

ECRDATF REGIONAL MAP

Table of Contents



# Table of Contents

ECRDATF System	4
Evidenced Treatment Data	5
The Wicklow Child & Family Project	10
Wicklow ISPCC	13
Living Life Counselling	14
Tiglin Residential Addiction Treatment Programme	16
Merchants Quay Ireland – East Coast Region Adult Service	18
Drugs and Alcohol Task Force - Form A: NDS Goals	26
National Drugs Strategy	31
Appendix I	37
Appendix II - Governance	42

ECRDATF SYSTEM EVIDENCED TREATMENT DATA

# Chairperson ECRDATF Structure Treatment & Recovery Group ECRDATF Committee Finance, Audit & Risk Group Alcohol Task Force Coordinator & Development Worker Other Sub-groups

#### **Our Purpose**

Addiction is hurting the communities we care about and we want to make a difference.

#### **Our Vision**

People in the East Coast Region are healthier, safer and are supported to tackle the impact of addictions in our communities.

# EastCoast Regional Drugs & Alcohol Task Force

#### Overall Drug Usage in the East Coast Region

- The population of the East Coast Region has increased between 2016 and 2022 of up to 9.2% subject to Census 2022 data being released later in 2023.
- The HRB record 699 clients receiving treatment in this region which does not include any of the 932 clients on OST recorded by the Central Treatment List.
- On completion of treatment provided, drug/alcohol usage had ceased or reduced by 51% of clients which supports the great work being achieved.
- Of all presenting clients, ECR clients treated show up to one third females presenting which is increasing year on year.
- Alcohol, Cocaine, Cannabis and Heroin remain the most prevalent drugs identified as causing problems at assessment in this region.

#### **Emerging Trends**

- The numbers of adults accessing services is increasing year on year with initial client assessment identifying greater complexities and diverse needs.
- Drug use co-existing with mental health difficulties and/or homelessness continues to require greater interagency cooperation to assist this vulnerable group.
- Increased reports of Drug Related Intimidation as a result of drug debt with verbal and physical threats meted out on individual and their families. Drug debts in more affluent areas are generally of a much higher value and bring higher interest rates and pressures to pay quickly.
- Community supported detoxification for alcohol and benzodiazepines particularly remains difficult to establish with GPs resistant to engage.

#### Specific Challenges to be addressed in 2023

- The increase in numbers presenting show a need for additional and better facilities across our region to do our work.
- The increase in the numbers using Cocaine and its derivatives to address without the additional funding applied for.
- With increasing clients presenting, so also is the need of support for their family members individually and in a holistic way
- Clients with co-existing Addiction and Mental Health issues need more structured interagency protocols and greater cooperation between services.
- Drug and alcohol services for persons under 18 years of age how best could they be delivered in the ECR.

EVIDENCED TREATMENT DATA

EVIDENCED TREATMENT DATA

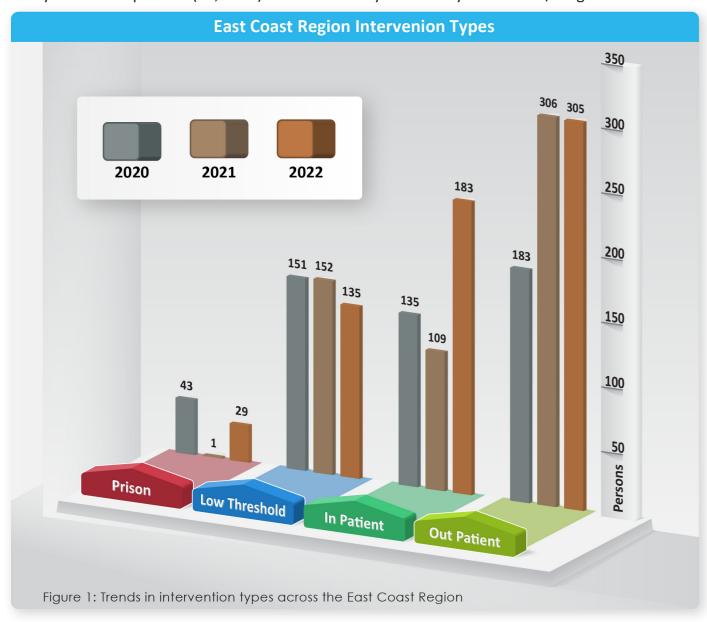
#### **Background**

General population data on this region indicates a larger than average rise in the Irish population since the National Census 2016. The Irish National population has been recorded as risen by 7.6% to 5,123,536 at the April 2022 census count. Preliminary results from the Central Statistics Office show that the population in County Dublin and County Wicklow has actually risen above the national average; South Dublin by 8% and County Wicklow by 9.2% to 155,485 (CSO, 2022). Further fuller data will not be issued until later in the year.

#### Health Research Board (HRB) National Drug Treatment Reporting System (NDTRS)

Further to funding provided to services working with the East Coast Region communities, it is a requirement of all services receiving Task Force funding, through a HSE Service Level Agreement, that data on treatment episodes are recorded on the Health Research Board (HRB) controlled NDTRS/Link system for capture of persons contacted and services delivered as a direct result of Task Force funding in 2022.

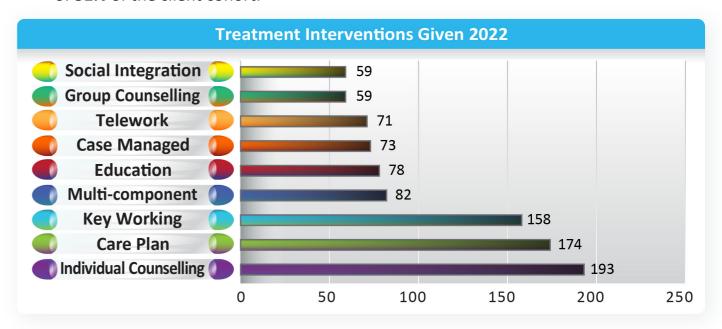
Further to the data provided for 2022 activity, 699 cases came forward and were assessed and/or treated in this region and, of these, 621 were found to be resident in the region. Clients who referred stated a primary problem with drugs (400, 57.2%) and alcohol (235, 33.6%) and the remainder were mostly concerned persons (61, 8.7%) or those directly affected by the alcohol/drug use of another.



Interventions for 2022 were increased on activity for 2021 with a more diverse range of services requested and provided as per Figure 1. For the third year in a row, no services were recorded by GPs being the primary service provider even though the HSE Central Treatment List show 932 clients on OST (Opioid Substitution Treatment) in HSE CHE and 6 GPs in the region with Level 2 Training were recorded treating 90 patients over the year and having 82 active cases at the end of 2022 in the East Coast Region.

#### Additional NDTRS data for 2022 identifies the following information:

- 537 (77%) commenced treatment following assessment and agreeing a personal care plan under a case management process.
- 264 (38%) were never previously treated and identified drugs (174) and alcohol (88) issues mostly, on assessment.
- 231 (33%) were returning clients and identified alcohol (93, 13%) and drugs (138, 20%) as their main issue, on assessment.
- 413 (59%) were males; almost 10% (67) were minors and almost one in five (137) were under the age of 25 years.
- Over 62% (436) were living with parents, partner and/or a family unit.
- 277 (40%) of service users identified having children with 105 (15%) currently living with minor children which comprised 105 children under the age of 5 years and 167 children aged from 5 to 17 years.
- 79% were living in stable accommodation with 49% (343) unemployed
- Most referrals (38%) were identified as by the client themselves with community and social services, outreach workers and family playing an important role also.
- Over 1109 treatment interventions were delivered per graph below.
- From this work, 206 clients were transferred to another service or completed their treatment plan with 144 clients exiting drug free. Other clients who were discharged during 2022 showed reduced drug use (52) and reduced alcohol use (26). This is a total of 52% of the client cohort.



EVIDENCED TREATMENT DATA

EVIDENCED TREATMENT DATA

#### Interagency Drug and Alcohol initiatives delivered

The Task Force and its funded service delivered a number of inter-agency initiatives across 2022 in line with its own Strategic Plan and the actions of the National Drugs Strategy which were identified in this region. Further work was accomplished by interagency work with a number of other services, agencies and projects. Funding of the main operational budget of the Task Force is outlined in Appendix I and governance issues and structures identified in Appendix II

Agencies involved	Purpose/Outcome	Resources Utilised
ECRDATF, HSE YoDA service and WC&FP	Steering group established and maintenance of the Therapist role for the YoDA service utilising the Clanwilliam Therapy Service and arranging office space for the service to be delivered. Interim measure to develop this service until HSE can employ this full time post directly.	Coordinator HSE funding staff YoDA CHE team leader
ECRDATF and ISPCC	To arrange a legal Transfer of Undertakings (TUPE) for the transfer of 2 ISPCC staff to 2 new projects subject to a tender arrangement and the development of new Tier-2 Under-18 drug and alcohol services.	Chairperson Coordinator TUPE specialist on standby
ECRDATF and WC&FP	Review, research and update of conditions necessary for the delivery of a short Counselling intervention service to complement existing longer term services and provide an introduction to psychological treatment as a component of a care plan while the client is being case managed during this process. Address areas of crossover and clarity of roles.	Chairperson Development Worker, Coordinator
ECRDATF, MQI	Quarterly review of the work of the new Adult Community Recovery and Integration Supports service and planning to identify and address any/all gaps and block to develop a number of initiatives to expand on the return from resources available	Chairperson, Coordinator
ECRDATF, HSE, BLDATF and DLRDATF	Establishment of a Steering Group to develop a proposal to address Cocaine usage in CHE and submit same to Dr. Eamon Keenan	Chairperson, Coordinator
ECRDATF, HSE, BLDATF and DLRDATF	Establishment of a Steering Group to develop a proposal to address CSEF funding of €200K to develop a suite of services across the entire CHE region	

