This report is based on findings from a structured interview with the Project Coordinator, Cabra Resource Centre and the Audit/Assessment Report of Seamus Cody (January 2000). Some additional information was supplied by the Project and, where relevant, has been attached as appendices.

From: Rita Burtenshaw, MSc
Keelin O’Reilly, BA, HDipEd, GradIPD, MEd, MIITD
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A BACKGROUND TO PROJECT

The Cabra Resource Centre (CRC) opened on 14th September 1999. The Centre had been planned over a period of two years. Its aim was to provide a community-based ‘Drop In’ Centre with support and service for the community as a whole. More particularly it aimed to provide a service for those individuals and families within the community regarding alcohol/substance abuse issues and related concerns. The Centre was formally opened by An Taoiseach, Bertie Ahern on 22nd November 1999.

The Centre is run by a Management Committee with representatives from the following stakeholders:

- Finglas/Cabra Partnership
- Cabra Community against Drugs
- Finglas/Cabra Drugs Task Force
- Eastern Health Board
- Dublin Corporation
- Finglas/Cabra Partnership
- Local Employment Services
- Dowth Avenue/Newgrange Residents’ Association
- (Representatives from two other community groups – not decided)

The Finglas/Cabra Partnership was played a large part in the establishment of the Centre, together with the Eastern Health Board and the other stakeholders listed above.

The role of the Management Committee is to ensure that the Centre is run in accordance with the aims and objectives identified. It is responsible for formulating policies, establishing guidelines for the Centre and determining the range of services to be provided by the Centre.

The National Drugs Strategy Team, Eastern Health Board, Finglas/Cabra Partnership and other organisations and groups have funded the Centre to the sum of £200,000 approx.
**B STAGES OF PROJECT DEVELOPMENT AND IMPLEMENTATION**

**Planning**

**Identification of the Problem and Assessment of Need**

The need for the CRC was based on information from a number of sources:

- Finglas/Cabra LDTF statistics
- Knowledge and experience of those involved in community activities in the area, e.g. Positive Living Year
- Cabra Community Against Drugs

The Finglas/Cabra Partnership believed the most effective response to the growing problem of substance misuse in the area was through the preparation of an educational and prevention strategy, including programmes which would provide information and heighten awareness around alcohol and substance misuse/abuse. The aim was to break the cycle of addiction.

**Establishment of Aims and Objectives**

Several community representatives, staff of the Resource Centre and stakeholders gave of their time and effort to help direct the Centre’s development. The Terms of Reference of the CRC were ratified by the Management Committee at a meeting in January 2000.

The Mission Statement is:

> "To resource, assist, support and educate the individual, the family and the Cabra community to combat areas of deprivation and exclusion within the community with a primary emphasis on tackling misuse/abuse alcohol and other substances."

*(Terms of Reference, January 2000: 1)*

The Aims of the Centre are listed as:

- To assist individuals to take the initial steps to overcome the difficulties of alcohol and/or substance abuse/misuse and support their transition to a normal, positive and fulfilling lifestyle.
- To provide advice and support to families with fears of experience of alcohol and other substances of abuse/misuse within the family unit,
- To educate the community of the dangers of alcohol and other substances of abuse/misuse through positive living activities and by developing local responses to a local problem.
- To provide training/meeting facilities to the community, voluntary and statutory groups.
- To secure the resources necessary to enable the Centre’s objectives to be met.
The Objectives identified under the above headings are:

- To provide a brief intervention counselling service
- To provide an open door drop-in information service
- To provide a confidential consultation and referral service
- To establish a comprehensive multi-media resource library on drug related issues which community members can access
- To develop support programmes
- To establish and support self-help groups
- To provide suitable capacity-building training for families to enable progression
- To make available literature and other forms of media information relative to the services the Centre will provide
- To develop a community response through positive living activities to the problem of alcohol and other substance abuse/misuse in the community
- To link into all the local schools, colleges and community groups
- To make available to schools, colleges and community groups educational information relative to the services the Centre will provide through literature and other media forms
- To encourage and assist local schools and community groups in organising alcohol and substance abuse/misuse prevention lectures, positive living lectures and events, general workshops and events relative to the services the Centre will provide.
- To make available to the local community for training and meetings, certain areas and equipment at such times as they are surplus to the Centre’s own programme requirements, subject to accessibility and conditions as set down by the Management Committee.
- To provide information on local services those in recovery/rehabilitation from alcohol and substance abuse/misuse
- To make available the facilities of the Local Employment Service Network to local unemployed people who are in recovery from alcohol or substance abuse/misuse.
- To secure, equip and maintain the Centre
- To engage staff relevant to the services to be delivered
- To source and secure funding for the above
- To be an effective resource to those who work in the area of, and those who are affected by drugs and substance abuse, those in recovery/rehabilitation, the long-term unemployed and those affected by deprivation and exclusion/
- To liaise with and utilise such agencies and organisations relevant to the service the Centres will provide.

A detailed programme work plan has been compiled for the period from January until December, 2000 (see Appendix i). This outlines the various activities/services of the CRC and the aim of each.

Cody states that the project has been well managed, that it has ‘essentially been administered according to the approved plan’ (Cody, 2000: 1) and that there was no deviation from the original plan (see Appendix ii).

