

NORTH DUBLIN CITY AND COUNTY
REGIONAL DRUGS TASK FORCE

Working collectively for a comprehensive response to
problematic drug use

STRATEGIC PLAN
2005-2008

December 2004

FOREWORD

Just over a year ago the Regional Drugs Task Force for Dublin North City and County was convened. From the outset it was clear that a large job of work lay ahead for the nominees from community, voluntary and statutory sectors, public representatives, and Local Drugs Task Forces.

Since 1997, Dublin North City and County had five Local Drugs Task Forces (LDTFs) operating with primary responsibility for the development and implementation of a local drugs strategy for their areas. Large parts of the North City and County were not served by a LDTF. The National Drugs Strategy (2001-2008) established a Regional Drugs Task Force to co-ordinate the development of drugs programmes and services in non-Local Drugs Task Force parts of the region.

I would like to take this opportunity to express my gratitude to the members of the task force for this tremendous input and commitment in agreeing the strategy. It is important to recognise that it would not have been possible to bring this work to completion without the excellent input of local communities, who participated so positively.

This strategy identifies guiding principles and first steps by which the business of the task force will be done over the next three years.

I believe that in coming years this strategy will be seen as marking a new era for the drugs focus in Dublin North City and County. I hope it will help sustain and strengthen a sense of shared purpose of all groups working together to resolve these issues.

Treat people as if they were what they ought to be and you help them to become what they are capable of being - Benjamin Franklin

Eleanor McEvoy

Chairperson

Regional Drugs Task Force, Dublin North City and County

BACKGROUND

The Dublin North City and County Regional Drugs Task Force (RDTF) was established in December 2003. The regional task force was assigned the responsibility for ensuring the development of a co-ordinated response to tackling the drug problem in the non - Local Drugs Task Forces (LDTF) parts of its region (appendix 1).

Regional Drugs Task Forces are the latest structure to be put in place to direct, support and resource the delivery of addiction services and community responses to problematic drug use, following a recommendation in the 2001-2008 National Drugs Strategy (NDS).

The current National Drugs Strategy evolved following the 1985-1996 National Co-ordinating Committee on Drugs Abuse, the first Ministerial Task Force on Drugs (1996) and the second Ministerial Task Force Report (1997)

The National Drugs Strategy approach to tackling the drug problem has developed around the four pillars of supply reduction, prevention, treatment and research. Central to the approach has been the bringing together of key agencies – both the statutory and community/voluntary – in a planned and co-ordinated manner, to develop a range of appropriate responses to tackle problem drug use.

The table below highlights the lead agencies and other key players:

Pillar	Lead Department/ Agency	Other Key Players
Supply Reduction	Dept. Justice, Equality & Law Reform An Garda Síochána Customs & Excise Services in the office of the Revenue Commission Prison Service Naval Services	Dept of Environment & Local Government Local Authorities LDTFs Community & Voluntary Sectors
Prevention	Dept. of Education & Science Dept. of Health & Children Regional Health Boards	An Garda Síochána LDTFs Community & Voluntary Sectors National Educational Welfare Board
Treatment	Dept. of Health & Children Regional Health Boards FAS	Prison Service Probation & Welfare Service LDTFs Community & Voluntary Sectors
Research	Health Research Board National Advisory Committee On Drugs (NACD)	LDTFs

To ensure co-ordination across the pillars the Government established the Cabinet Committee on Social Inclusion (appendix 2), the Inter Departmental Group (IDG) (appendix 3) and the National Drugs Strategy Team (NDST) (appendix 4).

In developing a new strategy for the period 2001-2008 the Review Group agreed to build on the solid foundation of the Ministerial Task Forces and recommended that the new strategy should endorse the existing approach and should expand on, and strengthen the pillars and the principles that underpin it. It should also be recognised there is widespread support for a fifth pillar, rehabilitation, which currently is succumbed under the treatment pillar.

The National Drugs Strategy's overall strategic objective is to...

"...significantly reduce the harm caused to individuals and society by the misuse of drugs through a concerted focus on supply reduction, prevention, treatment and research"

The overall strategic aims of the National Drugs Strategy are to:

- Reduce the availability of drugs
- Promote throughout society a greater awareness, understanding and clarity of the dangers of problem drug use
- Enable people with problem drug use to access treatment and other supports in order to re-integrate into society
- Reduce the risk behaviour associated with problem drug use
- Reduce the harm caused by problem drug use to individuals, families and communities
- Have valid, timely and comparable data on the extent and nature of problem drug use in Ireland, and
- Strengthen existing partnerships in and with communities and build new partnerships to tackle the problems of problem drug use.

INTRODUCTION TO THE CATCHMENT AREA

The catchment area for this planning exercise is defined as any area in North Dublin City or County not covered by the five Local Drug Task Forces (Ref map).

As there exists no current data specific to the Regional Drugs Task Force area, it is necessary to carry out primary research (e.g. surveys) to provide evidence to support detailed planning. The appropriate methods to be used will depend on which population group the RDTF is researching.

The RDTF requires current, small area information under the following headings

- Population
- Socio-Demographic Profile
- Accommodation
- Lone Parents
- Unemployment
- Education
- Early School Leaving
- Training and Education
- Socio Economic Profile
- Minority Groups
- Homelessness

The Northern Area Health Board recently completed a mapping exercise (Appendix 5) of all Addiction Services within its boundaries. This highlighted the fact that most addiction services are located within the LDTF areas. The Northern Area Health Board Addiction Services in the catchment area are

- Clinic in Swords (half day per week)
- Mobile Clinic
- Outreach Worker x 1
- Addiction Counsellor x 1
- Education Officer (shared with Finglas, Cabra, Blanchardstown) x 1

EXISTING LOCAL SMALL AREA DATA:

In January 2004 the Area Development Management (ADM) commissioned GAMMA to provide statistical information on each local area. The information presented by supplied on an aggregated Electoral Division format. The following Maps provide statistical reports on an illustrated geographic distribution.

Reports were generated for (i) Fingal County Council and (ii) Dublin City Council. Relevant Maps are reproduced exactly with the kind permission of GAMMA.

FINGAL:

In Fingal, Map 1.1 - Population Density - illustrates that the current high-density areas are Balbriggan, Skerries, Rush and Swords.