Agencies involved	Purpose/Outcome	Resources Utilised
ECRDATF, CWP and KWETB	Replacement of Development Worker position in ECR once funding through KWETB is provided in a timely manner and can be relied upon. Addressing of problems accessing quarterly funding for wage payments.	Chairperson, Finance Lead, Coordinator
ECRDATF, HSE Procurement and HSE legal services	Tendering of new contract for ECR adult recovery service and arrangement to commence services on 01/01/23 once current contract runs out, with transfer/transition of clients, as needed.	Chairperson, TF members' subgroup, Coordinator €180
ECRDATF, HSE Procurement and HSE legal services	Tendering of new contract for ECR brief initial counselling service and arrangement to commence services on 01/01/23 once current contract runs out with transfer of clients as needed.	Chairperson, TF members' subgroup, Coordinator, €180
ECRDATF	Tendering to write a new Strategic Plan for the East Coast Region for the next few years and building on the achievements of the last plan	Chairperson, TF Members' subgroup, Coordinator €180
ECRDATF, HSE YoDA CHE	Continuation of the YoDA CHE Therapist role in 2022 until arrangements can be finalised for the HSE to employ a full-time Therapist directly	YoDA staff, WC&FP
ECRDATF and all funded projects	Compilation of the work of all projects across 2021 into an Annual Report for design and production	Chairperson Coordinator
ECRDATF and new contacts	Issue of booklet of services across a large number of new coexisting services and new personnel in each to enhance interagency work and communication for the benefit of service users	Coordinator
ECRDATF, SWRDATF and CYPSCs	Explore the possibility of joining with Kildare and/or others to set up and develop a Planet Youth model of evidenced data on the needs of young persons in the region. Meetings with potential partners and clarification of model.	Coordinator





The Wicklow Child & Family Project is a voluntary organisation providing family support services to families in Wicklow Town and surrounding areas. Its key work and functions are primarily funded through the national Child and Family Agency, Tusla.

# THERAPEUTIC & FAMILY SUPPORT SERVICES funded through the East Coast Regional Drugs & Alcohol Task Force (ECRDATF)

As a funded project of the **ECRDATF** our aim is to provide interventions to support individuals, children and families who have struggled with addiction either themselves or been affected by another family members' addiction.

The **ECRDATF** provides funding for an initial brief Addiction Counselling Service (ACS) service which is a free counselling facility offered to adults experiencing difficulties with addiction. The service is delivered in both Arklow and Wicklow town by 1 Counselling Psychologist, 1 Psychotherapist and 3 Addiction Counsellors. The **ECRDATF** funding also supports therapeutic services for family members experiencing another family members' addiction

Following the challenges of Covid, in 2022 things began to return to pre-Covid times. Face-to-face work resumed, however, there was a small cohort of clients who requested continued access to on-line supports.

#### **Addiction Counselling:**

Clients are offered counselling to assist them in understanding and managing their substance use. The counsellors support the clients in making informed choices and decisions and assist them through a short series of goal focused sessions. A client is offered an initial intake session followed by 6 weekly 1 hour sessions.

The outcome for clients accessing this service is their ability to engage in an intervention and a commitment to the counselling process. They have a better understanding of their substance use and are more fully aware of and have an increased ability to make informed choices and decisions. The clients are supported so they have the capacity to sustain changes made. A longer term outcome is that they may stabilise or reduce their drug use, or achieve becoming drug free.

## Therapeutic services for family members experiencing another family members' addiction

Clients are offered individual weekly therapy sessions for a short period of time. Following this intervention, clients are then signposted to appropriate groups or programmes that will provide follow-on continued support, as identified and needed.

It is hoped that attending therapy will assist them in understanding how a family member's addiction may be affecting them. They are supported by the therapist to gain a better understanding of the impact, of a family member experiencing addiction, on the family unit. What they hear is validation for difficulties experienced and gain more clarity of their role within the family.

Outcomes achieved include clients begin to experience a willingness and commitment to change and realise they have choices. They are better able to understand the changes they can make. It is then hoped they can transfer these changes to the family environment and have the ability to separate themselves from the family members' addiction.

#### **Interagency Work**

An additional aspect of the Wicklow Child & Family Projects work is the effective interagency partnerships that enhance the services available to children and families within the community we serve. The project places great importance on working closely with other local agencies for the benefit of the client group. The sharing of resources, skills and knowledge proves invaluable to families, prevents duplication of work and provides them with a much more cohesive approach when addressing their needs. In this work, the project works closely with all the **ECRDATF** funded projects and the HSE Rehabilitation workers and Counsellors.

#### Breakdown of therapeutic interventions 2022:

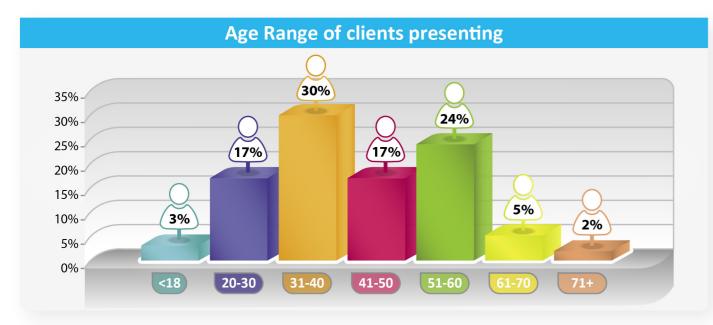
Total entries on the NDTRS Link System for 2022 was 98: this included 4 concerned persons.

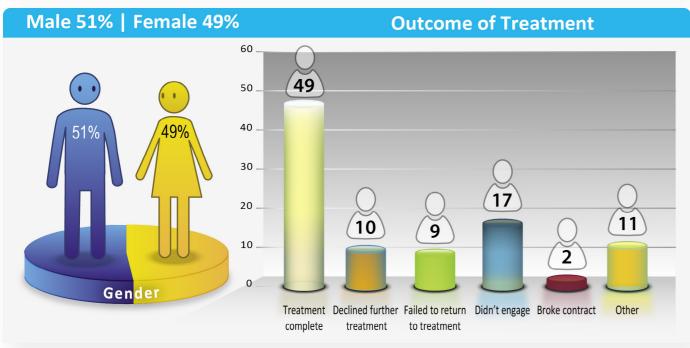
#### **Our supports:**

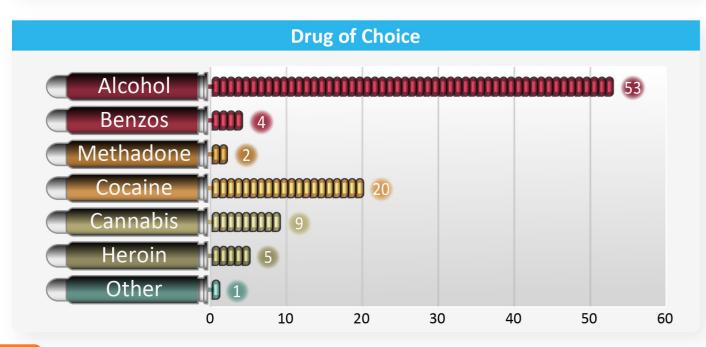
Confidential, utilising very skilled and experienced staff, no cost to the client, and short waiting lists. The Wicklow Child & Family Project would like to thank the **ECRDATF** for their financial support and guidance through 2022.



THE WICKLOW CHILD & FAMILY PROJECT
WICKLOW ISPCC





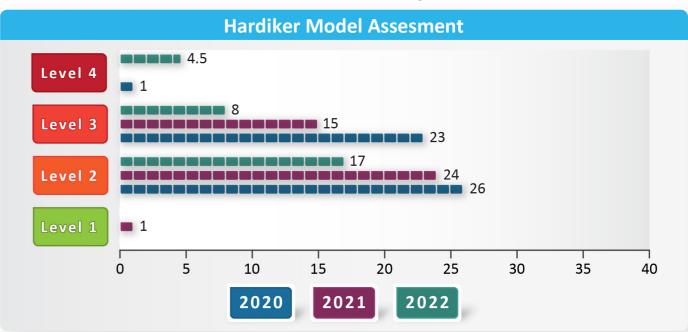




The Irish Society for the Prevention of Cruelty to Children (ISPCC) is a national child protection charity. The ISPCC vision is 'an Ireland where all children are safe, heard and valued'. Its mission is to 'make the protection of children everyone's priority' and its work is to listen, support and protect.

The Wicklow service provides a mobile, tailor-made individual child-centred service for children and young people aged from 10 to 18 years. The purpose is to build psychological resilience among young people and to increase the capacity of families to care for their children through the provision of an integrated programme of support. The service works to increase the ability of children and young people to self-regulate their behaviour and to cope with the difficulties that affect their lives. Sessions are provided by the Therapeutic Support staff working within ISPCC centres and throughout the community; within homes, schools and community venues, where appropriate.

The service works with children who have different levels of need, as assessed on the Hardiker Scale. Just 26 clients were assessed in 2022 and were at the following levels:



All programme delivery are by weekly inputs and usually last for about 6 months. As interventions are tailor made to suit the needs of the child, young person and family, the levels of support and time can vary but it is needs led and strengths focused.

Referrals in 2022 were received from Tusla (8), parents (6), schools (6), Lucena Clinic (5), and Community/voluntary agencies (1). The main drugs presenting were alcohol, cannabis and cigarettes (both regular and vaped). 9 cases were referred for a Non-violence Resistance (NVR) course to help with the parent-child relationship. A further 12 cases identified drug use in the home as a key concern. Secondary issues specifically identified child/parent relationship (9), coping issues (7), family substance misuse (4), child behavioural concerns (2), low self-esteem (2) and anger management (2)

Outcome measurements are taken using the Kirkpatrick model of evaluation using the levels of satisfaction, learning effects, behavioural effects and community side effects. Of the 26 cases in 2022, 100% reported being satisfied with the received service; 85% reported increase in knowledge and understanding; 45% reported behaviour and action changes; and 37% reported a positive community-wide effect.

