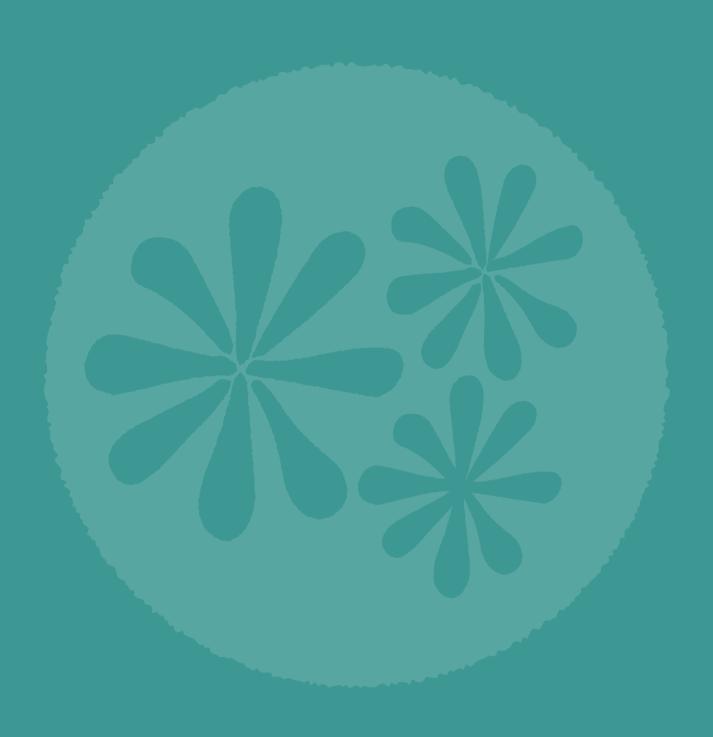
Fig 6: Career Guidance and Education service

	2012	2013	2014	Total
Individuals worked with	155	302	427	884

Fig 7: Nursing Service

	2012	2013	2014	Total
No of client medical reviews	1143	1250	2706	5099







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Coolmine is a registered charity CHY 5902