**Selection and Development of Strategies, Activities and Services**

The activities of the Centre derive directly from the objectives:

- Brief Intervention counselling
- Drop-In Information Service
- Confidential consultation/referral Service
- Family Support Groups
- Family Support Service
- Multi-media Library
• Self-support Groups
• Links with Home School Liaison Officers
• Publication of CRC Newsletter (monthly)
• MABS clinics
• EHB Outreach
• LES clinic
• NA and OA
• Networking events
• Outreach Work
• Open Door Drop-in Service
• Art Therapy
• Survivors of Domestic Violence group
• Volunteer Programme (to train volunteer in addictions counselling)
• Drug Awareness Week and Art Competition

Implementation

Financial Management

The Finglas/Cabra Partnership is responsible for the financial accounts of the project. Cody (2000: 1) informs us that the financial record keeping for the project is professional, transparent and accurate. He recommended that a financial status report of expenditure vs. budget be prepared quarterly and returned by the project promoters.

Approximately £200,000 funding has been provided for the project. The National Drugs Strategy Team (NDST) originally allocated £88,000 to the project (£68,000 Phase I, and £20,000 Phase II). The NDST approved the reallocation of funding totalling £45,000. The Eastern Health Board approved £20,000 and grants of £10,000 and £5,000 were received from the Finglas/Cabra Partnership and Dublin Corporation respectively.

In June 1999 a request was made to the NDST for £30,000 interim funding to finish the promises and to equip it appropriately for the period July-October, 1999.

Resources

The principal difficulty encountered was the location of a suitable promises. Once the building was secured at 67 Dowth Avenue, Cabra, extensive refurbishment was required and an application for planning permission for a change of use was made.

The Finglas/Cabra Partnership owns the leasehold on the building and employs the following staff for the project:

• Brief Intervention Counsellor/Coordinator
• Administration Support Worker,
• Family Support Worker

The Receptionist/Typist post is filled by staff on the Job Initiative scheme. Currently there are no voluntary workers in the Centre though there may be an opportunity to introduce someone on that basis. The work involved would be general reception and typing initially.
The post of Community Drugs Response Worker was vacated and has not yet been filled. While the staff are enthusiastic and motivated, a lot of time was taken up with training staff in order to provide a good standard of service to the community. The results have been positive.

The Brief Intervention Counsellor/Coordinator has line management responsibility for the other staff. The team meets weekly to communicate on aspects of the Centre’s functioning. The Counsellor/Coordinator meets with individual staff members weekly (1 hour) to provide supervision and support. She meets with the Jobs Initiative staff weekly (1/2 hour).

Ongoing training is provided for staff. Training is based on individual needs and on the needs of the Centre. Two staff are attending the D.I.C.E. programme (another LDTF project) and work related workshops and courses offered through Citywide and NUI Maynooth. Internal coaching and training is given on an ongoing basis. The staff recognise the need for, and the value of, training.

Staff resources are considered adequate for the services provided currently. However, if the service expands then additional staff will be required.

Office equipment, e.g. computers, photocopiers, etc. are on site and are adequate for current staffing levels.

**Established Links**

The Centre has arranged formal Networking opportunities to build links with statutory agencies and community/voluntary groups. To date its links with statutory bodies have been limited. Staff are encouraged to visit the other projects and the Centre has arranged Open Days for the local community and other project staff, etc. The facilities in the Centre limit the numbers attending meetings, etc.

The Coordinator of the LDTF has provided great support to the Brief Intervention Counsellor/Coordinator and the Management Committee throughout the planning and in pigmentation of the project.

The local community is involved in the project through representation on the Management Committee and attendance at various meetings, e.g. NA and Family Support. The Counsellor/Coordinator would like to see more involvement. There are plans to encourage this through coffee mornings and local volunteer will begin work in the Centre shortly.

Good contacts have been built with other drugs projects and with the Positive Living Year project in the area.

A door-to-door survey is being carried out to identify how much is known about the Centre and its services. The findings will give a clearer indication of the needs of the local community. This will help the Centre to identify additional activities and services.

The Centre has developed its own Newsletter which is published monthly. This media is used to provide feedback on the project to the local community.

**Target Group**

The target group comprises the local community of Cabra. Some clients may be problematic, stable or recovering drug users. Other clients do not use drugs at all.
Since the Centre opened its doors a number of methods have been used to track the amount of contact with the community. These are referred to in the next section of the report – Outcome. Cody (2000) states in his report that the project is achieving what it set out to do.

The Management Committee and staff have put together a Programme Plan for the period January – December 2000 (see Appendix i) which details some of the initiatives to be introduced in order to reach more of the community.

The Counsellor/Coordinator indicated that although the project started off slowly, since Christmas some local people have approached the Centre for counselling and referral in relation to drugs or alcohol abuse/misuse. Prior to that much of the contact had been for information purposes only. This is the first service of its kind in the area and it is perhaps not surprising that local people have been slow to approach the Centre.

Outcome

Outcome Assessment

Although it is not possible to gather full details of client response to the activities/services since the Centre opened, efforts were made to keep track of the service provision during the initial months. For example, for the period from September 1999 until February 2000, 885 contacts were made with the local community. The Newsletter is circulated to approx. 400 homes in the local area. During the period from October 1899 until February 2000, 102 people used the training room.

More recently a phone log (see Appendix iii) and activity log have been put in place. A monthly report is issued (see Appendix iv) on the number of referrals, callers to the Centre, update on resource library, etc. This provides a good tracking method.

When a client comes to the Centre a screening interview is held to assess what, support s/he requires (see Appendix v). An Intake Interview Summary form (see Appendix vi) is completed when a client presents to the Centre and is added to with each visit. This provides a biographical record for each client, together with other information relevant to their case. There are additional forms relating to referral consent and discharge (contained at Appendix vii).

Bookings received for the training room are kept and monitored to examine which groups use the room most often.