LIVING LIFE COUNSELLING

LIVING LIFE COUNSELLING



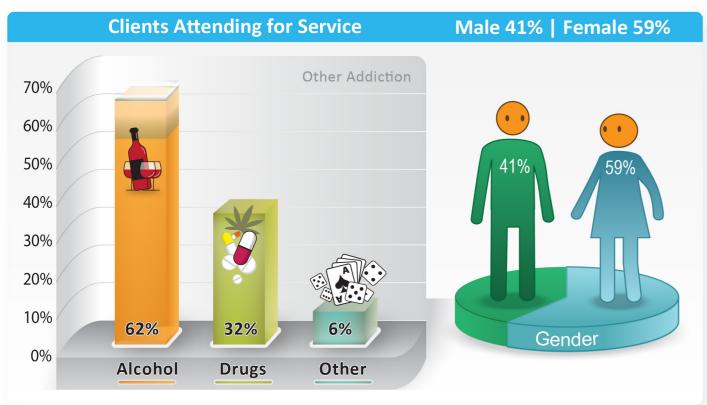
Living Life Counselling is a low-cost affordable and accessible service offered to those persons in our community affected by addiction and are either in receipt of social welfare payments, unemployed or on a low income. Our service provides one-to-one counselling to those persons attempting to remain drug or alcohol free. This includes young persons

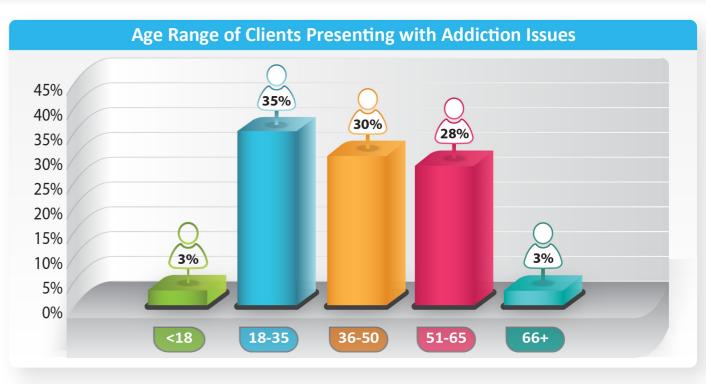
under the age of 18. We provide family support through one-to-one counselling sessions and/or couples counselling to those affected by addiction. Our work can also incorporate working with younger clients (aged five years and over) through a number of mediums such as play therapy.

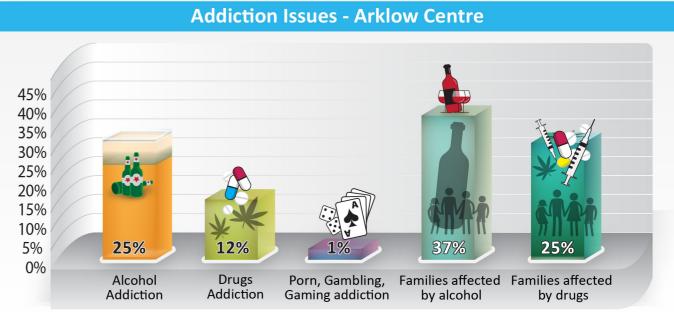
An initial assessment of need is provided, in conjunction with the client, to ascertain if counselling is an appropriate therapy for them at the specific time when they present. One of our four part-time accredited staff counsellors will allocate up to fifty minutes of face-to-face contact to complete this process with each client. Occasionally, this meeting may necessitate follow-up contact with a professional third party who is actively and currently working with the client in another therapeutic framework (usually a GP or psychiatrist). The client's permission is always sought before any such third party contact is taken.

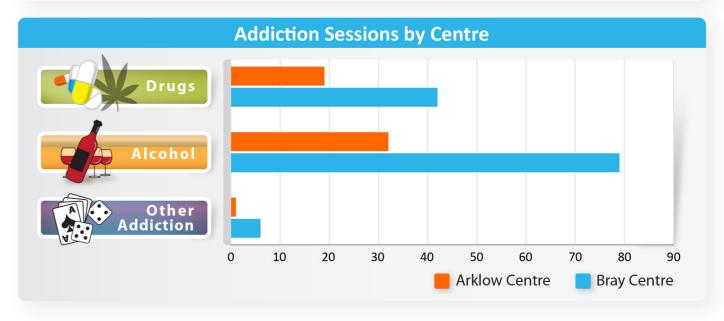
When this process has been completed, the client is matched with a volunteer counsellor who is qualified to work with them on their specifically named issues. The usual duration of client engagement offered is six months with exceptions made only if the staff counsellor feels that the client requires longer intervention.

During 2022, we provided support to 294 clients within the Wicklow area who have been impacted by addiction to drugs, alcohol or another addiction. 182 clients were dealing with issues related to alcohol and 94 clients were dealing with issues related to drugs and 18 clients were dealing with issues related to gambling, pornography or gaming.











Tiglin Teen Challenge receive **ECRDATF** funding to deliver ongoing recovery inpatient services in their separate men's and women's centres outside Ashford and in Brittas Bay. Clients are assessed and, if suitable, are commenced on the programme once a space is available. The initial programme is up to 9 months in duration at their centres. Clients are initially assessed and, if suitable, given comprehensive assessment. During this programme, each client receive key

working both as a group and one-to-one. The programme includes recovery classes. These classes include self-compassion; relationships and recovery; relapse prevention and anger management to include a few. Therapy groups include SMART recovery; Recover Me!; Psycho-educational and 12 step groups.



#### **Initial Assessment**

44 clients received 44 hours of initial assessment.



#### **Assessment & Pre-Entry**

14 clients received 56 hours of comprehensive assessment and pre-entry work.



#### **Key Working**

14 clients received
193 key working hours.
Each individual gets at least 1
hour per week of one-to-one
key working.



11 clients from ECRDATF entered our Men's Centre

14

clients entered our residential centres from ECRDATF



#### Women's Centre

3 clients from ECRDATF entered our Women's Centre



#### **Recovery Classes**

1,044

hours of recovery classes recived by 14 clients



# 3 times per week

including Self Compassion, Relationships & Recovery, Relapse Prevention, Anger Management...

### Therapy groups run

# 4 times per week

SMART Recovery, Recover Me!,
Psychoeducational and
12 Step Groups



#### **Groups**

696

group therapy hours received by 14 clients



# Family Therapy & Child Play Therapy

Couples counselling, children's play therapy and family member counselling is available to all clients 14 clients received

43 hours

of family therapy



#### Counselling

14 clients received71 hours of counselling

A second follow-on programme is then commenced in the aftercare facility in Greystones for in excess of 6 months. A Drug Recovery Programme Community Employment (CE) scheme is then available for clients wishing to continue the recovery and reintegration programme.



#### Introduction

Early 2022 brought about a beginning of a return to normal operating patterns in the East Coast MQI Community Recover & integration Supports (CRIS) Service.

The phased removal of the final COVID-19 lockdown began in early February.

I wish to acknowledge the support provided by Maeve Shanley (Coordinator, **ECRDATF**) and Derek Parker, Brenda Kane and Shay Fagan of Merchants Quay Ireland that has been afforded to the service.

#### The Team

The Service is managed by a Coordinator and three Community Integration Workers (CIW).

James Byrne is the longest serving Community Integration worker with the team. He has been with the service since it began in August 2018 and continues to support the ongoing development of the service and manage a full case load. James is primarily based in our Arklow office but supports clients in Greystones and Wicklow.

Aisling Graydon joined the service as a Community Integration Worker in August 2021. Aisling quickly developed a busy case load. Aisling is primarily based in our Wicklow office but also supports clients in Greystones and Arklow.

In early January 2022, it was with regret that the service accepted the resignation of Juliet Magnier from the services to take effect from mid-February. Juliet was employed as our third Community Integration worker based in Greystones. Juliet ran at an extremely high professional standard and was very successful in her client work. The full **CRIS** team wish Juliet well in her future.

After a lengthy recruitment campaign, the service recruited Michael Collins in late September 2022 to take up the vacant position of third Community Integration worker. This appointment brought the team up to a full complement. Michael's primary background is supporting clients with an acquired brain injury. Michael and has become a highly valued member of the team.

#### Service Progress:

The following initiatives have been identified as key areas to develop in 2022.

- Establishment of a rural hub in Carnew/Tinahely (South Wicklow)
- Networking into South County Dublin
- Networking into Rural Wicklow
- Expanding the Family Support Programme
- Development of a Student placement programme with Carlow College (St. Patricks)

#### **Challenges Going Forward:**

- Increase in the number of referrals without requiring a waiting list
- Phasing out of bi-weekly appointment

- Development of the service in Greystones
- Demand for detoxification and rehabilitation expected to increase
- Need to advance the Community detoxification initiative
- Increase in the number of referrals for treatment
- Development of a comprehensive Aftercare Programme

#### **Referrals**

The **CRIS** service received a total of 194 referrals which was an increase of 16% (n=32) when compared to 2021. Of the 194 referrals, 79% (n=153) had not presented to the service in the past. The gender ratio balance has remained consistent at 2:1 to that experienced in 2021. The total number of male referrals received was 129 (66.5%) and 65 (33.5%) from females. In percentage terms, this represents a reduction of 4.5% for males and 6.5% for female when compared to 2021.

The number of clients that were referred in but did not engage, stands at 6 (3%) and, when compared to a total of 22 for 2021 represents a decrease of 10.5%.