Comparing Fingal Map 1.1 with Map 1.3 – Percentage Population Change 1996-2002 - the rapid growth since 1996, is in excess of 15%, for these four areas is observed.

While Map 6.6 illustrates that the population high density areas of the Fingal have unemployment rates below the national average of 8.8, observation of Map 4.1 shows that there are many areas where the population has no formal education or primary education only, as a percent of population aged over 15 whose full-time education has ceased.

Map 8.2 illustrates the changes from 1991 – 2002 with respect to deprivation. While many areas have experienced improvements there have been a similar number of areas where the trend has been towards disimprovement.

DUBLIN CITY COUNCIL:

A similar exercise on Dublin City shows areas of high density in population in Map 1.1 with some decline in the density since 1996 in RDTF areas by comparison with LDTF areas as seen from Map 1.3.

Observation of lack of formal or primary education in Map 4.1 requires reading on an area-by-area basis and is somewhat inconclusive.

The RDTF EDs illustrate, for the most part, low rates of unemployment. This is in contrast to unemployment rates for LDTF areas.

Map 8.2 illustrates that much of the RDTF area has not fared well by comparison with LDTF areas with respect to relative deprivation since 1991.

SUMMARY

In summary, Fingal and Dublin City are undergoing very rapid change with in its EDs. Local population profiles require timely monitoring, on a small area basis, if accurate evidence is to be used to feed into the planning process. Traditionally substance misuse information has been gathered and reported by the boundaries of the former health boards. In Dublin North City and County task force area this high level data lacks focus and is therefore misleading.

THE REGIONAL DRUGS TASK FORCE

The Drugs Task Force brings together all the State agencies at a regional level involved in the field of problem drug use as well as the voluntary and community sectors.

The RDTF is responsible for putting in place a strategy to tackle problem drug use specifically in its region. In addition, it has an important role to play in the whole area of prevention and is responsible for identifying and addressing gaps in service provision.

The Purpose of the North City and County Regional Drugs Task Force

- The RDTF will fulfil its terms of reference as outlined by the NDST (appendix 6) by bringing people together, from within its catchment area, to co-ordinate responses to tackling the drug problem in Dublin North City and County region, excluding the LDTF areas.
- The RDTF will maintain an up-to date database on the nature and extent of problem drug use and provide information on drug-related services and resources in its region following the completion of the scoping exercise undertaken as part of the profiling of the region at the onset of the RDTF.
- The RDTF will base its work on evidence, which highlights the extent and location of problem drug use. Responses will be developed and regionally relevant policy proposals will be formed, in consultation with the NDST and LDTFs.
- The RDTF will promote research and models of effective practice, which send clear and consistent messages by tapping into the existing expertise or knowledge in communities. It will advocate on behalf of problematic drug users, their families and the community
- An overall role of the RDTF is that of developing and implementing community based initiatives to raise awareness. The RDTF will take a leading role where the infrastructure doesn't exist to develop such initiatives.

MEMBERSHIPS OF THE RDTF

The Dublin North City and County RDTF consist of senior representatives from all nominated agencies to ensure that members are capable of decision-making and influencing budgets. It includes an independent Chair, the Regional Drug Task Force coordinator (providing secretarial / administrative support) as well as representation from the following sectors:

- National Drugs Strategy Team
- Department of Education and Science;
- Revenue Commissioners - Customs and Excise Division;

- Public Representatives (nominated by Local Authority in accordance with normal procedures):
- Voluntary Sector;
- Community Sector;
- Area Based Partnerships.
- VEC;
- Health Board;
- Local Authorities;
- Garda Síochána;
- Probation and Welfare Service;
- FÁS;
- Local Drug Task Forces.

GUIDING PRINCIPLES AND VALUES

The key principles, which guide the operation of this strategy and underpin the RDTFs work, are outlined below. These principles are in line with the National Drugs Strategy.

Consultation

The RDTF will provide the opportunity for the community and voluntary sector, and those affected directly or indirectly by drug related issues to participate in the formulation of RDTF interventions, plans, and strategies through consultation processes which take regard of views, opinions, concerns, experiences and perspectives. The RDTF will ensure there are specific initiatives directed at the inclusion of groups such as Travellers, Homeless, Sex Workers and Immigrants. It is envisaged that the consultation processes will enhance acceptance and ownership of the initiatives, and to boost local support.

Quality of Access and Services

The RDTF will take a systematic targeted approach to the development of policies, services and projects under the four pillars of Prevention, Treatment, Supply and Research by developing appropriate responses and avoiding duplication while utilising and exploiting the expertise of the LDTFs. The RDTF is committed to the promotion, monitoring, evaluation and consistency of high standards of practice throughout its region.

Partnership

The RDTF will promote genuine collaborative working arrangements and the sharing of information and resources between all relevant statutory agencies, existing LDTFs, and voluntary and community groups. It will endeavour to work in partnership towards agreed goals and within clear processes of engagement and consultation among all the key players. Equality and inclusion will extend across the sector with equal parity for all voices.

Capacity Building

The RDTF is committed to providing capacity building opportunities that empower and enhance the participation of individuals and communities in the decision-making, planning and implementation of its work. By using a community development approach the RDTF can ensure, where it doesn't exist, that suitable infrastructure will be developed to support the direct work of initiatives undertaken.

Dissemination of Effective Models of Practice

The RDTF will identify effective working models locally, nationally and internationally to adapt them to particular needs by gathering evidence based research and information. The RDTF is committed to defining and promoting models of best practice within service provision and community based responses and resourcing new and innovative projects.

STRATEGIC OBJECTIVES

Organisational Development

To ensure the on-going development, sustainability and funding of the RDTF

Strategic Priorities

- Strengthen, resource and support the Regional Drugs Task Force
- Employment of a competent, committed and flexible staff team
- Establish an office base for the implementation of the work
- Ensure reflective management and operational procedures
- Monitor and evaluate the impact of the work

Target Groups

Develop a comprehensive response to problematic drug use, which will respond to needs of problem drugs users, their parents / families and the communities in which they live.