Factors which have enabled attainment of objectives include:

- The building
- Money
- Addiction Counsellor
- Steady, motivated and interested staff
- Support from the LDTF Coordinator
Factors which have hindered attainment of objectives include:

- The Management Committee’s lack of involvement initially. There is greater clarity now, however, in relation to the role and responsibility of its members.
- Initial lack of clarity in relation to the development of the Centre’s activities/services
- Initial lack of planning for the development of the Centre. (A detailed work plan is now in place and it is easier to measure whether or not objectives or targets have been reached.)
C CONCLUSIONS

The Project Coordinator was asked to review the project and made the following points.

The critical issues for the project over the next year which were identified include:

- Clarification of the Role of the Management Committee and its function;
- Clarification of role of the Counsellor/Coordinator;
- Effective recruitment and selection procedures for staff.

The three major outcomes of the project since it started are:

- That the Centre is open and functioning
- That the Centre is providing the service it said it would provide
- That the Centre has clients

The main weaknesses of the project which were identified are:

- Lack of clarity around the Management Committee’s role initially
- Lack of clarity and unity initially about objectives and action plans
- Initial lack of decision-making re planning and management
- Recruitment and selection procedures

The principal strengths of the project include:

- The Centre’s staff have expertise to offer
- The Centre does what it said it would do
- Financial resources are available
- The staff are committee and interested.

Overall View of the Project

This Cabra Resource Centre is a new service, and the first of its kind for the Cabra area. It has been open for six months. During that time it has:

- Accessed a building;
- Put together a project plan, objectives and a programme of activities;
- Clarified roles to a great extent;
- Trained the staff of the Centre;
- Developed its services and activities and now provides what it set out to provide
- People initially came to the Centre to get brochures, information, etc. but now they are beginning to use the Centre more, e.g. through Family Support Groups.
- Some people have come to the Centre for counselling, others have been referred on to more appropriate services.
- Established means of recording data re contacts, responses, etc.
- Has plans for more community involvement
- Is marketing the Centre through the door-to-door survey
People in the area are very sensitive about the use of the term ‘drug’. There was suspicion amongst the community initially and this has meant a slow development of the services and activities. However, the resource is now being utilised more. The tracking mechanisms indicate this.

Initially there appear to have been some difficulties surrounding the role of the Management Committee and that of the Counsellor/Coordinator. With support from the Coordinator of the LDTF, however, targets, goals and action plans have been developed. Tools have also been designed to assess use of the services/activities available to the local community.

Considerable time was spent training staff, particularly when the Centre first opened. The staff are motivated and interested in the development of the Centre.

In a relatively short period of time, and despite initial difficulties, the Cabra Resource Centre is delivering what it set out to deliver. This is confirmed in Cody’s evaluation (Cody, 2000). The Coordinator would like to see further development of the Centre, i.e. the Family Support Group and to give presentations outside the Centre.

Enabling and Constraining Factors

Factors Enabling Delivery of the Project

- Clear identification of a need
- Innovative nature of the service
- Involvement of representative stakeholders in deciding aims and objectives
- Development of clear objectives and programme plan
- Funding from key agencies
- Good financial management
- Support of Coordinator of LDTF
- Professional Counsellor/Coordinator
- Motivated staff who are interested in the work of the Centre
- Resources for training staff
- Effective formal and informal networking
- Development of Programme Plan for period from January-December 2000
- Well equipped premises
- Development of tools for measuring achievement of objectives
- Good staff supervision/support

Factors Constraining Delivery of the Project

- Initial lack of clarity of role of Management Committee
- Lack of clarity around reporting relationship between the Counsellor/Coordinator and Chairman of the Management Committee and the representative of the Finglas/Cabra Partnership
- Two-pronged role of the Counsellor/Coordinator is complex and may at time dilute the counselling element of the post if the administrative duties increase
- Recruitment and selection procedures need to be reviewed
Suggestions for Principles of Good Practice

- The Centre’s means of tracking contact with clients is simple but very effective.
- The Programme Plan developed for the period January – December 2000 provides a good means of monitoring progress towards achieving objectives.
- The team spirit and supervision/support system which operates currently is effective.

Overall this project has developed extremely well in a very short period, and is a very positive addition to the services and facilities of the Cabra area. Factors enabling delivery of the project far outweigh those which have hindered it. The Centre is needed by the local community and it is being utilised to a high level even after six months.
Programme Plan (January – December, 2000)
<table>
<thead>
<tr>
<th>Service/Programme and aim</th>
<th>How</th>
<th>Time Scale</th>
<th>Resources</th>
<th>Expected Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brief Intervention Counselling</strong></td>
<td>Ongoing</td>
<td>Monday/Friday 9 – 5 p.m.</td>
<td>Brief/Intervention Counsellor, Trainee Counsellor</td>
<td>10-15 Counsel Slots per Week for counsel</td>
</tr>
<tr>
<td><strong>Open door drop-In information service</strong></td>
<td>Mon – Fri</td>
<td>Ongoing 9 a.m. – 5 p.m.</td>
<td>Receptionist, Admin Support Worker, Family Support Worker, Coordinator</td>
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<tr>
<td><strong>Confidential Consultation and referral service</strong></td>
<td>Ongoing</td>
<td></td>
<td>Addictions Counsellor, Directory of Services for E.H.B. area, Family Support Worker.</td>
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<tr>
<td><strong>Brief Intervention Counselling</strong></td>
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<tr>
<td><strong>Open door drop-In information service</strong></td>
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<td></td>
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<tr>
<td><strong>Confidential Consultation and referral service</strong></td>
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<tr>
<td><strong>Multi-media Resource Library</strong></td>
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## Service