The number of clients that self-referred in 2022 accounted for 142 (73%) and continues to be the most popular pathway to engaging with the **CRIS** service. Of the various treatment programmes available, community-based programmes accounted for 86% (n=167) and of those, the main programme delivered was *Reduce the Use* and to stabilise.

Requests to access residential treatment accounted for 10% (n=20) of all incoming referrals. In 2022, the service received 20 referrals for family support. This represents a 150% (n=12) increase on the 2021 figures where no new referrals were received. Of the three provincial towns in Co. Wicklow, Wicklow reported the highest number of unique referrals (25%). Arklow recorded 20% while Greystones reported the lowest at 5%. The remaining areas in Co. Wicklow accounted for the highest number of referrals at 50% for 2022, which is a reduction of 18% when compared to 2021. For 2022, there were no referrals from South Dublin for 2022.

The East Coast **CRIS** service has consistently grown year on year. Figure 1 below highlights the growth pattern over the previous four years. One key trend emerging is the average growth rate over that period standing at 31%.



A total of 278 unique clients were supported through 3409 Individual support interventions. A total of 57% (n=1948) of all interventions scheduled were one-to-one individual key-working appointments Family Support interventions represented 4.4% (n=152) which is a significant increase on the previous year.

In 2022, the team delivered 296 individual case management interventions which represents almost 9% of interventions completed. These interventions are closely linked to individual client's care plan objectives and play a key part in a person's re-integration into their community. These interventions covered a wide spectrum of categories, with the majority linked to mental health and homelessness. Year on year, the East Coast **CRIS** service work closely with external agencies and continue to develop new relationships.

#### **Demographics**

In 2022, the client gender ratio in treatment with the **CRIS** service consisted of 64% male and 36% female. This is an increase of 7% in the female gender ratio compared to 2021.

The age profile of clients in treatment in 2022 ranges from 19 to 76 years. The majority of those accessing the service were aged between 35 and 54 years which represents 23% (n=44) of referrals followed by the 26 to 35 year olds at 21% (n=40).

Of the three provincial towns in Co. Wicklow, Arklow, Greystones and Wicklow all reported the largest proportion of interventions delivered to the 35-54-year-old category which stood at 40.7% (n=697) followed by the 26-34-year-old category at 23.9% (n=410). Of the 35-54-year-old category and 55-64-year-olds, Arklow reported a higher proportion at 54% and 51.7% respectively. Greystones reported the lowest proportion of 35-54-year-old and 65 years+ at 11.3% and 16.9% respectively.

In 2021, the service experienced an increase in persons over 65 years and older either self-referring or being referred in by others. The figure for 2022 decreased on the 2021 figure by 62.5%.

#### **Treatment options**

The East Coast **CRIS** service offers a range of addiction treatment options that are underpinned by the *SMART Recovery* treatment model. *SMART Recovery* is widely used in the community addiction services nationally. The **CRIS** service offer treatment options to individuals that are in active use from a single or multiple substances or have successfully overcome their addiction and are in recovery and in need of additional support. The service can also support individuals whose preference is to complete a residential treatment programme. Each treatment option is delivered through one-to-one appointments. The **CRIS** service facilitates a weekly open *SMART Recovery* meeting in the De La Salle Pastoral centre in Wicklow town which seeks to reinforce the clients key working treatment by focusing on the community challenges in more depth.

In the case of family support, each member of the team underwent training in the *Five Step Family Support* model. This model is delivered in one-to-one appointments or in a group format.

The main reason for referrals received in all areas was for support to reduce or stabilise someone's drug and/or alcohol use through a community-based treatment programme. This treatment option has remained unchanged from 2021. The second treatment programme undertaken in all areas, was to complete the *Relapse Prevention Programme* which is a solid indicator of client's willingness to remain in recovery. In 2022, there were 20 referrals to residential treatment. The majority of these requests 65% (n=13) came from outside of the provincial Co. Wicklow towns.

The service closed a total of 170 cases in 2022. 45% of the 170 closed cases were clients that did not return while 11.7% (n=20) were cases that were planned and agreed with clients.

The service continues to use regular review meetings that review each client's engagement, client issues, and capacity across the team.

#### January - December 2022 Client Breakdown

- ▶ 194 referrals were received (64% M and 36% F)
- ▶ 94.5% (n=153) of the total referrals were unique individuals accessing the East Coast CRIS service for the first time. (61.4% M and 38.5% F)
- The service supported a total of 278 unique clients in 2022
- The team provided a total of 3490 support interventions
- > 3% (n=5) of case load are Family Support clients
- ▶ 36% of incoming referrals in 2022 are aged between 18 to 24 years old (n=69)
- > 73.1% (n=142) of incoming referrals were self-referrals

Breakdown of incoming referrals by provincial Town					
Provincial Town	Wicklow	Arklow	Greystones	Remaining Areas	
Primary Drug of Choice	Alcohol	Cocaine	Alcohol	Alcohol	
Unique Individuals assessing for first time	18.9% (n=29) unique individuals (51.7% M, 48.2% F)	19.6% (n=30) unique individuals (64% M, 36% F)	7.8% (n=12) unique individuals (41.6% M, 58.3% F)	53.5% (n=82) unique individuals (67% M, 33% F)	
Average Age Range	35 - 44-year-old	18 - 24-year-old	26 - 34-year-old	18 - 24-year-old	
Primary Reason for Referral	To reduce or stabilise drug or alcohol use	To reduce or stabilise drug or alcohol use	To reduce or stabilise drug or alcohol use	To reduce or stabilise drug or alcohol use	

#### **Living Area**

The living location of clients in 2022 remained largely unchanged with the figures from 2021. However, there was a noticeable increase in clients from South Dublin being supported. In 2021, South Dublin accounted for 3% of all interventions, however, this rose by 133% in 2022 and accounted for 7% of all clients in treatment by the service.

The more rural areas of Co. Wicklow have been added together (Aughrim, Avoca, Barndarrig, Brittas Bay, Carnew, Coolroe, Glendalough, Redcross, Rathdrum, Roundwood, Shillelagh, Tinahely & Trooperstown). In total they account for 17% (n=48) of the 2022 clients in treatment. This figure represents a 9% increase (n=17) on the 2021 figure.

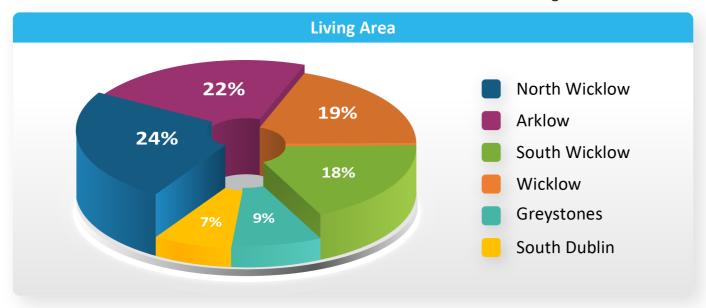
North County Wicklow (Ashford, Glenealy, Delgany, Kilcoole, Kilpeddar, Kilmacanogue, Newtown, Newcastle and Rathnew) accounted for a total of 23% (n=65) of all clients in treatment for 2022 which is an increase of 14% of 2021 clients (n=27) in treatment.

South Dublin was the only area that experiences a significant percentage increase of clients in treatment. When compared to 2021, clients from South Dublin that were receiving treatment increased by 133% when compared to 2021.

As in previous years, the three main provincial towns continued to experience the main cluster of clients in treatment. 21% (n=58) of all interventions delivered in 2022 were in the Arklow municipal area. This represents a 1% increase on the 2021 figure. The Wicklow municipal area increased by 6% to 18% (n=49). Greystones increased its percentage of referrals by 1% on 2021. A total of 9% (n=24) of all referrals received in 2022 were from the Greystones municipal area.

6% (n=11) of 2022 referrals identified themselves as homeless and accessing emergency homeless accommodation or rough sleeping. This is a slight reduction of 3 from the 2021 figures. An added 40% (n=39) did not answer this question so the total figure of clients accessing the service in 2021 that were homeless could be greater.

The East Coast **CRIS** service continued to experience considerable challenges in supporting our homeless clients in 2022. One welcome development was the reintroduction of the Homeless Action Team (HAP) meetings. The service is an active participant at these meetings, and it is the primary forum for our clients' cases to be discussed. Below is a breakdown on the Living Area identified.



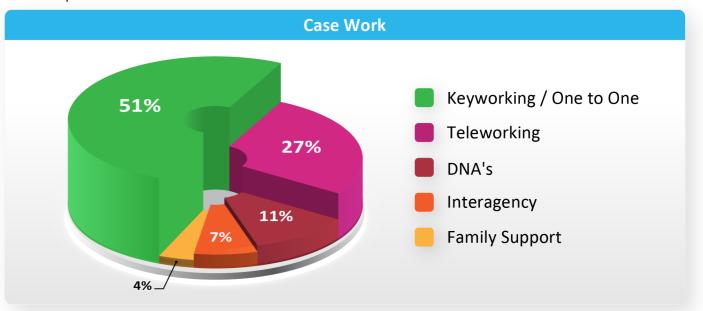
#### Case Work

The team supported a total of 278 unique clients which is an increase of 25% (n=69) when compared to 2021. A total of 3,490 interventions were facilitated in 2022 which represents a 15% (n=771) decrease in interventions when compared to 2021. The major contributing factor of the decrease is due to the service carrying a vacant worker position for eight months and the impact of 168.5 leave days across the team. Of the 3,490 interventions delivered, 58% (n=2038) were one-to-one appointments.

Appointments where clients did not arrive (DNA) accounted for 12% (n=436) of all scheduled appointment in 2022. The service continues to support clients with keeping this figure to a minimum but given the complexity, DNAs are an unfortunate feature of an appointment-based system. When a client does not present, they are contacted by their keyworker to check in and follow up.