Strategic priorities

- Consultation and Inclusion
- Identification of real, as opposed to perceived, needs both for the individual and groups
- Develop appropriate treatment services, rehabilitation, and community based responses

The Pillars

Identify key strategies within the framework of the NDS pillars which will reduce the harm caused to individuals and society by problematic drug use through a concerted focus on supply reduction, prevention, treatment and research.

Strategic Priorities

- Identify key actions within each pillar
- Ensure that appropriate supports and resources are available to implement the agreed actions
- Link RDTF strategies and actions to the NDS

PRIORITY ACTIONS

The following actions have been identified following a consultation process, which took into consideration the views, opinions, expertise and experience of the Regional Drugs Task Force members and the community/voluntary sector.

The consultation process highlighted the current situation within the catchment area of the RDTF and endorsed the objectives of the National Drugs Strategy in relation to the Pillars. The process also highlighted the necessity for specific actions in relation to organisational development needs of the RDTF.

In order to fulfil its strategic objectives the RDTF has agreed the following actions for implementation.

1 ORGANISATIONAL DEVELOPMENT

Rationale

The purpose of this strategic objective is to ensure that the RDTF has the resources and capacity necessary to implement, monitor and support the actions under the various pillars.

- To develop the capacity of the RDTF to carry out its terms of reference of NDS
- To ensure the implementation of the strategic plan
- To establish effective and efficient operational structures

2 SUPPLY REDUCTION

Rationale

Supply reduction measures seek to significantly reduce the volume of illicit drugs, arrest the dynamic of existing markets and curtail the developments of new markets as they are identified. They also aim to reduce access to all drugs, in particular those drugs that cause most harm, among young people especially in those areas where misuse is most prevalent.

- To increase the level of personnel and resources available to An Garda Síochána within the RDTF area
- To establish and ensure a framework for drug policy development in each Garda area within the RDTF area

- Establishment of community policing and estate management fora to include feedback to the community from Garda, Customs and Excise and to ensure more involvement in law enforcement
- To support the call for an increase in personnel and resources within the Customs and Excise sector
- To support a coastal initiative by ensuring closer liaison between the Garda, Customs, fishing community, all sea farers, local authorities and naval services
- To seek greater community involvement in licensing renewal policies
- To answer calls for submission to significant bodies regarding supply reduction in the region

3 PREVENTION

Rationale

The need for greater societal awareness about drugs is a key factor of the prevention pillar. This strategy is committed to equipping young people and other vulnerable groups with the skills and supports necessary to make informed choices about their health, personal lives and social development. Support services are critical for parents, as they need to acquire knowledge and skills in order not to be left behind by the young people.

Education & Awareness

- To provide educational awareness and information initiatives within the catchment area which supports and resources a holistic approach to education awareness.
- To co-ordinate actions within pubs, off licences, cigarette companies, social clubs or other relevant bodies highlight awareness of drugs issues

Youth work provision

- To ensure the inclusion of the RDTF in the provision of accessible, positive alternatives for young people through the expansion of the new round of the Young People Facilities and Services Fund (YPFSF).
- Establish structures and procedures for the development and delivery of appropriate youth services/projects which promote a critical social education model of practice
- To support and resource the development of existing youth services in the area to establish appropriate responses to young people at risk.
- To divert young people under 18 away from the criminal justice system by establishing Garda Diversion Projects (GDP)

Parent / Family Support Services

- To develop new and innovative approaches to adult and parent education on good prevention practice in families and communities, and constantly improve these programmes through monitoring, research and evaluation.
- Develop parent and family support services
- Establish a Parents' Forum

Education and Awareness in Schools / Educational Centres

- To ensure the full implementation of the existing drug education policies within all schools and educational centres
- To seek the expansion of the National Education and Welfare Board, school completion programme and Boards of Management in the RDTF area
- To provide related training and awareness opportunities for school principals, Boards of Management, and Section 29 exclusion appeal Boards
- To promote the involvement of community groups in the delivery of schools drug education programmes e.g. Walk Tall and On My Own Two Feet.

Campaigns

- Implement an effective health promotion campaign to ensure continuous public awareness of alcohol and drug related issues
- To resource a programme of harm-reduction awareness promotion focusing on various drugs and aimed at various age, gender and ethnic/cultural groups
- To provide appropriate early Health Promotion interventions and campaign to curb the sale of alcohol to under age young people
- To devise implement and evaluate specific initiatives targeted at minority groups such as the Homeless, Travellers, Refugees, and Asylum seekers
- To increase the number of play grounds and facilities available to children and young people

TREATMENT

Rationale

The general thrust of this pillar is to encourage and enable persons dependant on drugs to avail of treatment with the aim of reducing dependency and improving overall health and social well being, with the ultimate aim of leading a drug free lifestyle. It also seeks to minimise the harm to those who continue to engage in drug taking activities that put them at risk

- Assist in the development and monitoring of trends, and maintain a focus on applying appropriate treatment responses including harm reduction service and outreach as needs arise, while promoting flexibility in service delivery
- Promoting equity of access to easy and equitable assessment, treatment and rehabilitation services across the entire region and the provision of an uninterrupted and integrated Care Plan
- Development of one stop addiction assessment and referral points (one per community care area)
- Promotion of standardised treatment infrastructure consisting of main treatment centre, satellite clinics and with particular emphasis on the network of community pharmacies and GPs per community care area
- Promote standard training in key work methodologies and care planning for all disciplines involved with service delivery.
- Integration of community based treatment services and prison based services to ensure seamless continuity of care on release
- Development of joint strategy with the Mental Health Service for the appropriate care of service users with both mental health and addiction issues to include dual diagnosis services in both Mental Health and Addiction services.
- Development of more comprehensive rehabilitation/integration services to ensure progression of service users in line with their aspirations
- Training in drugs awareness for professional bodies involved with the Courts system
- Development of more comprehensive service to address needs of service users with HIV/AIDS and Hepatitis C
- To ensure appropriate childcare provision for service users

- To support the participation of clients and families in the design and delivery of services

RESEARCH

Rationale

The research pillar seeks to compare data on the extent of drug misuse amongst the people in the region and especially amongst marginalised groups. The research will feed into quality initiatives, systems of monitoring and evaluation, be relevant and add value in addressing the drugs issue.

The overall aim is to gain greater understanding of the factors, which contribute to people and particularly young people misusing drugs. This process will link with existing national research and databases in order to avoid duplication of existing material.