<table>
<thead>
<tr>
<th>Programme</th>
<th>How</th>
<th>Time Scale</th>
<th>Resources</th>
<th>Expected Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Support Service</strong></td>
<td>Contact with residents, local clubs and groups Home visits.</td>
<td>Ongoing</td>
<td>Family Support Worker, surveys Id</td>
<td>Contact with 45 per week</td>
</tr>
<tr>
<td><strong>Aim</strong> – To develop support service for families with drug related concerns.</td>
<td></td>
<td></td>
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<tr>
<td><strong>Family Support Groups.</strong></td>
<td>Outreach in community. Research group facilitator and alternative therapy practitioners. Advertise . Referrals from Addictions Counsellor</td>
<td>Jan 2000 - ongoing 2 groups weekly Mon 2 – 4p.m. Mon 7 – 9p.m.</td>
<td>Family Support worker. Facilitator from Crosscare. Conference Room. Refreshments £</td>
<td>2 well developed f; support groups with 6-10 participants in group weekly</td>
</tr>
<tr>
<td><strong>Aim</strong> – To develop 2 Family Support Groups at C.R.C. Weekly</td>
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<tr>
<td><strong>Self-Support Groups</strong></td>
<td>Make contact with self help groups- Research group need for extra meeting</td>
<td>Initial Contact Nov 99 Initial Meetings Dec 99 Meetings begin Feb 2000, NA, OA, Begin April 2000, for ACOA.</td>
<td>Addiction Counsellor Staff on duty Training room Family Support Worker Co-ordinator Admin Support worker . Representatives from self-help groups.</td>
<td>NA, ACOA and O will meet weekly 11 Cabra Resource Ce</td>
</tr>
<tr>
<td><strong>Aim</strong> – To house meetings at centre one of each NA Meeting OA Meeting ACOA Meeting</td>
<td></td>
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<tr>
<td><strong>Door to door survey</strong></td>
<td>Door to door contact in local community. Complete survey.</td>
<td>Jan -Dec 2000 3 1/2 days per week.</td>
<td>Family Support Worker</td>
<td></td>
</tr>
<tr>
<td><strong>Aim</strong> As certain community knowledge of C.R.C. and increase awareness of C.R.C.</td>
<td></td>
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<tr>
<td>Service/Programme</td>
<td>Aim</td>
<td>How</td>
<td>Time Scale</td>
<td>Resources</td>
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<tr>
<td><strong>Newsletter</strong></td>
<td>Aim – To print a newsletter</td>
<td></td>
<td>Monthly bi-monthly ongoing Nov 99-Dec 2000</td>
<td>£1,000- (printing costs) Admin Support Worker Co-ordinator Staff training in Journalism/editing</td>
</tr>
<tr>
<td><strong>Group for Opiate users</strong></td>
<td>Aim – to develop support group for group members</td>
<td>Advertise in Newsletter Word of mouth Referrals from E.HLB./other agencies, self referred.</td>
<td>Weds 2.15-3.15 Jan-Dec 2000</td>
<td>Conference Room Addictions Counsellor TV/VCR/Tapes Acupuncture</td>
</tr>
<tr>
<td><strong>Relapse Prevention Planning Group</strong></td>
<td>Aim – to develop group support and identify skills/plan to reduce risk of relapse</td>
<td>Referrals from other agencies self-referred referrals from Family Support Worker.</td>
<td>6 weeks begin April 2000 begin June2000 Begin Sept Begin Nov</td>
<td>Conference Room Addictions Counsellor Workbooks Guest Speaker Alternative Therapy £300</td>
</tr>
<tr>
<td><strong>Survivors of Domestic Violence Group</strong></td>
<td>Aim – to develop support group that will become self-managing</td>
<td>Self referred Contact with previous clients Referrals from other agencies-Family Support Worker advertise and screen</td>
<td>Ongoing weekly Begin March/April 2000</td>
<td>Conference Room TV/VCR/Tapes Guest speaker Alternative Therapies £300</td>
</tr>
<tr>
<td>Service Programme</td>
<td>How</td>
<td>Time Scale</td>
<td>Resources</td>
<td>Expected Outcome</td>
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<tr>
<td><strong>Art Therapy</strong></td>
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<tr>
<td><strong>Aim</strong> to develop creative forum for client contact</td>
<td>Select from current client bank. Advertise Referrals from -LES Family Support Self referred</td>
<td>Ongoing (2 hrs) weekly begin April 2000</td>
<td>Art material’s £200 Conference Room Addictions Counsellor Volunteer Admin Support Worker</td>
<td>Engage clients uncomfortable with “talk therapy” in non threatening setting 10 persons</td>
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<td><strong>Volunteer Programme</strong></td>
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<tr>
<td><strong>Aim</strong> to train volunteer in addictions counselling</td>
<td>Interview potential candidates assess for suitability/skills</td>
<td>Begin Mar/Apr 2000</td>
<td>Addictions Counsellor training funds LDTF Supervision</td>
<td>Volunteer will develop skills to do screening 1:1 Counselling Co-facilitate groups by Dec 2000</td>
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<td><strong>Special Events</strong></td>
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<td><strong>A Drug awareness week</strong></td>
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<td><strong>Art Competition Colouring book</strong></td>
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<td><strong>Workbook Journal</strong></td>
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<tr>
<td><strong>Alternative Therapy</strong></td>
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<td><strong>Networking</strong></td>
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<tr>
<td><strong>Aim</strong> To develop working relationships with community and statutory workers in Cabra area-with drugs related focus</td>
<td>Meetings Outreach, door to door, advertising newsletter agency visits host visits to C.R.C.</td>
<td>Ongoing</td>
<td>£2,000 C.R.C staff and Management Committee LDTF Partnership</td>
<td>C.R.C. Known in to locals and service providers Improved relation between agencies</td>
</tr>
</tbody>
</table>
Assessment/Audit of the Cabra Resource Centre

Cody, S

January 2000
Assessment/Audit Report of the

‘Cabra Resource Centre’

Approved by

The Finglas/Cabra Drugs Task Force
INTRODUCTION:

The subject of this report is the assessment and audit of the ‘Cabra Resource Centre’ project approved by the Finglas/Cabra Drugs Task Force, for a grants totalling £203,500 over an eighteen month period commencing in March 1998.