Each client within the service has a care plan having numerous key working and case management objectives. Each objective is tailored to suit the individual client's needs. Keyworkers and clients

review their plans periodically and update, as necessary. The service began piloting a new feature that is designed to capture the progression to date. Below is a breakdown on the Case Work completed.

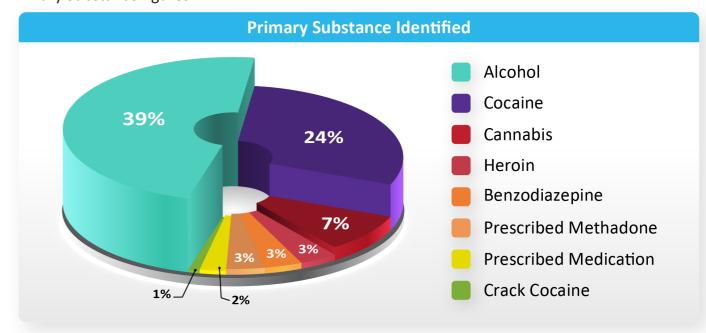


#### Outreach

The team continue to deliver interventions by outreach appointments. They are usually held in public spaces such as hotel lobbies, coffee shops and open public spaces. They are a necessary part on the service delivery as some clients are not capable of attending in person to a **CRIS** office.

#### **Primary substances**

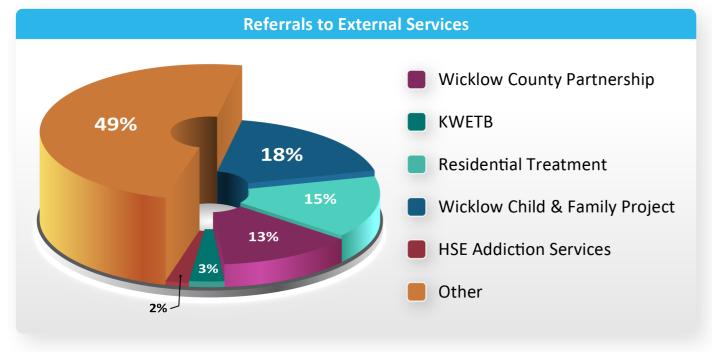
Alcohol continues to present as the main primary substance used by clients in 2022. From the 194 referrals received, 39% (n=76) presented with alcohol as the primary substance. This is a 7% decrease on the figure of 47% in 2021, however, the total number or 76 clients in 2022 is the same as 2021. Referrals where cocaine was identified as the primary substance also increased year on year. Cocaine accounted for 24% (n=47) of incoming referrals. Referrals for cannabis reduced in 2022 by 15% to 7% (n=14). Referrals for treatment for heroin reduced from 8% (n=13) in 2021 to 3% (n=5) in 2022 and Benzodiazepine from 5% (n=8) in 2021 to 3% (n=5) in 2022. The graph below sets out the overall 2022 Primary Substance figures.



#### **Onward Referrals to external services**

Referrals to external services for additional treatment support or case management support accounted for 45% (n=162) in 2022. This is an increase 29% (n=45) on the 2021 referrals.

13% (n=21) of external referrals from the **CRIS** service were into residential treatment. The remaining 87% referrals were to community-based services. The Task Force counselling service provided by Wicklow Child and Family Project continued to receive most of all the referrals with 17% (n=27) which represents a reduction of 23% on 2021 figures. The graph below sets out the overall 2021 referrals to external services.



Onward referral of clients

#### **SMART Recovery Group**

The **CRIS** service continued to facilitate a weekly *SMART Recovery* meeting. The meeting is being held in the De La Salle Pastoral Centre in Wicklow Town. It is the intention of the **CRIS** service to identify three to four participants that may be interested in being trained as peer facilitators to lead this programme in the future.

#### **Stabilisation Programme**

The **CRIS** service sits on a steering group made of five other community addiction services that are funded through the East Coast Regional Drug and Alcohol Task Force, Bray Local Drugs Task Force and Dún Laoghaire-Rathdown Local Task Force. The aim of the group is to facilitate one stabilisation group in each task force area annually. Following the first pilot in the Little Bray Community Centre, and learning from the feedback, a second pilot was facilitated in Q2 of 2022 in the Epworth Hall. Funding was secured from the HSE through the Community Services Enhancement Fund (CSEF) to support the Stabilisation programme's aims. The first official East Coast Region programme was delivered in the De La Salle Pastoral Centre in Wicklow town in Q3/Q4 in 2022. The programme was delivered three days per week over 12 weeks. The *Reduce The Use* programme was delivered on Tuesdays, the Pro-Social element on Wednesdays, and *SMART Recovery* on Thursdays. Each day was co-facilitated by two services. Five participants successfully graduated.

#### **Newcastle Hospital Information Sessions**

In conjunction with Bray Community Addiction Team (BCAT) and Newcastle Hospital, the **CRIS** service developed a programme to facilitate bi-weekly information sessions in the hospital. The purpose of the sessions is to inform recent admissions to the hospital of the community addiction treatment service that are available across the region. Facilitation of the sessions would be rotated between the **CRIS** and BCAT. The initiative was reviewed periodically, and it was agreed to discontinue the initiative in April 2022 due to very low or no attendance. The **CRIS** service continues to work directly with Newcastle Hospital.

#### **Arklow Drop-In**

On July 12th, 2021, the **CRIS** project and the HSE addiction team commenced the first drop-in session in Arklow from 17.00 to 18.00. The drop in was co-facilitated on a weekly basis. The initial footfall into the drop in was very low and unfortunately this trend continued into 2022. Following a review between both service managers, it was agreed to discontinue the initiative from 11th of April 2022.



East Coast Regional				
Goal 1:	Promote and p	protect health and wellbeing		
DATF objective :	• Promote the use of evidence-based approaches to addressing youth needs and gaps in the community			
	• Improve su	pports for young people at risk of early substance use		
		rvices for young people at risk of substance misuse in nomically disadvantaged communities.		
		ontinued effective communication with local schools and ar facilities working with the community		
		sibility and support of this Task Force and its projects to nities across the region		
Outcomes :		of targeted work and direct linkages with existing youth unity services across the region		
	Direct communication of the HSE <b>YoDA East Coast</b> team service to all secondary schools, HSCL and School Completion programmes across the region			
	• Support and manage funding for Family Therapist to work with the HSE <b>YoDA East Coast</b> team.			
	<ul> <li>Organised a public information day with all projects presenting and engaging with the communities of this region along with a range of complimentary services who provided staff to advise and identify displays of their work and supports.</li> </ul>			
Category **	<b>Project Code</b>	Project Name		
Education & Prevention	EC 2	Wicklow Child & Family Project		
Family Support	EC 2	Wicklow Child & Family Project		
Organisation Facilitation	EC 4	ECRDATF Operational Budget		
Education & Prevention	EC 4	ECRDATF Operational Budget		
Family Support	EC 7	Living Life Counselling		
Research	EC 16	Development Worker		
Project changes/ termin	ations in 2022			
Category **	<b>Project Code</b>	Project Name & Reason		
Counselling	EC 17	Tender assigned to MQI following open competition		
Youth Addiction Work		Piloting of Under-18 specific work to address and evidence the need in the region (2 sites)		
CHE wide		Hidden Harm initiative – to be delivered Barnardos services – to be expanded into this region		

East Coast Regional				
Goal 2:	Minimise the harms caused by the use and misuse of substances and promote rehabilitation and recovery			
DATF objective :	<ul><li>based on id</li><li>Improve rel</li><li>Identify the</li><li>Identify the</li></ul>	<ul> <li>Expand the availability and geographical spread of relevant quality drug and alcohol services and improve the range of services available based on identified need</li> <li>Improve relapse prevention and aftercare services</li> <li>Identify the needs of families of service users</li> <li>Identify the specific needs of female service users and older/long term service users</li> </ul>		
Outcomes :	<ul> <li>Update the guide to Addiction Supports in the Region.</li> <li>Implement the Strategic Plan for the commissioning of tendered services across the region and over a specified period of time</li> <li>Continued to monitor and support the referrals to services and align the evidence with the commissioned services</li> <li>Set up and develop a new service in North Wicklow providing the full range of adult services and family supports</li> <li>Redevelop the adult counselling service and tender for supplier</li> </ul>			
Category **	<b>Project Code</b>	Project Name		
Counselling	EC 2	Wicklow Child & Family Project		
Family Support	EC 2	Wicklow Child & Family Project		
Coordination	EC 4	ECRDATF Operational Budget		
Administrative Support	EC 4	ECRDATF Operational Budget		
Counselling	EC 7	Living Life Counselling		
Rehabilitation/Recovery	EC 13	Tiglin Teen Challenge Services		
Rehabilitation/Recovery	EC 15	MQI CRIS Service		
Research & Development	EC 16	Development Worker		
CHE Working Group	Multi	HSE CHE wide representative group to discuss and seek additional funding when provided		
Project changes/ termin	nations in 2022			
Category **	<b>Project Code</b>	Project Name & Reason		
Rehabilitation/Recovery	EC 15	MQI CRIS Project – newly contracted from Jan 2023 by open competition tender		
Counselling	EC 17	Tender assigned to MQI following open competition		