- To undertake a comprehensive analysis of the gap areas and gather local information of drug prevalence in areas of high need not covered by LDTFs
- To establish evaluation and local data collection systems on local drug and alcohol use, drug related crime, service provision, policy development in schools and drug related death
- Prevalence and patterns of use among specific target groups e.g. homeless people, Travellers, Lesbian Gay Bisexual and Transgender young people, and children affected by problematic drug use

Appendix 1

LOCAL DRUGS TASK FORCES (LDTF)

The LDTFs were established in 1997 to facilitate a more effective response to the drug problem in the areas experiencing the highest levels of problem drug use. The Task Forces comprise a partnership between the statutory, voluntary and community services. They were mandated to prepare and oversee the implementation of action plans which co-ordinate all relevant drug programmes in their area and address gaps in provision

Terms of Reference

To oversee and monitor the implementation of projects approved under their existing action plan

To ensure the formal evaluation of these projects with a view to their 'mainstreaming', i.e. their continued funding through state agencies in accordance with agreed procedures

In accordance with agreed guidelines to prepare updated plans which:

- Update the area profile and take into account any changes in the drug problem since the preparation of the original plans;
- Ensure that emerging strategic issues are identified and policies or actions are proposed to address them; and
- Provide for the implementation of a local drugs strategy, in consultation with appropriate State Agencies and voluntary, community and residents groups;

To ensure appropriate representation by the voluntary and community sectors of the task force

To identify any barriers to the efficient working of the Task Force

To develop networking arrangements for the exchange of information and experience with other Task Forces, as well as for the dissemination of best practice;

To identify the training needs of Task Force members and take the necessary steps to meet such needs through appropriate training courses, etc.

To take account of and contribute to other initiatives aimed at tackling social disadvantage under the aegis of the Cabinet Committee on Social Exclusion, including the integrated Services Process, the Area Partnerships, the young People's Facilities and Services Fund and the Report of the Task Force on the Integration of the Local Government and Local Development systems; and

To provide such information, reports and proposal to the National Drugs Strategy Team as may be requested from time to time

Local Drugs Task Force in the Northern Area Health Board:

Task Force	Address	Co-ordinator	Chairperson
Ballymun	Axis Centre Ballymun D9 Tel: 01 8424630 Fax: 01 8832144	Hugh Greaves	Mick Cowman
Blanchardstown	22a Main Street Blanchardstown Dublin 15 Tel 01 860 4845 Fax 01 8604848	Joe Doyle	Derek Hanway
Dublin N.E.	Le Cheile Donnycarney Collins Avenue Dublin 5 Tel. 01 8465070	Sinead Wiley	George Ryan
Finglas/Cabra	Tolco Clinic Broom Bridge Dublin 11 Tel 8307440	John Bennett	Joey Furlong
North Inner City	22 Lower Buckingham St. Dublin 1 Tel 8366592	Mel Mac Giobuin	Maureen Sullivan

Appendix 2

CABINET COMMITTEE ON SOCIAL INCLUSION

The Cabinet sub-committee on Social Inclusion is chaired by the Taoiseach and comprises the Tanaiste and relevant Ministers. The Local Development and Drugs Strategy unit in the Dept of Community, Rural and Gaeltacht Affairs regularly reports to the committee, through the Minister of State, on the implementation of the National Drugs Strategy and the RAPID (Revitalising Areas by Planning, Investment and Development) programmes.

The meetings provide an opportunity to review trends, assess progress in relevant strategies and progress and resolve any policy and organisational issues, which may arise.

Appendix 3

INTER-DEPARTMENTAL GROUP ON DRUGS (IDG)

The IDG is chaired by the Minister of State at the Department of Community Rural and the Gaeltacht Affairs. This group ensures greater co-operation and helps to maintain an effective communication between the IDG and the Cabinet Sub Committee. The IDG holds regular joint meetings with the NDST to contribute to the effective and efficient delivery of the National Drugs Strategy

The Terms of Reference of the IDG

- Advising the Cabinet Sub-committee on critical matters of a public policy nature relating to the National Drugs Strategy
- Ensuring the timely and effective input of relevant Departments and agencies into any emerging operational difficulties or conflicts in relation to the implementation of national drug policy; and
- Approving the plans and the initiatives of the Local Drug Task Forces (LDTFs) and the Regional Drug Task Forces (RDTFs) and monitoring and evaluating the outcomes of their implementation through joint meetings with the NDST.

In conjunction with the NDST

- To review the membership of the Team, every two years in order to ensure that all relevant interests are represented
- To review the workload of the NDST and satisfy itself that the level of support is adequate to carry out its terms of reference.

Appendix 4

NATIONAL DRUGS STRATEGY TEAM

The National Drugs Strategy Team was established as a cross-departmental team of the type envisaged in the SMI (Strategic Management Initiative in the Public Services). The team comprises experienced personnel from relevant Department and Agencies. The inclusion of one person from each of the voluntary and community sectors, who bring their extensive knowledge and experience of the drug problem, to the team's work also represents a partnership between the statutory, voluntary and community sectors and works exclusively on a basis of consensus.

Terms of Reference

- To ensure that there is effective co-ordination between Government Departments and State Agencies in implementing the Government drugs strategy

In relation to the Local Drugs Task Force

- To oversee their establishment and assist them in their work on an ongoing basis,
- To draw up guidelines to assist them in preparing their action plans,
- To evaluate their plans, when submitted, and make recommendation to the Cabinet Committee on Social Inclusion regarding the allocation of funding to support their implementation,
- To monitor development at local level, ensuring that the problems and priorities of communities are being addressed at central level,
- To contribute to the development of Government policy on Drugs.