The objectives of the assessment/audit where to:-

1. Determine how the project developed in relation to the original approved plan.
2. Identify and document any deviations from the original project plan submitted.
3. Detail how the project promoters intend to evaluate the project.
4. Confirm that the grant approved has been spent in accordance with the budget.
5. Examine the financial record keeping of the project promoters for the grant.
6. Recommend a suitable system for the financial tracking of the project.

ASSESSMENT/AUDIT:

The assessment/audit of the project was carried out using the following criteria:-

Phase I – Assessment.

Personal interviews with the Finglas Cabra Drugs Task Force Co-ordinator, the chairperson of the Cabra Community Against Drags and the Administrator/Brief Intervention Counsellor of the centre to discuss and answer objectives 1 to 3 above.

Phase II – Assessment.

The above interviews were followed by a detailed study of all files relating to the project in order to obtain an understanding of the progress of the project and to confirm objectives 4 and 5 above.

DETAILS AND RESULTS OF ASSESSMENT/AUDIT:

The Details and results of the assessment/audit are attached.

CONCLUSIONS:

1. This relatively complex project was well managed and, despite the difficulty of locating and acquiring a suitable premises and the unforeseen associated costs, was essentially administered according to the approved plan. Details contained in the attached Appendices will confirm.
2. There was no deviation from the original plan.
3. The official opening and approval of the fully staffed and finished centre by the Taoiseach, Mr. Bertie Ahem, T.D. on the 22 November 1999 is confirmation of the success of the project. Continual assessment of the Cabra Resource Centre’s services will be ongoing. See Taoiseach’s speech attached.
4. The grants approved have been spent according to the approved budgets.
5. The financial record, keeping for the project was and continues to be professional, transparent and accurate.
6. It is proposed that a simple financial status report of expenditure versus the budget plan, be prepared and returned by the project promoters quarterly.
DETAILS ABB RESULTS OF ASSESSMENT/AUDIT:

Phase I – Assessment

After making a detailed study of the project proposal, the writer met with the project Co-ordinator Mr. Fiacra McGuirk on the 7th December 1999.

During a two hour-long Interview, an assessment was made according to objectives 1, 2 and 3 outlined in the introduction of this report. Details were recorded, data taken and examined to validate the findings.

One hour long personal interviews were also conducted with Mr. Aodan Perry, Chairperson of the Cabra Community Against Drugs and Ms. Aine Walsh, Administrator/Brief Intervention Counsellor on the 7th and 8th December 1999 respectively.

Project Planned

Essentially, the aim of the ‘Cabra Resource Centre’ was to:-

“To establish a Resource Centre in the Cabra area “which would facilitate the development of a framework within which drug prevention, information and support services could develop.”

Project Implement

An LDTF. 1. Form was duly completed and approved on the 5th March 1998 see attached.

Architect Mr. John Deader of 43 Old Cabra Road, Dublin 7, along with Solicitors O’Reilly, Doherty and Co. of 6 Main Street, Finglas, Dublin 11, were engaged and the process of finding a suitable, premises commenced.

The process proved time consuming and difficult. Premises at 58 Faussagh Avenue, and 95 Annamoe Terrace were among those considered before the final choice was made.

On the 17th August 1998 the Finglas Cabra Partnership secured the lease (23 years remaining) on a shop unit at 67 Dowth Avenue, Cabra, Dublin 7. Purchasing the leasehold interest cost £18,000. The building required extensive refurbishment and renovation. An application for planning permission for change of use was made.

The architect carried out a formal examination/inspection of the premises and produced a report in July 1998, made a fire safety application and Dublin Corporation approved the planning application on the 9th December 1998. The building was then insured with Goggin Insurances for £100,000 with property owners liability of £1,000,000.

Documentation relating to the above is contained in Appendix A attached.
Terms of Reference for the Cabra Resource Centre were defined and the election of officers to the committee took place on the 17th November 1998. Mr. Aodan Perry was elected Chairperson and Mr. Joey Furlong Secretary. The other members of the Management Committee were Mr. Michael Bowe, Finglas Cabra Partnership, Ms. Miriam Flynn, Dublin Corporation, Mr. Sean O’Neill, Eastern Health Board, Mr. Michael O’Riordan, Local Employment Services, Mr. Mick Finnegan, Cabra Community Against Drugs, Ms. Hillary Condron, Community Development Worker, and Mr. Fiacra McGuirk, Finglas Cabra Drugs Task Force. The committee met regularly to address all issues relating to the premises, local community questions/concerns, staffing and minutes were kept of all meetings.

A detailed letter was sent to the Taoiseach informing him of the project on the 13th October 1998.

Thomas C. Whelan Associates – Quantity Surveyors of Grand Canal Street, Dublin 2, estimated a total cost of £90,700 for the proposed alterations/renovation of the premises. Quotations of £70,500 and £54,970 were received, the latter from ROC Building Contractors to which the contract was awarded.