East Coast Regional			
Goal 3:	Address the har	ms of drug markets and reduce access to drugs for harmful use	
DATF objective :	<ul><li>and alcoho</li><li>To identify developme</li></ul>	n an up-to-date overview on the nature and extent of drug I misuse in the region and report on emerging issues and advocate for the nt of policies or actions needed to address them ug related crime, intimidation, debts and deaths	
Outcomes :	changes to  A presence  The EWET gas needed  Drug crime representation  Reinstatem  Drug relate  Identificati	oort giving specific details on the current situation and the use of drugs and alcohol across the region is maintained at the Wicklow JPC meeting group is contacted and information sourced and exchanged rates are noted and monitored in conjunction with a Garda tive on the Task Force nent of the Garda Drugs Unit for Wicklow/Wexford as death rates are identified and monitored on of the increasing use of vaping particularly by the embers of the communities	
Category **	<b>Project Code</b>	Project Name	
Drug/Alcohol Reporting	EC 2	Wicklow Child & Family Project	
Drug/Alcohol Reporting	EC 4	ECRDATF	
Garda Drug Unit Support	EC 4	ECRDATF	
Drug/Alcohol Reporting	EC 6	ISPCC Childhood Support Services	
Drug/Alcohol Reporting	EC 7	Living Life Counselling	
Drug/Alcohol Reporting	EC 13	Tiglin Teen Challenge Services Ltd	
Drug/Alcohol Reporting	EC 15	MQI CRIS Service	
Project changes / termi	nations in 2022		
Category **	<b>Project Code</b>	Project Name & Reason	
Garda Data		Changes in new Garda Divisions – now Wicklow/Wexford Unable to get Garda data for S/SE Dublin specifically	

	Eas	st Coast Regional
Goal 4:		ipation of individuals, families and communities
DATF objective :	<ul> <li>Identify and</li> <li>Promote a d</li> <li>Support and</li> <li>Enhance co</li> </ul>	d promote community participation in all local, regional al structures d monitor all reports of Drug-Related Intimidation quality standards approach for all projects d promote Service User participation ensultation to enrich our new Strategic Plan emmunity development across the region
Outcomes :	community of interest  Supported of agencies in  Provided tr for all mem  Monitored at Further to User to become A presence synergies at  Consultation Service use order to de	the membership of the Task Force with additional members from across the region and communities community members' training and education with external cluding Carmichael Centre raining related to Task Force membership and processes bers including all new community members all reports of Drug-Related Intimidation and debt requests capacity building measures, supported one/more Service rome involved in the Task Force structure.  Is maintained on other local structure to identify linked and initiatives e.g. CYPSC, JPC, ICAAN  On was held with all project promoters, staff and their res along with external consultation with stakeholders in velop our new Strategic Plan  Task Force Development Worker for the region
Category **	<b>Project Code</b>	Project Name
Consultation	EC 2	Wicklow Child & Family Project
Consultation	EC 4	ECRDATF Operational Budget
Consultation	EC 6	ISPCC Childhood Support Service
Consultation	EC 7	Living Life Counselling
Consultation	EC 13	Tiglin Teen Challenge Services Ltd
Consultation	EC 15	MQI CRIS Service
Project changes / termin	nations in 2022	2
Category **	<b>Project Code</b>	Project Name & Reason

East Coast Regional				
Goal 5:	Develop sound	and comprehensive evidence-informed policies and actions		
DATF objective :	• Strengthen the reporting of all drug and alcohol treatment episodes provided by direct funding to provide sound evidence-based data			
		w and potential referral sources and provide Addiction for the region to all		
	• Identify and	d seek to access other sources of data to inform our work		
	•	all data sources and make evidence-informed decisions on es and initiatives		
Outcomes :		Support and training provided to all funded projects to enter reports to the NDTRS/HRB/Link System to be used for planning purposes		
	• Disseminated the Addiction Support booklet to all funded projects along with agencies and referral sources in/to the region			
	• Requested and received population analysis of the region compiled by County Wicklow Partnership Ltd			
	• Clarity to p	rojects that evidence needed for any/all future expansions		
Category **	<b>Project Code</b>	Project Name		
Reporting enhancement	EC 2	Wicklow Child & Family Project		
Reporting enhancement	EC 3	WTG Prevention & Education Outreach Project		
Coordination	EC 4	ECRDATF Operational Budget		
Reporting enhancement	EC 6	ISPCC Childhood Support Service		
Reporting enhancement	EC 7	Living Life Counselling		
Reporting enhancement	EC 13	Tiglin Teen Challenge Services Ltd		
Reporting enhancement	EC 15	MQI CRIS Service		
Project changes/ termin	nations in 2022			
Category **	<b>Project Code</b>	Project Name & Reason		
Youth Addiction Worker	EC 12	Crosscare Youth Services - Staff member left and funding returned as organisation stated they did not wish to continue		
Youth Addiction Worker	EC 3	WTG-Staff member left and funding returned as organisation stated they had different needs currently		

#### **National Drugs Strategy**

Reducing Harm, Supporting Recovery: A health-led response to drug and alcohol use in Ireland 2017-2025

No.	Strategic Action	Delivered by	Lead	Partner
1.1.1.	Ensure that the commitment to an integrated public health approach to drugs and alcohol is delivered as a key priority	<ul><li>a) Developing an initiative to ensure that the commitment to an integrated public health approach to drugs and alcohol is delivered as a key priority; and</li><li>b) Promoting the use of evidence-based approaches to mobilising community action on alcohol.</li></ul>	DoH	HSE DATFs

**Living Life Counselling** is funded to deliver low-cost affordable and accessible counselling and therapy services to those in the community affected by addiction. One-to-one services are provided from bases in Bray and Arklow to persons attempting to remain drug or alcohol free and those adults in their families that are most affected.

The **ECRDATF** is a member of ICAAN (facilitated by the Alcohol Forum) and has conducted its own local research on alcohol use across our communities. It is working to establish specific alcohol reduction measures in towns across the region with the assistance of our community representatives and others.

All services in the East Coast Region work together and with other services, projects and agencies to provide as seamless a service as possible to our client cohorts. A range of these interagency initiatives are listed elsewhere in this report.

No.	Strategic Action	Delivered by	Lead	Partner
1.2.3	Support the SPHE programme.	a) Promoting continued effective communications between local schools and Drug and Alcohol Task Forces given the importance placed on the continued building of strong school community links;	DES DATFs (joint)	

The **ECRDATF** has provided information to the HSE Health Promotion staff currently directed to giving SPHE training to teaching staff in this region. While not delivering any school based education, the **ECRDATF** has made available clear information on services and supports for school community staff and students to avail of in this region and to form part of the Health and Wellbeing Framework policy in each school.

The **ECRDATF** is progressing a localised version of the Planet Youth model in this region in conjunction with a large number of interested groups and agencies, to help inform and evidence an approach needed.

The **YODA East Coast** service regularly receives direct referrals from schools and colleges across this region to help and support students who have been identified as requiring assistance with a drug/alcohol issue. A family therapist is organised and funded through a project in this region to help the HSE expand this growing service.

NATIONAL DRUGS STRATEGY

NATIONAL DRUGS STRATEGY

No.	Strategic Action	Delivered by	Lead	Partner
1.2.8	Improve services for young people at risk of substance misuse in socially and economically disadvantaged communities.	Developing a new scheme to provide targeted, appropriate and effective services for young people at risk of substance misuse, focused on socially and economically disadvantaged communities.	DoH	DCYA, HSE DATFs

The **ECRDATF** is tendering for two Under-18 community based service(s) for young people using drugs and/or alcohol so as to intervene early and prevent further problems and issues while supporting the young person to progress in their life. These pilots will become part of the evidence to see how this work continues.

The **ECRDATF** has worked with the local Sports Partnership and a full steering group of agencies to deliver direct interventions in two large social housing estates in this community where issues and anti-social behaviour have been identified. Further to the evaluation and success of this initiative, it is hoped to further deliver similar work in other identified communities.

No.	Strategic Action	Delivered by	Lead	Partner
2.1.21	Respond to the needs of women who are using drugs and/or alcohol in a harmful manner.	a) Increasing the range of wrap-around community and residential services equipped to meet the needs of women who are using drugs and/or alcohol in a harmful manner, including those with children and those who are pregnant; and b) Developing interventions to address gender and cultural specific risk factors for not taking up treatment.	HSE	DoH DATFs

**Tiglin Ltd** are currently involved in an expansion of the Women's Aftercare Service; children's play therapy; and family support. A women's only pre-entry programme is also offered. A separate womens residential centre is provided and the programme is developed on the specific needs of women.

**MQI CRIS** has prioritised the engagement with women in addiction and numbers accessing services have increased year on year. Further facilitated women's group work is planned to explore the needs and gaps in services to this group.

The **ECRDATF** has developed arrangements with the GP Primary Care Clinic (run by EDOC) for the medical care of new ex-patriot communities living in this region and has started to receive referrals.

No.	Strategic Action	Delivered by	Lead	Partner
2.1.13	Expand the availability and geographical spread of relevant quality drug and alcohol services and improve the range of services available, based on identified need.	<ul> <li>a) Identifying and addressing gaps in provision within Tier 1, 2, 3 and 4 services;</li> <li>b) Increasing the number of treatment episodes provided across the range of services available, including:</li> <li>Low Threshold;</li> <li>Stabilisation;</li> <li>Detoxification;</li> <li>Rehabilitation;</li> <li>Step-down;</li> <li>After-Care;</li> <li>c) Strengthening the capacity of services to address complex needs.</li> </ul>	HSE	C&V sectors, DATFs

**Living Life Counselling** is funded to deliver low-cost affordable and accessible counselling and therapy services to those in the community affected by addiction. One-to-one services are provided from bases in Bray and Arklow to persons attempting to remain drug or alcohol free and those adults in their families that are most affected.

**Tiglin Ltd** delivers pre-entry groups for men and women; Community Employment schemes, SETU educational courses; and Family Support services. They also deliver pre-entry stabilisation support and are expanding their aftercare services (with new funding provided). Complex needs are addressed with a children's play therapist; family support services and a sensory room.

The **ECRDATF** has developed a new base in North Wicklow where a need has been identified and, once fully established, will move to establish a base in South/Southeast Dublin to spread our services better across the region and according to need.