A liaison person from the NDST is assigned to each LDTF to maintain the effective relationship between the NDST and the LDTFs

The following Departments/Agencies/Sectors are represented on the National Drugs Strategy Team

Dept of Community, Rural and Gaeltacht Affairs

Dept of Health & Children

Dept of Justice, Equality & Law Reform

Dept of Education and Science

Dept of Tourism, Sport and Recreation

Eastern Regional Health Authority

An Garda Síochána

FAS, and

One person each from the Voluntary and Community sectors

Appendix 5

ADDICTION SERVICES SECTOR TEAM

Sector Team	Location
Clinical Director, NAHB Addiction Services/Consultant Psychiatrist in Substance Misuse	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
Clinical Director/Consultant Psychiatrist in Substance Misuse	Trinity Court, 30-31 Pearse Street, Dublin 7
Director Of Mental Health & Addiction Name: Mr Tony Leahy	NAHB Swords Business Campus, Balheary Road, Swords Co. Dublin
Area Operation Manager Name: Gerry Reid	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
Grade VII Name: Marian Harkin	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
Deputy Areas Operation Manager	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
Liaison Pharmacist Name: Nihal Zayed	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
GP Coordinators	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
Nurse Managers Name: Mary Fanning & Áine Hall	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.
	Domville House Ballymun Road Dublin 11
General Assistants	NAHB Addiction Services, 2nd Floor, Phibsboro Tower, Dublin 7.

Administration

NAHB Addiction Services,
2nd Floor, Phibsboro Tower,
Dublin 7.

TREATMENT CENTRES & CLINICS

Note Treatment Centre are highlighted in bold

Name and address of Clinic

Details

City Clinic

Mon-Fri: 9.00-5.00pm, 5pm-7.00pm

Amiens Street

Sat: 9.00-12.30pm

Dublin 1

Sun & B/H 9.00-1.30(108) 9.00-12.30pm (109)

Dispense times:

Mon-Fri 9.00-12.00pm & 2.30-6.30pm

Sat, Sun, B/H 9.30-12noon

Thompson Centre

Mon- Wed: 9.30-1.00pm, 2.00-5.00pm

Thurs: 9.30-1.00pm, 2.00-8.00pm

Fri: 9.30-1.00pm

Buckingham Street

Wed: 8.00-10.30am, 4.00-6.30pm

Domville House

Mon-Fri: 9.00-5.00pm, 5.00-7.00pm

Ballymun Road

Sat: 9.00-12.00pm

Dublin 11

Sun & B/H 9.00-12.00pm

Tel:01 8690298

Dispense times:

Mon-Fri: 9.00-12.00 noon, 2.00-3.30pm,5.00-6.30pm

Sat, Sun & B/H: 9.30-11.30am

Mobile Bus (Ballymun)

Mon-Fri, Sat, Sun & B/H 12.30-1.30pm

The Mews

Mon-Fri 9.00-12.00pm

224 North Circular Road

Wednesday evening only 4.00-7.00pm

Dublin 7

Sat, Sun & B/H 9.00-12.00 noon

Tel: 01 8383852

Dispense times:

Mon, Tues, Thurs, Fri 9.00-12.00 noon

Wed 2.00-3.30, 5.00-6.30pm

Sat, Sun & B/H 9.00-11.30

Wellmount Health Centre Wellmount Park Finglas Dublin 11 TEL: 01 8346119	Mon-Fri: 5.00-7.00pm Sat, Sun & B/H 9.00-11.00am Dispense times: Mon- Fri 5.15-6.30pm Sat, Sun & BH 9.00-10.30am
Tolco Clinic (Cabra) 121 Broombridge Close Ballyboggin Road Dublin 11 Tel: 01 8307051	Wed 11.00-1.00pm, Fri: 11.30-1.30pm Dispense time: Mon, Tues, Thurs, Fri 2.00-3.30pm Wed 11.00-1.00pm Sat, Sun & B/H 9.30-10.30am
Barry Centre	Mon-Fri 9.00-5.00pm
Beldale View Darndale Belcamp Lane Darndale Dublin 17 Tel: 8488951	Mon-Fri 9.00-12.00 noon, 2.30-4.00pm Dispense times: Mon-Fri 9.00-12.00 noon Sat, Sun, B/H 9.30-10.30
Bonnybrook	Wednesday 2.00-4.00pm Friday 10.00-11.30am
Coolock	Monday 10.00-12.00 noon Wednesday 8.00-9.30
Donnycarney	Monday 1.30-3.00pm Wednesday 10.00-12.00 noon Thursday 9.30-11.00
Edenmore	Friday 8.00-10.00am
Howth	Wednesday 5.00-7.00pm
Kilbarrack	Tuesday 9.30-12.30pm Friday 9.30-12.30pm 2.00-5.00pm
Swords	Monday 5.00-7.30pm
Mobile Bus – Dr Steeven’s	Mon-Fri 9.45- 10.45am Sat, Sun & B/H 9.45- 10.45am
Empress Place	Mon-Fri 11.15-12.00 noon (WHP Driver 5.45-8.15pm WHP GA 6.00-8.00pm) Sat, Sun & B/H 11.15-12.00 noon (WHP Driver 5.45-8.15pm WHP GA

6.00-8.00pm)

Mountview Health Centre

Mon, Tues, Thurs 5.00-7.00pm

Grounds of JCM

Mon-Fri 2.00-4.00pm

Sat, Sun & B/H 2.00-3.00pm

Corduff

Friday 2.00-5.00pm

Mulhuddart

Mon 2.00-4.00pm

COUNSELLING SERVICES / SESSIONS AREAS 7 AND 8

Clinic	Days / Times
City Clinic	Mon – Fri: 9.00 am – 7.00 pm
Buckingham Street (Cocaine Clinic)	Thurs: 2.00 pm – 4.30 pm
Domville House	Mon – Fri: 9.00 am – 7.00 pm
Darndale	Mon: 2.00 pm – 5.00 pm Tues: 9.00 am – 5.00 pm Wed: 9.00 am – 5.00 pm
Edenmore	Mon – Fri: 9.00 am – 5.00 pm
Howth	Wed: 5.00 pm – 7.00 pm
Coolock	Mon: 10.00 am – 12.00 noon Wed: 8.00 am – 9.30 am
Swords (Clinic)	Mon: 5.00 pm – 7.00 pm
Swords/Balbriggan/Lusk/Rush	<i>New 3 day service commencing. Awaiting confirmation of office accommodation to see clients</i>
Kilbarrack	Mon/Tues/Thurs: 9.00 am – 5.00 pm Wed: 9.00 am – 1.00 pm Fri: 12.00 noon – 5.00 pm
Bonnybrook	Wed: 2.00 pm – 4.00 pm Fri: 10.00 am – 11.30 am
Phibsboro	<i>By appointment only</i>