The National Drugs Strategy Team originally allocated £88,000 to the project (£68,000 Phase I, £20,000 Phase II) The cost of purchasing of the leasehold along with the extensive refurbishment and renovation of the building were obviously not built into the original proposal so the Task Force set about raising additional funding.

The National Drugs Strategy Team approved the reallocation of funding totalling £45,000. The Eastern Health Board approved £20,000 while grants of £10,000 and £5,000 were received from the Finglas Cabra Partnership and Dublin Corporation respectively.

Planning permission was approved, a Fire Safety Statement was granted, no objections were received and Dublin Corporation was issued with a commencement notice on the 1st April 1999. A contract was signed with ROC Building Contractors on the 12th April 1999 and work began. A tax clearance certificate for the builders was received from the revenue commissioners.

In March ‘99 the recruitment process began for a Brief Intervention Counsellor, an Administration Support Worker and a Receptionist/Clerk Typist. Detailed job descriptions were prepared and all three positions were professionally filled.

In June 1999 an Electrical Completion Certificate was received and a formal request was made to the National Drugs Strategy Team for £30,000 interim funding to finish the premises and to equipment it appropriately per a detailed estimates list.

This request was approved on completion of a new LDTF. Form and the centre was furnished and equipped before being formally opened by the Taoiseach, Mr. Bertie Ahern T.D. on the 22nd November 1999. Documentation relating to the above is contained in Appendix B attached, concluding with the speeches made by the chairperson of the Cabra Resource Centre and the Taoiseach at the official opening.
Phase II – Audit

During the detailed study of all files relating to the project the writer examined the financial records and confirmed that all grants were spent in accordance with the planned budgets.

All payments to the building company were approved in advance by the architect.

The financial record keeping, for the project, was straightforward, accurate and transparent.

The total expenditure to the 31st October 1999 was £141,784 with a balance of £15,215.

Related documentation including Income versus Expenditure reports are attached in Appendix C.
COMMENT:

In order to ensure the future success of the Cabra Resource Centre a formal management structure should be put in place and the committee membership should vote in a change of officers on an annual basis.

The chairperson’s role should be clearly defined as one of directing and supporting the management and staff of the Centre on a continuous basis.
Phone log and Activity log
## Cabra Resource Centre
### Monthly Log February 2000

<table>
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<th>WEEK ENDING</th>
<th>NUMBER OF CONTACTS</th>
<th>PHONE CONTACT</th>
<th>WALK-IN CONTACT</th>
<th>COUNS SLOTS OF 45 MINS</th>
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<td>15</td>
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<td>5</td>
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<tr>
<td>25-2-00</td>
<td>37</td>
<td>15</td>
<td>22</td>
<td>0</td>
</tr>
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<td>28th &amp; 29th</td>
<td>24</td>
<td>14</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>204</strong></td>
<td><strong>77</strong></td>
<td><strong>127</strong></td>
<td><strong>24</strong></td>
</tr>
</tbody>
</table>
Cabra Resource Centre
Conference/Training Room

PLEASE COMPLETE THE FIRST SECTION OF THE FORM.

Date _____________

Contact Person _____________________________________

Telephone: _________________________________________

Name: _____________________________________________

Agency: ____________________________________________

Date(s) room is needed for: _____________________________

Hour(s) room is needed for: _____________________________

Function/Meeting room is needed for: _____________________

Number of persons expected: ____________________________

Resources needed: _____________________________________

(N.B The room can accommodate 10 persons comfortably, 12 persons max)

RETURN THE ENTIRE FORM TO THE ADDRESS BELOW:

Agency Cabra Resource Centre
67 Dowth Ave
Cabra
Dublin 7

Telephone: 838 4377
Fax: 838-4845
Date:

Response to request re use of training room

________________________________________________________________________
Monthly Report (sample)
Brief Intervention Counselling
There have been 24 slots of 45 minute sessions each. Some of the individuals accessing the counselling are receiving ongoing support, however, more people are using the service on a drop-in basis.

Drop-in information service
41 people requested specific information or brochures when dropping in to the centre. Staff met with several people to discuss issues around benefits and straining inquiries. Requests were made by people to be placed on the mailing list for the newsletter.

Consultation/referral service
Referred clients to Alanon, AA, NA, OA, EHB Outreach Worker, Anne Hanney and Addictions Counsellor, Aine Walsh. Trudy Mc Mahon and Antoinette Gray referred clients to L.E.S at Annamoe Terrace, the Aware lecture at St Patricks Hospital, Quarry Road Information Centre and the Sanctuary Dublin 7.

Family Support Worker
Ongoing support is being offered to two clients on a weekly basis. Family Support Group times have been altered, the slot allocated from 2-4 pm has been canceled. There will be weekly coffee mornings Thursdays from 11 am -1 pm at the Resource Centre. The Family Support Worker attended a one day workshop with Combat Poverty on Saturday 19th February.

Multi-media library
Remains at 44 videos and 24 books. A request has been submitted for a drugs display case in January 2000. New brochures and literature have been received from Overeaters Anonymous. The Family Support Worker has also made plans to access the E.H.B selection of videos from there library.

Family Support Groups with Linda Lyons
Continues on a Monday night 7-9pm with regular attendees. 2-4 pm Support Group is being discontinued due to lack of client base.
Self-support groups
NA meet each Wednesday at, 7.30 – 8.45 pm beginning February 2nd. Overeaters met on Thursday 17th February for a public talk. OA will begin a support group on Thursdays 7.30-8.45 pm beginning March 2nd. Alanon are also interested in having a support group running at the centre in the near future.

Trainings/workshops/courses
• Staff
Trudy and Antoinette continue attendance at the D.I.C.E course. February 25th both Antoinette and Trudy completed a training on the computer with Annamoe Terrace staff. Linda Lyons has completed the 6 week course on facing up to suicide. Linda also completed a weekend training on Motivational Interviewing and Brief Counselling Skills on February 25-27th at All Hallows College.
• Clients
A client and the Co-ordinator attended a lecture on Depression at St Patricks on Feb 9th.

Community awareness
The Family Support Worker received 46 completed surveys from 200 households visited door to door. From those individuals names were added to the newsletter distribution list.

Community education/prevention
The Family Support Worker attended an adult education day on the 17th February at St Finbarrs school, Cabra. The stand consisted of information around drug awareness, posters and brochures. The stand received much interest, surveys were completed and referrals to the Resource Centre were made.

Advertising for CRC/services
November and December Newsletter distributed at the Network meeting of community workers 22nd February. A form was distributed with regard to community groups advertising, both for the resource centre and for themselves in the centre’s newsletter. Contacts were made and it is hoped that the Vincentian Refugee Centre will place a paragraph in their monthly newsletter about the centre’s services.

Links to schools/colleges
Continued relationship with Home School Liaison Officers through the Network meeting and visits to the Resource Centre.
Links to clubs/local groups
Linda Lyons visited the Pathways Project 28th February and was also involved in the preparation for the Commemorative Service organised by Citywide 1st February.

Newsletter/interviews
Due to staff shortages in Jan/Feb it has been decided to make this issue of the newsletter a Jan-March edition. We will have 1000 copies printed by MACRO at the cost of £350. Our mailing list is increasing quickly. Any additions welcome.

Other agency business at Cabra Resource Centre
MABS began their clinics on February 7th (Monday) and continue to operate every Monday and Wednesday 10-1pm. The Eastern Health Board Outreach Worker continues to work from the centre on Tuesdays. She assessed three clients regarding consideration for a Methadone treatment programme on February 8th. LES are hoping to take up clinic on Thursdays from 10 am -1 pm at the Resource Centre.

Use of training/conference room
Both NA and OA will use this room on Wednesdays and Thursdays respectively.

Networking with other agencies/groups
Visit by Co-ordinator to the Snug Counselling Service at MACRO on February 14th
Visit by the Co-ordinator to the Kilbarrick Resource Centre, Dublin 5 on the 22nd.
Visit by the Family Support Worker to the Pathways project on the 28th February.
Administration Support Worker visit to MACRO Project February 18th Regarding the newsletter. Family Support Worker made links with Fiona Marphy, Edenmore Drug Intervention Team and Tommy Genocky, Pathways.

Centre security
Recently been given a quote for a code lock between the side hallway and entrance to reception. For an electronic, button operated door the cost would be £280.

Centre building report
ROC are scheduled to come into the centre to do the “snag list” on the March 11th (Saturday). Staff cover has been organised for this day.

Centre equipment, report N/A

Centre Budget update N/A
Centre special spending needs
The Cabra Resource Centre has agreed to pay 50% towards refreshments for the Networking meeting of February 22nd. It is estimated at £30. Supplies were also purchased to make posters advertising the Cabra Resource Centre. We would like permission to host lunches for visitors from other agencies.

Meetings of Note
1. February 9th Review Day attended by the Administration Support Worker and the Co-ordinator.
2. Management Committee Meeting 10th.
3. Drugs task Force meeting February 2nd with Ruth Bennett and Trudy Mc Mahon Regarding format of a new log.
4. Meeting with Mick O’Riordan 4.30 – 7.00 pm.
5. Meeting with the chair of the Management Committee Aodhan Perry, the Co-ordinator of the Finglas Cabra Drugs Task Force and the Co-ordinator of the Cabra Resource Centre 3.30 – 6.45 pm.
6. Meeting with LES February 15th regarding policy/LES link/referrals/presentation by the Cabra Resource Centre.
8. February 17th Co-ordinator met with a representative form Creative Management regarding a course.
11. February 23rd Finglas Cabra Drug Workers Network meeting 3.30-5pm. Family Support Worker, Administration Support Worker and Co-ordinator in attendance 5-6.30 pm Coordinator of the Resource Centre met with the Co-ordinator of the Drugs Task Force about workplan.

Staff Meetings
Staff meetings held: 4th, 10th, 17th, 24th. Staff supervision has begun and will be ongoing meetings held weekly-with the Co-ordinator and three staff persons individually.

Current projects
Outreach to Domestic Violence services in the hope of getting a facilitator to hold a support group for clients. Contact with gay community. Researching Adult Children Of Alcoholics (ACOA).

Anticipated projects
COMMENTS/INDIVIDUAL WORK

Co-ordinator
At training with the ISPCC on February 6th, 2-6 pm. February 19th 2-6pm. February 26th 2-6pm.

Family Support Worker
Received Drug Case as requested, with thanks. Currently working with Delaine Butler form Cross-care regarding starting a Drug Awareness Course.

Administration Support Worker
I have continued to screen clients, four slots in total. I have been sitting in on counselling sessions for training purposes which I find very useful. I am pleased the newsletter will be printed in colour for the Jan-March issue. I have also actively been involved in community meetings and liasing with Breda Kenny regarding the Network meeting 22nd February. I am pleased to be doing a variety of activities

Receptionist
Visited Aids Fund Housing project February 11th (DICE course).

Staff Coverage

Co-ordinator
Sick day taken February 21st and February 29th

Family Support Worker

Administration Support Worker
Holidays taken 14th-16th February. Sick day February 7th.

Receptionist
Compassionate leave taken from February 1st-5th
Screening Interview
Date of Screening:

Name:

Address:

Telephone:

Date of birth:

Staff:

Reason for coming to the Cabra Resource Centre/Presenting problem:

Prior efforts to seek help:

Interested in assessment:

Interested in counselling:

Interested to accept referral:
Interview Summary Form
Cabra Resource Centre
Intake Interview Summary

Name Name of Counsellor: Aine Walsh

Date of Birth: Date of Intake:
Referred by:

IDENTIFYING DATA

Client is ________ years old ________ currently living _________________________________.
He is referred to this agency by _________________________________.
Client usually works as a ________________________________ and presently is _________ employed.

PRESENTING PROBLEM

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Client was interviewed __________ and the reliability of the data provided is rated ___________.

EMPLOYMENT

In the past client reports working as______________________________
______________________________________________________________________________
______________________________________________________________________________
FAMILY HISTORY

Client is ________________________________________________ born to ___________
______________________________________________________________________________
______________________________________________________________________________

Client has _______________ brother and ______________ sister.
______________________________________________________________________________

Client reports ______________ alcohol abuse in ___________________________________________________________________________
______________________________________________________________________________

Client reports ______________ history of depression in self ___________________________________________________________________

Client speaks of __________________________ mental illness in self/family, ____________
______________________________________________________________________________

There is ______ history of suicidal attempt/ideation _______________________________________________________________________

______________________________________________________________________________

CRIMINAL/LEGAL

Client reports ______________________ legal involvement.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Military/Security/Army/Navy

______________________________________________________________________________
PERSONAL HISTORY

Client was born ____________________________ raised in ________________
______________________________________________________________________________
______________________________________________________________________________

He reports ____________________________ significant developmental problems
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

He states ____________________________ difficulty making friends. ____________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

First romantic relationship was at age ______________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Client was _________________ married ________________________ at age ________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

EDUCATION

Client states education to _________________________________________________________

and states no desire to further his education. __________________________________________
MENTAL STATUS

Client was alert ___________ oriented x3 made _______ eye contact with the interviewer.

He appeared his stated age and was dressed, and groomed _________________________.

Attitude towards interviewer was ________________ Mood seemed _________________

affect _________________ and appropriate to speech content and/or situation.

Thought content was _________________ focused on ________________________________

_________________________________________________________

Speech was ___________________________. Client reports _______________ sleep

disturbance, admits to _________________________________.

appetite change in recent times. Memory appears to be _________________________________.

Attention/concentration seem _____________. Level of comprehension ________________.

Estimated level of intelligence ___________. Delusions/hallucinations ________________

There is no evidence of homicidal/suicidal ideation __________________________________

Insight and judgement are ________________________ however will require further evaluation.

PSYCHIATRIC HISTORY

States _________ history of being on supportive med’s

_________________________________________________________

_________________________________________________________

_________________________________________________________
SUBSTANCE ABUSE HISTORY

Client reports 1st use of ___________________________ at age ____________________.

Drag of choice is __________________________ and is used by ________________________.

Longest period of abstinence has been ________________. Client reports ______________ prior exposure to AA/NA _____________________________.

DIAGNOSTIC STATEMENT

AXIS:  I:

AXIS:  II:

AXIS:  III

AXIS:  IV   Acute event
          Enduring circumstances

AXIS:  V   Current GAF ________________ Past year ______________

RECOMMENDATIONS

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Aine Walsh
Coordinator/Brief Intervention Counsellor
Sample forms relating to referral, consent and discharge
Cabra Resource Centre
Referral – In Form

Date: __________________________
To: Cabra Resource Centre
67 Dowth Avenue
Cabra
Dublin 7
Tel-838 4377

From: Agency
Contact Person:
Tel No:

Re: _______________________________________
Client Name: _____________________________
Address: ________________________________
_____________________________________
Tel No: ________________________________

Service Needed
_____________________________________
_____________________________________
_____________________________________
_____________________________________
_____________________________________
_____________________________________
Cabra Resource Centre
Referral – Out Form

Cabra Resource Centre
67 Dowth Avenue
Cabra
Dublin 7
Tel 01-838 4377

Date:

Dear

The Cabra Resource Centre is introducing ______________________________________ to your services.

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

If you have any questions regarding this referral, please telephone at the above number.

Sincerely yours,
Aine Walsh

_________________
Co-ordinator/Brief Intervention Counsellor
Cabra Resource Centre

Consent to Participate in Treatment

I ___________________________________________ consent to receive treatment

in the form of individual, group, family, counselling, information and/or referral services at the

Cabra Resource Centre.

If I do not keep an appointment at the Cabra Resource Centre I give permission to my counsellor

_________________________ to contact me at Telephone No: _____________________ or,

Address: ______________________________________________________________________

______________________________________________________________________________

Signed ___________________________________________ Date ________________________

Witness __________________________________________ Date ________________________
Cabra Resource Centre

Discharge Summary

Date:

Name:

Address:

Tel No:

The above named attended the Cabra Resource Centre beginning _______________________.

He/she attended Cabra Resource Centre a total of _____________________________ sessions.

Client is now being discharged because ______________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
Cabra Resource Centre
Record Release of Information

I __________________________ hereby give permission to my counsellor, __________________________
to disclose information regarding my personal history, attendance, progress in treatment, ______________
to __________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

I understand the purpose of any disclosure is for my continued treatment progress.

I understand that I can revoke this permission at any time.

Signed ______________________________ Date __________________________

Witness ______________________________ Date __________________________