The **ECRDATF** has worked with the other two DATFs in HSE CHE to set up and develop a new stabilisation programme to assist clients in their recovery. Currently this is a programme delivered over 3 days per week for 12 weeks.

The **ECRDATF** and its services are working hard to establish better inter-agency protocols for the benefit of our client group and their many and complex needs.

An arrangement with two consultant psychiatrists in Newcastle Hospital and the **MQI CRIS** service has helped transfer co-diagnosed clients between both services during in-patient and out-patient periods.

The **ECRDATF** is keen to develop further outreach work and services to the many persons and towns across the region who have little or no transport links and, from where, clients have difficulties travelling to our main centres. Arrangements have been finalised with some GAA premises and some HSE PCCC premises to this end.

NATIONAL DRUGS STRATEGY

NATIONAL DRUGS STRATEGY

No.	Strategic Action	Delivered by	Lead	Partner
2.1.22	Expand the range, availability and geographical spread of problem drug and alcohol services for those under the age of 18.	<ul> <li>a) Identifying and addressing gaps in child and adolescent service provision;</li> <li>b) Developing multi-disciplinary child and adolescent teams; and</li> <li>c) Developing better interagency cooperation between problem substance use and child and family services.</li> </ul>	HSE Tusla	C&V sectors DATFs

The **ECRDATF** has organised the hosting of a Family Therapist to work with the HSE led YoDA CHE team – a tier-3 service working with young people who have a drug/alcohol problem. This team is Consultant Psychiatrist (specialising in adolescents) led and has an addiction and mental health approach. Following the success of this work, the HSE have agreed to directly employ the Family Therapist in the future.

The **ECRDATF** has advertised for a provider to deliver Under-18 drug and alcohol services in this region but has not received an appropriate tender response. Thus, the Task Force will now look to engage this need and identify what service is needed. All services will link with and provide services in conjunction with the **YoDA East Coast** team.

The **ECRDATF** wishes to identify further Family Support services to address other adult and child family members who require assistance and aim to deliver this in a holistic way.

No.	Strategic Action	Delivered by	Lead	Partner
2.1.23	Improve the response to the needs of older people with long term substance use issues.	Examining the need for the development of specialist services to meet the needs of older people with long term substance use issues.	HSE	C&V sectors DATFs

The **ECRDATF** is working closely with Wicklow County Council (WCC) to address housing and mental health issues with this cohort. Due to the long term nature of their substance use, they are in higher danger of homelessness and to also suffer from a (un) diagnosed mental health issue. The **ECRDATF** is supporting the call for a specific team in WCC to better support such tenants in conjunction with relevant services.

No.	Strategic Action	Delivered by	Lead	Partner
2.2.30	Continue to target a reduction in drug- related deaths and non-fatal overdoses	b) Expanding the availability of Naloxone to people who use drugs, their peers, and family members	HSE	C&V sectors, UISCE, NFSN, DATFs

**Tiglin Ltd** have trained their outreach team in the use of Naloxone.

The **ECRDATF** has funded CPR training to a range of its services and projects and is currently sourcing a trainer/specialist to deliver Naloxone training.

The **ECRDATF** has funded the provision of AEDs in all service locations across the region along with full training to staff on the devices.

No. Stra	tegic Action	Delivered by	Lead	Partner
prom parti local	oort and note community cipation in all , regional and onal structures.	Supporting and promoting community participation in all local, regional and national structures.	DoH	

The **ECRDATF** has worked with local services and agencies to identify suitable persons to sit on its committees and engage with the work and make a clear difference.

The **ECRDATF** has supported one or more Service User Representatives to become full members of the Task Force and engage and inform its work.

Members of the **ECRDATF** also sit on other specific groups in the region and are a conduit for information to both groups. Examples of such groups are Housing Assistance Payment (HAP) groups; Children and Young Persons Services committee (CYPSC); Joint Policing Committee (JPC).

The **ECRDATF** Chairperson and Coordinator are members of their respective national groups and regularly attend meetings both online and in person.

No.	Strategic Action	Delivered by	Lead	Partner
4.2.44	Promote the participation of service users and their families, including those in recovery, in local, regional and national decision-making structures and networks in order to facilitate their involvement in the design, planning and development of services and policies.	Actively supporting frontline services through capacity building measures using evidence-based models of participation in line with best practice	DoH	Relevant Departments & Agencies, C&V sectors, DATFs, Networks of people who use drugs and alcohol, Networks of people who use services and/ Family Support Networks

**Tiglin Ltd** have regular Service User Meetings, a nominated Service User representative and conduct regular Service User Evaluations. They have a Charter of Rights, use a rights based approach and have a National Charter.

The **ECRDATF** maintains a position for a Service User (SU) representative on its committee.

All research conducted, whether funded or not, is obliged to get a SU perspective on the issues for consideration.

NATIONAL DRUGS STRATEGY
APPENDIX I

The group was convened in late 2021 and continued their work in 2022. It was limited in its work as there was little or no evidence of the needs of a Family Support Service in the region. Some work in this area is currently being provided by other funded services e.g. MQI CRIS, Wicklow Child and Family Services, Living Life Counselling and Tiglin Residential service. It was decided to tender for a report on the extent of current provision and the gaps needed to be addressed.

This work proved to be more complicated than anticipated. Despite the high number of meetings between the researcher and the committee, it was difficult to get a cohesive report to address the key questions asked. At the end, the final report did little to clarify the situation and gave unlinked and un-evidenced options to follow, mainly to be delivered by the researcher. Inaccuracies in the many supplied reports were not sufficiently addressed and thus, could not be published.

The further compilation of current provision of Family Support Services and gaps identified has now been allocated to the Development Worker within their role.

#### Proposals submitted for enhanced funding of services in 2022.

Cocaine proposal (February 2022) €200,000

A proposal was developed for a HSE CHE *initiative to address the Harm from Cocaine and 'Crack' Cocain in this region*. Despite the very short timeline, it was developed across the 3 Task Forces of HSE CHE (East Coast Regional, Bray Local and Dun Laoghaire Local) with inputs and data provided by the funded services in each. Although addressing and scoring highly in each category of the proposal, it was deemed 'unsuccessful'. Little was offered by way of explanation as to how subsequent proposals could meet the needs of the assessor/panel.

#### Staff of the Task Force

There are two staff member of the Task Force – a Coordinator and a Development Worker.

The **ECRDATF** Coordinator is employed directly by the HSE as a Grade VII worker. The Coordinator is currently line managed by the HSE Addiction Services Area Operations Manager (or acting Area Operations Manager) from the CHO7 base at Bridge House, Cherry Orchard Hospital, Dublin 10.

The Development Worker is hosted and directly employed by County Wicklow Partnership (CWP) Ltd. The Development Worker is employed under the Community Development Worker pay scale and is line managed by the CWP SICAP Coordinator and has a role and job description agreed between the SICAP Coordinator and Task Force. Funding is provided for this role by the Task Force. Regular meetings are held between the SICAP and **ECRDATF** Coordinators to track progress and advance the projects agreed. The Development Worker in place tendered her resignation in early 2022 and, despite advertising twice, it proved difficult to select a replacement during 2022.



#### EAST COAST REGIONAL DRUGS AND ALCOHOL TASK FORCE

# FINANCIAL ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2022

#### **CONTENTS PAGE**

Accountant's Report	2
Accounting Policies	3
Income and Expenditure Account	4
Balance Sheet	5
Notes to the Financial Statements	6

#### **Accountant's Report**

In accordance with instructions given to us, we have compiled, without carrying out an audit, the attached accounts for year ended 31st December 2022 from the accounting records as supplied for the East Coast Regional Drugs Task Force, and from the information, representations and explanations given to use by the Co-Ordinator.



APPENDIX I

#### EAST COAST REGIONAL DRUGS AND ALCOHOL TASK FORCE

# FINANCIAL ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2022

Pauline O'Reilly & Co Certified Public Accountants Sweet Chestnut Blacklion Greystones Co. Wicklow

Date: 23<sup>rd</sup> February 2023

#### 1. ACCOUNTING POLICIES

(a) Accounting Convention

The accounts are prepared under the historical cost convention.

(b) Foreign Currencies

The accounts are expressed in Euro's (€)

(c) Basis of Preparation

The financial statements are prepared under the accruals method of accounting, and in accordance with generally accepted accounting principles.



#### EAST COAST REGIONAL DRUGS AND ALCOHOL TASK FORCE

# FINANCIAL ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2022

INCOME & EXPENDITURE ACCOUNT FOR Y	EAR ENDED 31ST D	ECEMBER 2022
	Year Ended 31/12/22	Year Ended 31/12/21
INCOME	€	€
HSE Grant	37,486	57,511
Covid 19 Grant		18,336
KWETB		30,000
Ministers Grant	10,000	10,000
TOTAL INCOME	47, 486	115, 847
EXPENDITURE		
Covid Specific Expenses		18,557
Staff Training	1,270	18,630
Printing, Postage & Stationery	2,524	1,166
Room Hire	814	760
Development Worker	5,807	42,000
Accountancy Fees	923	861
Bank Charges	58	60
Rent	17,767	12,500
Project Utilities	5,496	2,251
Materials		3,895
Computer Costs	1,150	1,116
TOTAL EXPENDITURE	35,809	101,796
Excess of Income over Expenditure for year	11,677	14,051
Accumulated reserves at beginning of year	15,976	1,925
Accumulated reserves at end of year	27,653	15,976

APPENDIX I

#### EAST COAST REGIONAL DRUGS AND ALCOHOL TASK FORCE

# FINANCIAL ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2022

BALANCE SHEET - AS AT 31ST DECEMBER 2022				
	31/12/22	31/12/21		
	€	€		
CURRENT ASSETS				
Cash at Bank and in Hand	91,146	15,587		
Debtors and Prepayments	1,437	1,250		
Total Current Assets	92,583	16,837		
CURRENT LIABILITIES				
Creditors & Accruals	(6,730)			
Deferred income – KWETB	(58,200)			
Total Current Liabilities	(64,930)	(861)		
Net Current Assets				
REPRESENTED BY				
REPRESENTED BY				

#### EAST COAST REGIONAL DRUGS AND ALCOHOL TASK FORCE

# FINANCIAL ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2022

Notes to the Financial Statements - Accountant's Report				
ACCUMULATED RESERVES				
NOTES TO ACCOUNTS				
NOTES TO ACCOUNTS				
APPROVAL OF FINANCIAL STATEMENTS				
ATTROVAL OF THANCIAL STATEMENTS				
The accounts were approved by East Coast Regional Drugs Task Force on 23rd February 2023				

Appendix II - Governance Governance

#### East Coast Regional Drugs and Alcohol Task Force

Ten regular meetings of the East Coast Regional Drugs and Alcohol Task Force (**ECRDATF**) were held during 2022. The dates were January 13th, February 17th, March 24th, April 21st, May 26th, June 23rd, August 25th, September 29th, October 25th, and December 12th. All but 4 meetings were held online. A full induction programme was given to all new members, albeit under Covid 19 restrictions.