OUTREACH WORKERS

Outreach Worker	Areas Covered.
Henry Magee	Swords, North Fingal including Rush, Lusk, Skerries, Balbriggan
Jeff Moore	Coolock, Artane, Donnycarney
John Kelly	Kilbarrack, Howth, Baldoyle
Dympna Davitt	Raheny, Edenmore, Donaghmede
Robert Corwell	Ballymun, Poppintree, Santry
Olive Wallace	Ballymun, Poppintree, Santry
Anne Hanney	Finglas, St Margaret's.
Kieran Howley	Cabra, Navan rd
Robbie Fulham	North Inner City
Geraldine Condron	North Inner City
Saoirse Gallagher	Dublin 15
Martina Kenna	Dublin 15
Caitriona Brady (assisted by Jeff Moore and Dympna Davitt)	Darndale, Belcamp, Moatview, Malahide, Portmarnock.

Needle Exchange Location and Times

DAY	Location	TIME
Monday	Howth HC	2.15 – 4.30pm
Mobile clinic Mon-Fri	Empress Place/Ballymun.	10.45am – 1.30pm
Tuesday	Summerhill HC	2.15 – 4.30pm
	Ballymun HC	6.00 – 8.30pm
	Clancy Nightshelter	7.00 – 8.30pm
Wednesday	Mountview CDT	6.00 – 8.00pm
	Chrysalis, Benburb St	6.00 – 9.00pm
Thursday	Corduff HC, Blanchardstown	5.30 – 7.30pm
Friday	Clancy Nightshelter	8.00 – 9.30am
	Mountview CDT	12.00 – 2.00pm
	Northstrand HC	2.15 – 4.30pm
	Wellmount HC	2.15 – 4.30

REHABILITATION/INTEGRATION SERVICES

Ballymun RIS,

The Axis Centre,
Ballymun,
Dublin 11

Team Manager: Rita Smith

R/I workers: Richard Brennan &
Helene Costigan

Tel- 01 8832107

Fax- 01 8832101

Service Mobile- 086. 3835 069

Tel: 087. 6623 373

Coolock RIS,

Coolock Health Centre,
Cromcastle Road,
Coolock,
Dublin 5

Team Manager: Rita Smith,

R/I Workers: Tony Stafford &
Martina Mc Goldrick

Tel- 8487665

Fax- 8479593

Service Mobile- 087. 2425 653

Tel: 087. 6623 373

Blanchardstown RIS

22A Main Street,
Blanchardstown,
Dublin 15

Team Manager: Niamh Moynihan,

R/I Workers Johanna Ivors &
Vincent Grace

Tel- 8604841/2

Fax 8604848

Service Mobile- 087. 2394 559

Tel: 8604840

North Inner City RIS

42c Lower Buckingham Street
Dublin 1

Team Manager: John Mc Ginley

R/I Workers Ann Marie Talbot &
Michéal Durcan

Tel: 8762610

Tel: 8762609

Service Mobile- 086. 3805 407

Tel: 086. 3835 049

Finglas/ Cabra RIS,

NAHB Tolco Satellite Centre,
121 Broombridge Close
Ballyboggan Road,
Dublin 11

Team Manager: John Mc Ginley

R/I Workers: Jim Doherty

Tel: 8307463

Fax:

Service Mobile- 086. 3835 059

Tel: 086. 3835 049

RIS staff operate office hours as follows: - Monday to Thursday: 9am to 5pm,
Friday: 9am to 3.45pm (closed Monday to Friday 1pm to 2pm for lunch).

Appendix 6

REGIONAL DRUGS TASK FORCE

The terms of reference for the RDTFs as set out in the National Drugs Strategy are as follows:

- to ensure the development of a co-ordinated and integrated response to tackling the drugs problem in their region;
- to create and maintain an up-to date database on the nature and extent of problem drug use and to provide information on drug-related services and resources in the region;
- to identify and address gaps in service provision having regard to evidence available on the extent and specific location of problem drug use in the region;
- to prepare a development plan to respond to regional problem drug use issues for assessment by the NDST and approval by the IDG;
- to provide information and regular reports to the NDST in the format and frequency requested by the Team; and
- to develop regionally relevant policy proposals, in consultation with the NDST.

GLOSSARY

IDG	Inter Departmental Group
LDTF	Local Drugs Task Force
LGBT	Lesbian Gay Bisexual Transgender
NDS	National Drugs Strategy
NDST	National Drugs Strategy Team
RAPID	Revitalising Areas by Planning, Investment and Development
RDTF	Regional Drugs Task Force
SMI	Social Inclusion Measures
VEC	Vocational Education Committee
YPFSF	Young Persons Facilities and Services Fund

REGIONAL DRUGS TASK FORCE

Strategic Plan 2005-2008

**Working collectively for a comprehensive response to
problematic drug use**

Implementation plan

Presented to the RDTF

December 04

Implementation measures for North Dublin City and County Regional Drugs Task Force's Strategic Plan 2005-2008

ORGANISATIONAL DEVELOPMENT

No.	Agency	Action	Year 1	Year 2	Year 3	Outcome
1	RDTF	To develop the capacity of the RDTF to carry out its terms of reference of NDS Links to Action 92 of NDS	-Consolidate membership -Co-ordination -Establish a base Early 2004	Support and resource RDTF	Consolidation & evaluation	Effective working of terms of reference by the membership
2	RDTF	To ensure the implementation of the strategic plan	-Employment of a development team Mid 2004	-supporting the capacity of local groups to implement aspects of the plan	Consolidation & evaluation	RDTF fulfilling its Strategic objectives
3	RDTF	To establish effective and efficient operational structures	Explore options Agree working systems Early 2004	-Effective and efficient structures and procedures	Consolidation & evaluation	Structures and procedures in place

SUPPLY REDUCTION

No.	Agency	Action	Year 1	Year 2	Year 3	Outcome
4	RDTF & Garda	To increase the level of personnel and resources available to the Garda within the RDTF area Links to Action 7 of the NDS	RDTF (particularly community reps) work with elected reps to increase policing lines in line with increasing population trends.	Formally ask elected representatives to take this on and report to RDTF (On-going)	Consolidation & evaluation	Garda presences in RDTF areas increased More resources made available to specifically tackle problematic drugs use
5	Garda & RDTF	To establish and ensure a framework for drug policy development in each Garda area within the RDTF area Links to Action 8 of the NDS	To promote, support and resource the Garda in drawing up its drugs policy	Co-ordinated approach across the region	Consolidation & evaluation	Garda policy in place
6	Local Authority Garda Residents RDTF	Establishment of community policing and estate management fora to include feedback to the community from Garda and customs and excise and ensure more involvement in law enforcement Links to Actions 5, 9 & 11 of the NDS	-Needs assessment -Support capacity of communities to participate -Ensure the identification of illicit drug dealers in the RDTF areas	-Act on findings of assessment -consolidate capacity building -ensure appropriate actions are taken regarding small and big time dealers	Consolidation and evaluation	Fora established Increased capacity in RDTF areas to address supply issues in their area

7	Customs and Excise & RDTF	To support the call for an increase in personnel and resources within Customs and Excise Links to Actions 14-18 of the NDS	-Highlight the significant passenger manifest in the RDTF area	Make submissions to increase personnel and resources	Consolidation and evaluation	Increased surveillance of local criminals Effective policing of airports, ports and route ways within the region
8	RDTF Customs and Excise Revenue Garda	Coastal Initiative - To ensure close liaison between the Garda, customs, fishing community, all sea farers, local authorities and naval services Links to Actions 15 of the NDS	-Awareness raising (publicity) -Endorsing on-going liaison work -campaign asking all sectors to cooperate	Maintain the workload from year one Respond to local needs	Consolidation and evaluation	Reduction in the importation of drugs through the coast
9	Garda Dept of Justice & Regional Drugs Task Force	To seek greater community involvement in Licensing renewal policies Links to Action 28 of NDS	-Reviewing licensing policies & procedures	-Submissions to the redrafting of legislation	Consolidation and evaluation	Local community & Garda more say in Licensing
10	RDTF	To answer calls for submission to significant bodies regarding supply reduction in the region	-Garda bill -Lord Mayors commission -Drug Courts -Arrest referrals	Respond as required	Consolidation and evaluation	Submissions made

PREVENTION

No.	Agency	Action	Year 1	Year 2	Year 3	Outcome
11	RDTF NAHB	<p>Education & Awareness To provide educational awareness & information initiatives within the catchment area which support and resource a holistic approach to education awareness.</p> <p>Linked to Actions 29 to 39 of the NDS</p>	<p>-Seek end of embargo on Education officers</p> <p>-Employment of additional education staff in RDTF area</p> <p>- To ensure information & education on drugs and alcohol are accessibility to target different groups like Travellers, asylum seekers, Refugees, LGBT Young people</p>	Education and awareness programmes devised and delivered	Consolidation and evaluation	<p>-Education workers employed</p> <p>-Increased awareness re drug and alcohol misuse in both the formal and the informal education settings</p> <p>-Target groups informed re the issues of alcohol & drugs misuse.</p>
12	Dept Educ & Science VEC YPFSF RDTF	<p>Youth work provision To ensure the inclusion of the RDTF areas in the provision of accessible, positive alternatives for young people through the expansion of the new round of YPFSF</p> <p>Establish structures, policies and procedures for the development and deliver of appropriate youth services/projects</p>	<p>-Campaign for YPFSF expansion</p> <p>- Survey the provision of youth work in the catchment areas</p> <p>-support the capacity of local communities to respond to youth need</p>	<p>-Establish projects working within priority areas</p> <p>-Support and resource policy development</p>	Consolidation and evaluation	<p>Youth services and facilities offering critical social educational model of practice at appropriate times for young people (i.e. evening provision)</p> <p>Policy</p>

		Linked to Action 3 of the NDS	<ul style="list-style-type: none"> -Needs assessment -Outreach & research -Programme & project development 	Training youth leaders		development undertaken across the region
13	RDTF Comm/Vol sector	<p>Parent Support Services To develop new and innovative approaches to adult and parent education on good prevention practice in families and communities, and constantly improve these programmes through monitoring, research and evaluation.</p> <p>Develop parent and family support services</p> <p>Establish a parents forum</p> <p>Linked to Actions 34 & 35 of NDS</p>	<ul style="list-style-type: none"> -Needs assessment -Outreach work -Consultation -research into new approaches - Community drug education providers to encourage parental/family participation in education & information programmes. 	-development of family support services which includes courses, counselling, parents forum, education and information programmes -family supports services to include grandparents	Consolidation and evaluation	<ul style="list-style-type: none"> -Family services and supports -Active parents forum -education and awareness programmes in place
14	RDTF Dept of Education and Science	<p>Education and Awareness in Schools To ensure the implementation of the existing drug education policy within schools</p>	<ul style="list-style-type: none"> -call for... -Resources -Staff -Finances -Training -SHPE 	<ul style="list-style-type: none"> -Ensure capacity of schools to deliver through training -Provide training 	Consolidation and evaluation	-Each school in the area will have a Substance Use Policy and a proper implementation of

		<p>To seek the expansion of the education and welfare board, school completion programme and exclusion appeals Board in to RDTF area</p> <p>To promote the involvement of community groups in the delivery of schools drug education programmes e.g. Walk Tall and On my Own Two Feet.</p> <p>Linked to Actions 29-34 of NDS</p>	<p>-Support schools to not exclude drugs user</p> <p>-explore community/school partnership opportunities</p>	<p>to principals and Appeals Board on not excluding drug users</p> <p>-collaboration between schools and communities in delivering programmes</p>		<p>the SPHE curriculum.</p> <p>-Increased awareness of needs of school going problem drug users</p> <p>-Schools and communities working together</p>
15	RDTF	<p>Campaigns</p> <p>Implement an effective health promotion campaign to ensure continuous public awareness of alcohol and drug related issues</p> <p>To resource a programme of harm-reduction awareness promotion focusing on various drugs and aimed at various age, gender and ethnic/cultural groups</p> <p>To provide appropriate early interventions and campaign to curb the sale of alcohol to under age young people</p> <p>Linked to actions 19, 38 & 98 of NDS</p>	<p>To develop a campaign strategy for the RDTF following research, consultation</p> <p>-To produce and provide information leaflets that take into account the different needs e.g. non nationals and ensure materials are provided in different languages</p>	<p>Deliver a high profile Media campaign to include talks in schools given by pop stars, sports personalities and recovering problem drug users</p>	<p>Consolidate and evaluate</p>	<p>Successful campaigns to combat problematic drug use</p> <p>Targeted programmes</p>

16	RDTF & Service providers	To devise, implement & evaluate specific prevention initiatives targeted at the Homeless, Travellers, LGBT youth Linked to Action 98 of NDS	Consult service providers Needs assessment Devise strategy	Implement initiatives, programmes and services	Consolidation and evaluation	Projects and programmes in place to address specific needs
17	Local authority RDTF Comm./Vol sector	To increase the number of play grounds and facilities available to children and young people	Research Highlight priority areas	Plans for new play grounds	Consolidation and evaluation	Play grounds & facilities
18	Dept of Justice RDTF Probation & Welfare Comm/Vol sector	Garda Diversion Projects (GDP) To divert young people under 18 away from the criminal justice system	Needs assessment	To set up GDP in areas where a need can be established	Consolidation & evaluation	Projects established

TREATMENT

No.	Agency	Action	Year 1	Year 2	Year 3	Outcome
19	NAHB RDTF	<p>Assist in the development and monitoring of trends and a focus on applying appropriate treatment responses as needs arise while promoting flexibility in service delivery.</p> <p>Linked to Actions 44-66 in NDS</p>	<p>-Needs assessment and trends</p> <p>-Identify issues and blocks to development services and expansion of services</p> <p>-Devise strategy for establishment of services</p>	<p>-Flexible service deliver</p> <p>-Consultation with the community regarding the location of services</p>	Consolidation and evaluation	Communities consulted and services prioritised and delivered in response to needs
20	NAHB FAS RDTF	<p>Promoting equity of access to assessment, treatment and rehabilitation services across the entire region and the uninterrupted continuation of services when a service user moves location</p> <p>Linked to Actions 44-66 in NDS</p>	<p>Working with LDTFs to review the boundaries in cases of significant need.</p> <p>- Address the specific needs of inclusion of Travellers, Homeless, Refugees, asylum seekers, LGBT youth</p>	Access to assessment, treatment and services	Consolidation and evaluation	<p>Boundaries redefined</p> <p>Specific initiatives in place to address minority group/s needs</p>

21	NAHB RDTF	Promotion of standardised treatment infrastructure consisting of main treatment centre, satellite clinics and network of community pharmacies and GPs per community care area Linked to Actions 44-66 in NDS	Delivery of services with available on an extended hours basis to meet needs of presenting service users in employment and an increase in capacity to meet needs of areas not currently receiving local service.	On-going	Consolidation and evaluation	Infrastructure standardised Operating structures in place
22	NAHB RDTF	Development of one stop addiction assessment and referral points (one per community care area) Linked to Actions 44-66 in NDS	Devise strategy & implementation	On-going	Consolidation and evaluation	One stop shop in each community care area
23	NAHB RDTF Probation and Welfare Comm/Vol Sector	Integration of community based treatment services and prison based services to ensure seamless continuity of care on release Linked to Actions 44-66 in NDS	-Identify community service providers Networking	-Establishing mechanism for integration	Consolidation and evaluation	Service users accessing facilities and projects more easily

24	NAHB RDTF	Development of joint strategy with Mental Health Service for the appropriate care of service users with both mental health and addiction issues to include dual diagnosis services in both Mental Health and Addiction services. Linked to Actions 44-66 in NDS	Establish contact with Mental Health services Explore shared needs through	Devise joint initiatives	Consolidation and evaluation	Dual diagnosis services in place Research reviewed
25	NAHB RDTF FAS Comm/Vol sector	Development of more comprehensive rehabilitation/integration services to ensure progression of service users in line with their aspirations Linked to Actions 44-66 in NDS	Review needs and current best practice models to develop innovative responses to needs	On-going	Consolidation and evaluation	Comprehensive rehabilitation and integration services in place
26	NAHB RDTF Comm/Vol sector	Review the evaluation of the Drug Treatment Court and implementation of recommendations from the evaluation. Training in drugs awareness for professional bodies involved with Drug Treatment Courts Linked to Actions 44-66 in NDS	Highlight content of evaluation Implement findings -consultation -Buying in & ownership of the process	On-going Drawing up programme and offering it Delivering of training	Consolidation and evaluation Consolidation and evaluation	Recommendations implemented Clear understanding and consistency in policies

27	NAHB LA Comm/Vol sector Dept Educ & Science	To ensure appropriate childcare provision for service users Linked to Actions 54 in NDS	Needs assessment	Provided within the context of action 54 of NDS	Consolidation and evaluation	
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RESEARCH

No.	Agency	Action	Year 1	Year 2	Year 3	Outcome
28	RDTF	To undertake a comprehensive analysis of the 'gap area's and gather local information of drug prevalence in Balbriggan, Lusk, Rush, Swords, Skerries and Donabate Linked to actions 98-100 in NDS	-Employ a Research officer to conduct specific pieces of research i.e. Poly drug use, cocaine, opiate crossover.	Presentation of findings Formulation of recommendations	Implementation of recommendations	Analysis of gap areas Recommendations from research informs service plans, project development and policy
29	RDTF & Service providers	To establish reporting and local data collection systems on local drug and alcohol use, drug related crime, service provision, policy development in schools and drug related death Linked to actions 98-100 in NDS	-research effective data collection systems -implement system across the region -link with national and international systems	Collection of data and statistics Presentation of findings Review trends Formulation of recommendations	Consolidate and evaluate	Reporting system and data collection processes in place Recommendations from research informs service plans, project development and policy

30	RDTF & Service providers	<p>Prevalence and patterns of use among specific target groups e.g. homeless people, Travellers, LGBT young people and the effects of problematic drug use on children</p> <p>Linked to actions 98-100 in NDS</p>	<p>-establish research fund -Commission pieces of research</p>	<p>Presentation of findings Formulation of recommendations</p>	<p>Implementation of recommendations</p>	<p>Specific target groups' patterns and prevalence identified Recommendations from research informs service plans, project development and policy</p>
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