- (1.) Members who left the ECRDATF during 2022
- (2.) Members who joined ECRDATF during 2022
- (3.) Members who had difficulty accessing online facilities
- (4.) Member who took extended leave during 2022
- (5.) Member was redirected to Covid specific work

Name	Sector	Agency	No. of meetings
Pat Kerr	Chairperson	Independent	10
Tommy Annesley, Cllr	Elected Representative	Wicklow County Council – Arklow Municipal District	4
Rona Barker, Insp <sup>1</sup>	Statutory	An Garda Síochána	6
Tom Barrett, Insp <sup>2</sup>	Statutory	An Garda Síochána	1
Eileen Brassington <sup>3</sup>	Community	North Wicklow/Greystones	3
Shiela Busher <sup>3</sup>	Community	South Wicklow/Arklow	0
Catherine Byrne	Statutory	KWETB	0
John Craven ⁵	Statutory	HSE Addiction Service	0
Mags Crean, Cllr <sup>1</sup>	Elected Representative	Wicklow County Council – Greystones Municipal District Deputy Chairperson	3
Dolores Goucher <sup>3</sup>	Community	Mid- Wicklow/Wicklow town Deputy Chairperson	4
Deborah Jordan	Community	Mid-Wicklow/Wicklow town	6
Winifred Kelly	Voluntary	Simon Community/Wicklow County Council Housing Dept	0
Peir Leonard, Cllr <sup>2</sup>	Elected Representative	Wicklow County Council – Arklow Municipal District	2
Kay O'Connor <sup>4</sup>	Voluntary	County Wicklow Partnership Ltd	6
Samantha O'Rourke	Community	North Wicklow/Kilcoole	2
Niall O'Shea	Independent	Financial Advisor	4
John Snell, Cllr	Elected Representative	Wicklow County Council – Wicklow Municipal District	7
Sinéad Browne <sup>1</sup>	Staff	ECRDATF Development Worker	1
Maeve Shanley	Staff	ECRDATF Coordinator	10

The Task Force have a number of agreed subgroups and, when required, set up additional subgroups to deliver on specific tasks and projects agreed in its workplan.

#### The Finance, Audit and Risk Subgroup

This group reviews funding issues and work and gives full consideration to funding of one-off pieces submitted. It also goes through the annual funding of projects to appraise the work achieved and make full and clear recommendations to the Task Force members in regard to ongoing funding as per the Task Force terms of reference.

Name	Sector	Agency
Pat Kerr	Independent	Chairperson
Eileen Brassington	Community	North Wicklow
Catherine Byrne	Statutory	KWETB
John Craven	Statutory	HSE Addiction Service
Kay O'Connor	Voluntary	County Wicklow Partnership Ltd
Niall O'Shea	Independent	Finance Lead/Advisor
Maeve Shanley	Statutory	Task Force Coordinator

#### The Treatment and Recovery Subgroup

This group comprises members of each of the funded projects along with other identified services to assist the development of a range of treatment and recovery options based on a holistic approach to care planning and case management of our service users. The group met five times in 2022 along with a larger event where the Task Force members attended an event to 'meet the projects' and each project attended and gave a presentation on their work with a question and answer session to follow.

Name	Sector	Agency	No. of meetings
Anne Bolger	Statutory	HSE YoDA East Coast	3
Andrew Jackson	Voluntary	Wicklow ISPCC Under 18 service	3
Christine Keegan	Voluntary	Wicklow Child & Family Project – Initial Counselling	3
Kirsty Kirkwood	Voluntary	Living Life Counselling	5
Phil Thompson	Voluntary	Tiglin Teen Challenge Services	3
Angela Tierney	Statutory	HSE Addiction Rehabilitation Services	2
Shane Von Metzradt	Voluntary	MQI CRIS Project	4
Maeve Shanley	Statutory	Task Force Coordinator	5
Sinéad Browne <sup>1</sup>	Voluntary	Task Force Development Worker	1

#### ECRDATF Strategic Plan and Evaluation of Projects (2020 reports)

The existing strategic plan was due to be completed by March 2022. Due to delays as a direct result of Covid restrictions, the members agreed to extend this plan by one year. The Evaluation of Projects report (linked to the Strategic Plan) identified a number of issues with some of our current funding streams and recommendations to be followed. A Commissioning Based Model on the key services to be

GOVERNANCE

funded in the future was agreed. Each commissioning/procurement piece was overseen by a subgroup of members from development of the tender to the award and instigation of the new service. A separate subgroup of member was set up to oversee each recommendation and realise the new service. All work was reported to and agreed by the main Task Force members.

**Group 1** was set up to award a tender for adult drug and alcohol services in the East Coast Region. This group comprised:

Name	Sector	Agency
Pat Kerr	Independent	Chairperson
Niall O'Shea	Independent	Finance Lead/Advisor
John Craven	Statutory	HSE Addiction Service
Dolores Goucher	Community	Wicklow area representative
Maeve Shanley	Statutory	Task Force Coordinator

The group was assisted by another region and used their template to identify and draw up the requirements identified. Initially, under HSE instruction, the group linked with the HSE procurement service in order to compile and design the service parameters required to deliver this service for the tendering on the eTenders platform. Following protracted meetings and eventually a meeting with HSE procurement and the HSE legal advisors, it was decided that the funding threshold was not met to require the tender to be published on the eTenders platform. The group was only then able to finalise the tender documents and publish on a local platform. The documents required comprised the main tender document, a tender document checklist and a tender assessment sheet which were scrutinised and re-edited a number of times. The tender was then made 'live' for 4 weeks. All applications were acknowledged and the group reconvened to make an assessment. This was then conveyed to the main Task Force members who ratified the decision. The successful tenderer was notified and communicated with to have services ready and available from January 2023.

**Group 2** was set up to award a tender for Under-18 year old drug and alcohol services in the East Coast Region. This group comprised:

Name	Sector	Agency
Pat Kerr	Independent	Chairperson
Eileen Brassington	Community	North Wicklow area
Deborah Jordan	Community	Wicklow town area
Dolores Goucher	Community	Wicklow area representative
Maeve Shanley	Statutory	Task Force Coordinator

The group met on a large number of times to compile and design the service parameters required to deliver this service. Whereas the adult service was in existence and information on what worked and was needed was somewhat available, this was not the case with this service. The group was able to finalise

the tender documents and publish on a local platform. The documents required comprised the main tender document, a tender document checklist and a tender assessment sheet which were scrutinised and re-edited a number of times. The tender was then made 'live' for 4 weeks. All applications were acknowledged and the group reconvened to make an assessment. Unfortunately, none of the tenders met the minimum criteria specified and thus, none were chosen. This was then conveyed to the main Task Force members who ratified the decision. All tenderers were notified.

The group continued to meet and agreed that, as it was unclear what numbers of Under-18s were expected, one or two pilot sites would be chosen to help identify the need and evidence the parameters of a service for this cohort. Two services were approached to provide the pilot sites for this work. Both eventually agreed, but due to personnel changes, time was lost in progressing this work. The work is due to commence at the beginning of 2023.

**Group 3** was set up to award a tender for Adult Brief Initial Counselling for clients being case managed in a drug and alcohol services in the East Coast Region. This group comprised:

Name	Sector	Agency
Pat Kerr	Independent	Chairperson
Rona Barker, Insp.	Statutory	An Garda Síochána
Deborah Jordan	Community	Wicklow area representative
Maeve Shanley	Statutory	Task Force Coordinator

The group met on a large number of times to compile and design the service parameters required to deliver this service. By chance, an existing service had been reviewed and reconfigured due to issues raised by staff and clients which provided the blueprint for the new tender. Thus, the group was able to finalise the tender documents and publish on a local platform. The documents required comprised the main tender document, a tender document checklist and a tender assessment sheet which were scrutinised and re-edited a number of times. The tender was then made 'live' for 4 weeks. All applications were acknowledged and the group reconvened to make an assessment. One tender was deemed successful and selected to provide the service from January 2023. This was then conveyed to the main Task Force members who ratified the decision. All tenderers were notified. A transition from one service to another was enacted in quarter 4 of 2022 so that a smooth takeover of the new service could be delivered.

**Group 4** was set up to see how the Task Force could deliver on the requirement for Family Support services in the East Coast Region. This group comprised:

Name	Sector	Agency
Pat Kerr	Independent	Chairperson
Eileen Brassington	Community	North Wicklow area
Deborah Jordan	Community	Wicklow town area
Dolores Goucher	Community	Wicklow area representative
Maeve Shanley	Statutory	Task Force Coordinator







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All services provided with funding from:



