

# *East Coast Regional Drugs and Alcohol Task Force*



Figure 1: Glendalough, Co. Wicklow

## *Annual Report 2015*

*Tá Tascfhórsa Réigiúnach an Chósta Thoir um Dhrugaí agus Alcól i bhfeidhm sa phobal chum tabhairt faoi fhadhbanna drugaí, alcól san áireamh, i gceantair Baile Átha Cliath Theas, Baile Átha Cliath Thiar-Theas agus Cill Mhantáin"*



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## Summary Page

### Overall Drug Usage in the East Coast Region

- Alcohol remains the most widely used drug to those seeking assistance across the region
- Increase in the prevalence of underage drinking and cannabis use is widely reported
- High levels of continuous drinking in the home linked to altered perception to the point of normalisation in some families
- Still strong demand for equipment for smoking and injecting of opiates primarily
- High levels of benzodiazepines usage still reported across all services
- Most drug user deaths in the region are by poisoning

### Emerging Trends in the East Coast Region

- Increase in behavioural issues linked to drugs and alcohol use in young people and their families
- Increase in those seeking support who have been affected by a family member or partner's alcohol or drug use
- Increase in HIV rates in the East Coast Region
- Increase in steroid injecting linked to gyms and body building events
- Use of the internet for ordering of drugs is widely reported
- Some increased reports of the re-emergence of Ecstasy
- Concerns regarding the use of Melanotan and slimming pills among Traveller groups
- Increase in drug related intimidation of both drug users and their families linked to higher levels of direct threats and beatings, in some instances
- Issue of dual diagnosis (mental health and addiction coexisting) having difficulties accessing combined or linked services
- Situated between Dublin and Wexford ports and with proximity to Dublin, reports of larger scale illegal drug activity in the region
- Shortage of homeless shelters and service provision in the region and difficulty, without housing issues addressed, to address any coexisting addiction issues

### Specific New Initiatives 2015

- Information Hub with community consultation and project presentation of services
- Targeted inputs in specific areas of concern and disadvantage across both urban and rural communities
- Focus on interagency and multi-agency delivered initiatives
- Review and development of Operational Handbook
- Enhanced presence of regional bodies, agencies and groups working in linked services
- Service User Involvement - development of participant groups
- Review of overall Task Force Governance commenced



## Overview of the East Coast Region

The East Coast Regional Drug and Alcohol Task Force [ECR DATF] covers the outline area that the HSE now designates as Community Healthcare Organisation Area 6 [CHO-6]. The population is recorded as 364,464 persons from the most recent population census in 2011 (HSE, 2014). As with the other nine Regional DATFs, the East Coast Regional was established and given terms of reference by Actions [NDS 92-97] of the National Drug Strategy 2001-2008 and was effectively convened in 2003. However, fourteen separate Local DATFs had already been established by national policy at that time. Specific to this region, two Local DATFs have their local areas within this boundary and, by arrangement, this Regional DATF takes responsibility for any and all areas within CHO-6 but outside the remit of these two Local DATFs.

Within this Regional boundary area, Bray Local DATF comprises the town lands of Bray and Kilmacanogue with a population of 31,782 (Census, 2011a). The Dún Laoghaire-Rathdown Local DATF is also within the boundary but their coverage is somewhat unclear. The entire area covered by this Task Force is mapped against the original areas allocated to the Southside Partnership and comprises 21 neighbourhoods designated disadvantaged across the Dún Laoghaire-Rathdown County Council area. The entire population of Dún Laoghaire-Rathdown is easily ascertained by the latest available census data as 206,261 (Census, 2011b). The Dún Laoghaire-Rathdown Local DATF remit is only a proportion of this but exact figures are proving difficult to establish.

The East Coast Regional DATF boundary crosses 3 distinct County Council boundaries, namely Dublin City Council, Dún Laoghaire-Rathdown Council Council and Wicklow County Council. Each Council has established their own Strategies and Plan independently.

Three separate and distinct Education and Training Boards [ETBs] all have partially coverage of geographical areas within the ECR DATF boundary. These are each an amalgamation of a number of older VECs structures and are now designated City of Dublin ETB; Co. Dublin and Dún Laoghaire ETB; and Kildare and Wicklow ETB.

From a Garda Divisional boundary perspective, the East Coast Regional crosses with parts of 2 Garda Regions, namely the Garda Dublin Metropolitan Region and the Garda Eastern Region.

Túsla, The Child and Family Agency has been established since January 1<sup>st</sup> 2014 following a separation of specific social care services for children and families from the remit of the HSE. The boundaries of Túsla services closely resemble the HSE and thus, an Area Manager oversees all such services in the Integrated Services Area which is aligned to CHO-6 as described above.

The East Coast Regional DATF boundary primarily crosses at least 3 distinct Partnership areas namely Bray, Southside and County Wicklow Partnership. Some of the other Dublin Partnerships also geographically cover some of this Task Force Region. As stated, Southside Partnership is aligned to the Dún Laoghaire-Rathdown Local DATF but boundaries for Bray and County Wicklow Partnership have been realigned and thus, connections with both need to be established and maintained.

## Drug Related Treatment in the East Coast Region

An exact figure for illicit drug use in any specific region is difficult to source. However, the Task Force is informed in its work by a number of statistical data tables collated by the various agencies. Each source identifies a piece of the whole picture with inherently different capture criteria and limitations. Nonetheless, these sources need to be considered together to make an attempt to quantify the overall illicit drug usage and/or drugs and alcohol related problems in this region.

The Irish [Central Treatment List \[CTL\]](#) has been established by legislation to register all clients in medical drug substitution treatment nationally and this register is controlled by the National Drug Treatment Centre [NDTC] on Pearse Street in Dublin 2. Data from this source (HSE, 2016a) shows that 5350 individual clients with addresses across the entire HSE Dublin Mid-Leinster area were treated during 2015 with 4519 clients in treatment at the end of 2015 (HSE, 2016). Treatment occurred in both clinic settings and with General Practitioner in community surgeries. This is a slight decrease (0.2%) from 2014 where levels were at 5366 clients in total. This represents 47% of the clients nationally and does not include data from the Prisons and the Drug Treatment Centre's clients. However, this figure is of minimal value as it the combined client figure from 3 Regional DATFs (East Coast, Midlands and South West) and 8 Local DATFs (Ballyfermot, Bray, Canal Communities, Clondalkin, Dublin 12, Dún Laoghaire Rathdown, South Inner City and Tallaght).

Of the 11,338 clients deemed to be actually attending, 245, who gave East Coast Regional addresses when registered, were in treatment during 2015 (HSE, 2016b). This figure shows three times more males than females attending with almost all (97%) over the age of 25. Most clients attend services provided by local General Practitioners [GP] followed closely by services provided by HSE specialised addiction clinics or centres [see Figure 2].

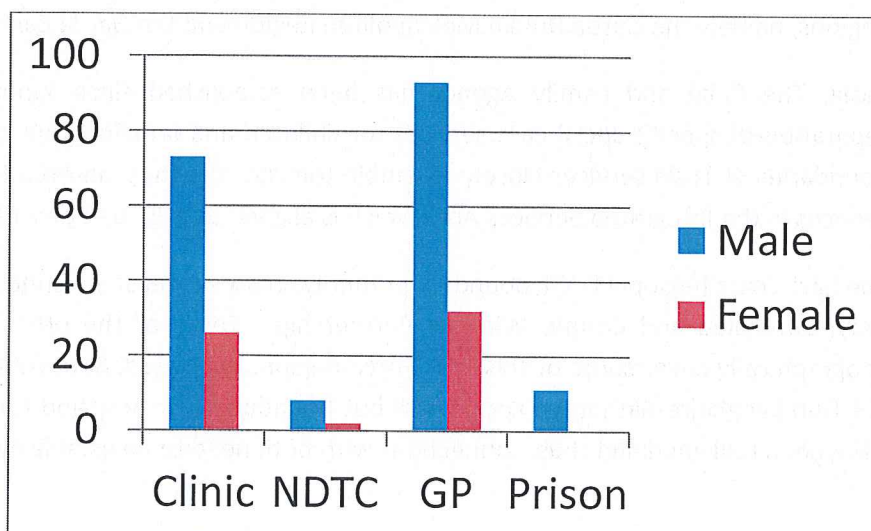


Figure 2: HSE National Drug Treatment Centre Data for 2015



The current latest available data from the [National Drug Treatment Reporting System \[NDTRS\]](#) compiled by the Health Research Board is for clients assessed and case managed during 2014 (HRB, 2015). From this data, it is clear 535 cases were referred for assessment within the East Coast Region who were also recorded with an ECR address. Of these, 20 assessments were for concerned persons. With regard to alcohol and drug specific cases, almost three quarters (387) were then subsequently treated by or referred to services within this region, mostly (80%) by either low threshold or outpatient services. Only 17% (88) cases were assessed and referred to inpatient services. Other clients were in prison or were able to access services at their GP surgeries to meet their needs.

About 60% (309) of all clients were treated for their specific condition with about one third (173) referred to an appropriate service, and the remainder receiving minimal assistance mostly due to incomplete assessment or non acceptance of the options presented. Almost one third (164) were recorded as new to receiving any form of treatment, while 202 clients had been assessed previously and an additional one in four (134) having been treated previously within the same assessing service.

Two-thirds of those presenting for services in this area were male (66%) and mostly aged from 25 to 49 years old (70.5%) with 19% younger and 10.5% older. They are either living with parents or in their own family unit (64%) with 83% (427) indicating a stable accommodation situation. Almost two thirds (65.9%) were unemployed with about 1 in 7 (14.5%) in paid employment. For those whose data was captured, almost three-quarters (72%) had left school at aged 15 or over. As the official school leaving age is now 16 years, it is noted that 72 people who left at aged 14 years and younger were definitely below the legal age to do so and an extra 6 people declared that they had never attended school.

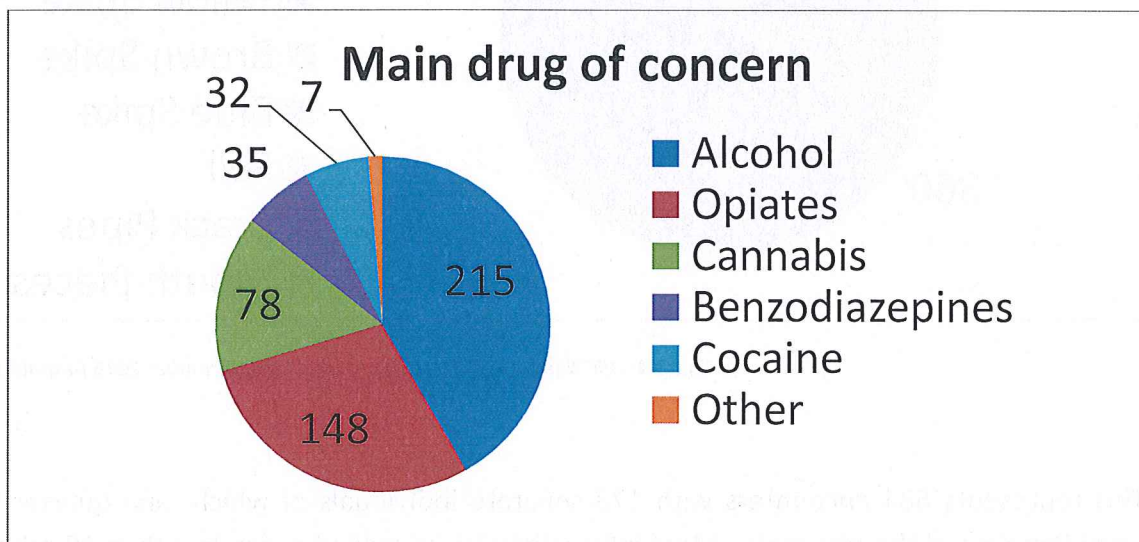


Figure 3: National Drug Treatment Reporting System [NDTRS] data for 2014

Although drugs other than alcohol were listed as the majority of reasons for the referral to services, this data is further broken down by illegal drug type under the main drug of

concern [see Figure 3]. Within the illegal drug usage, opiates remain the highest recorded drug type with cannabis and benzodiazepines following in priority. Cocaine and other drugs make up the remainder. It must be noted that this records the primary drug of concern and many referrals indicate simultaneous problems with a number of substances or poly drug use. Self referral remains the primary source indicated at 40% of all referrals followed by outreach worker referral (16%), general practitioner (9.1%), other drug treatment centre (8.1%) and family and friends (7%). Other sources are court, probation, police, social services, mental health facility, prison and hospital although the numbers recorded under each category are small.

The HSE separately records [Needle Exchange](#) figures for encounters and engagements with individuals looking for such equipment across the region. This data is not recorded on either the CTL or NDTRS capture measures as this activity falls outside the scope of both. No pharmacy needle exchange programme operates in this Region. An annual return for the Arklow/Wicklow area for 2015 gives the following results:

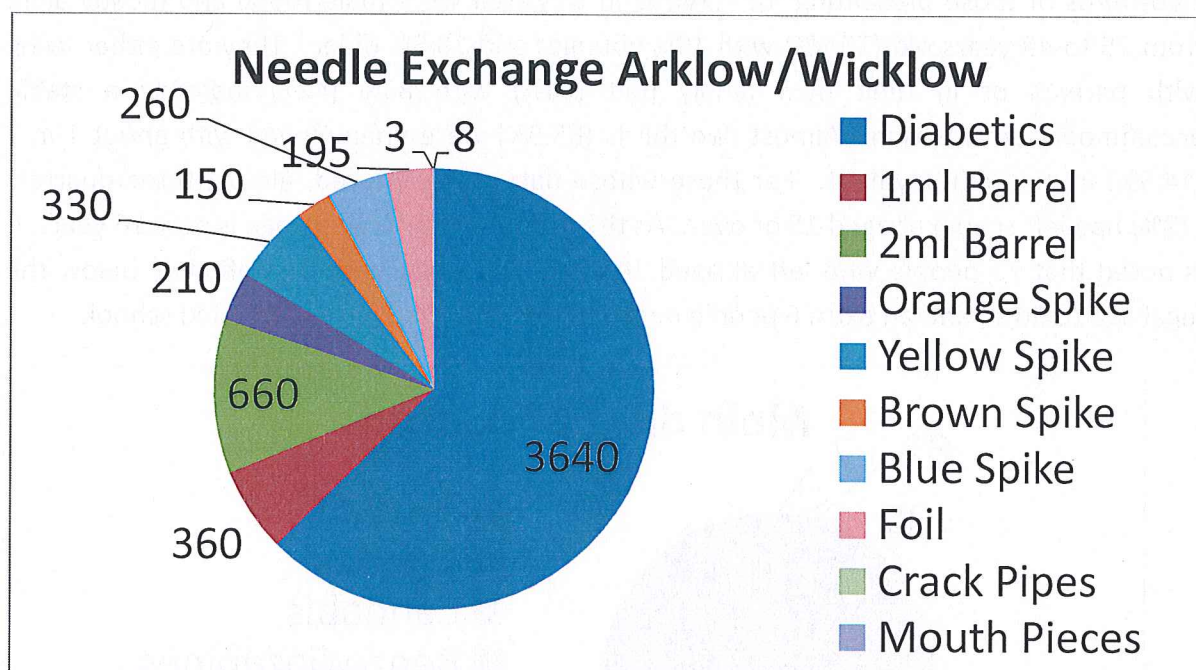


Figure 4: HSE Needle Exchange data January to December 2015 [unpublished]

This represents 684 encounters with 173 separate individuals of which, one quarter (44) were female and the rest male. Most interactions were carried out in less than 10 minutes (134) with the rest within 20 minutes and as seen on Figure3, the most commonly requested equipment is the diabetic syringe. People accessing this service are doing so in regard to their Heroin usage (86%) both smoked using the foil provided and injected primarily using diabetic syringes. Almost a third (53) of these service users seek equipment



in respect of their cocaine usage, with an additional 6 assessed and given needle exchanges for crack cocaine use. About three-quarters (74%) of all attendees identify a benzodiazepines usage, coexisting with other drug usages. The service notes 7 people accessing equipment exchange for steroid drug usage also.

From the compilation of [National Drug Related Death Index \[NDRDI\]](#), there are at least 161 recorded deaths by poisoning in the East Coast Region as a whole between 2004 and 2009 making up 8% of the deaths nationally and the fifth highest regional figure (HRB, 2012). Furthermore, 43 cases or persons who were known drug users were recorded as medical deaths where the most common causes were cardiac events, respiratory infections and cancer. There were also an additional 41 cases recorded as trauma deaths where the most common causes were hanging and choking. No more recent figures are available at this time.



Figure 5: Ashford Community Centre & Seamus Heaney Heritage Centre



## Drug Related Crime in the East Coast Region

Drug related crime detection and conviction is recorded by An Garda Síochána under the various legal codes and offences. The East Coast Regional DATF crosses over the Garda divisions of Wicklow and the Dublin Metropolitan Region. Data is only available for the Wicklow Garda Division as it is not possible to extract the full East Coast Region from the larger Dublin data. The four most prevalent drug-related criminal acts are recorded below for the Wicklow Garda Division, which is also spread across the 3 main subdivisions of Baltinglass, Bray and Wicklow. Public order and other social code offences for 2015 showed a marked decrease on 2014 figures with a 27% drop in detections made [see Figure 6].

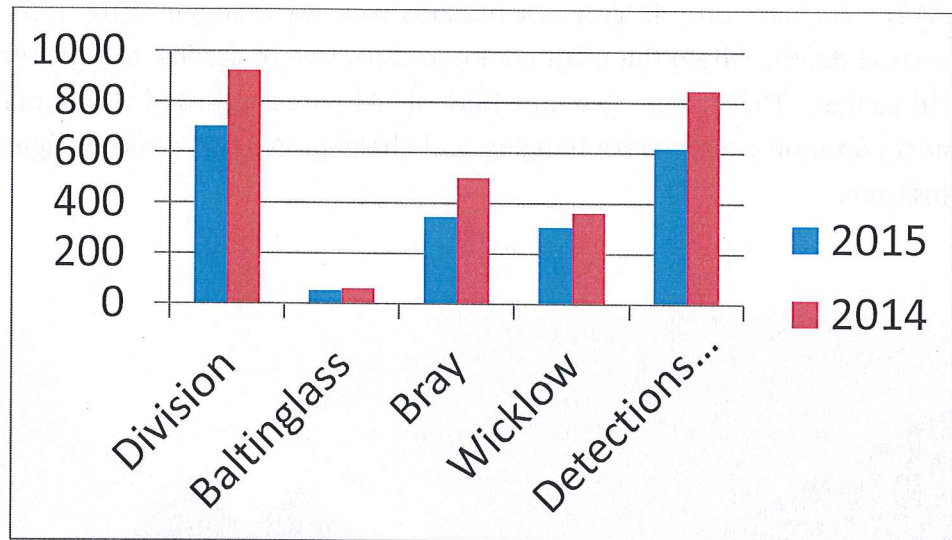


Figure 6: Public Order and other Social Code Offences data, Wicklow Garda Division

Figures for the cultivation or manufacture of illegal drugs are relatively low with only 2 detections made in the Wicklow sub-district in 2015 as compared to 11 made across all sub-districts of the division in 2014. This generally relates to commercial cannabis cultivation also known as 'grow houses' producing cannabis in weed form.

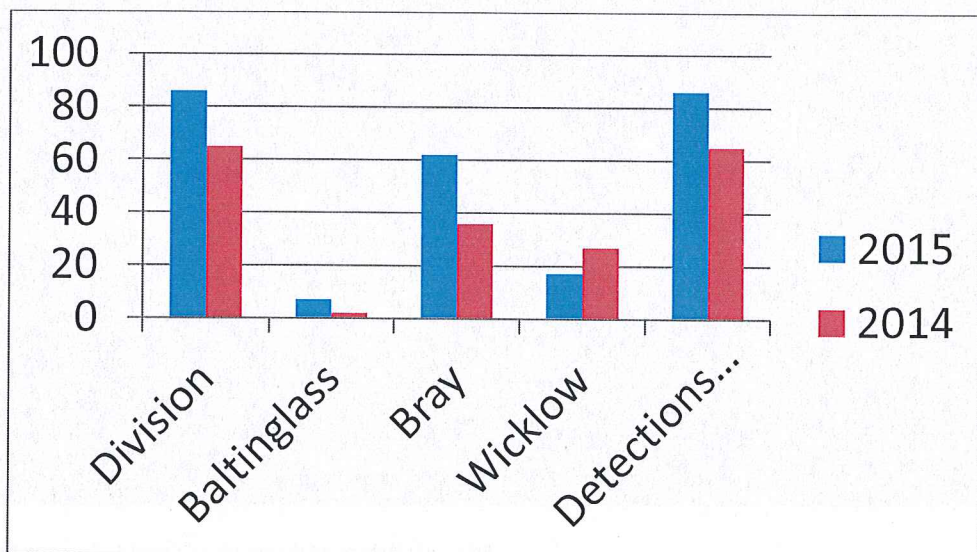


Figure 7: Possession of Drugs for Sale or Supply, Wicklow Garda Division



However, the data for possession of drugs for sale or supply gives an overall 32% increase in the divisional figures both in recording and detections made since 2014. This increase is across most areas with only the Wicklow sub-district recording a reduction [see Figure 7].

Similarly, Garda detection figures for the possession of drugs for personal use increased by 10% overall in 2015 with only the Wicklow sub-district recording a decrease in detections made [see Figure 8].

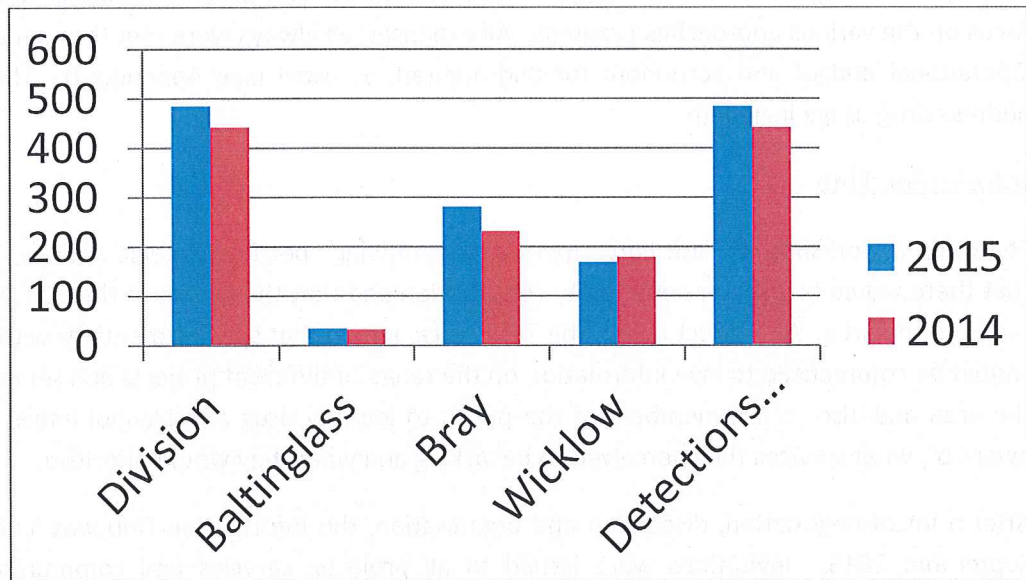


Figure 8: Possession of Drugs for Personal Use, Wicklow Garda Division

Action 3 of the current National Drugs Strategy (DCRGA, 2009) also makes clear direction of ‘drug-related intimidation’ which has seen a great increase in this area, albeit anecdotal. There is an Inspector assigned from An Garda Síochána to be the liaison person in regard to any and all reports under this category. His assistance and advice has been sought and received on a number of cases, mostly by project workers acting as intermediaries. However, as with other regions, the number of cases of persons even willing to engage with the Inspector directly let alone officially report such an occurrence is negligible. As a Task Force, we continue to encourage our workers and also our service users to seriously promote such an option. Reports are coming in, through some drug project workers, of demands of large sums of money being made to both drug users and often family members. Those same family members are often unaware of any serious drug usage or problem let alone a ‘drug debt’ up to this point. The contact regarding this debt is often accompanied by threatening or menacing behaviour. Drug workers have engaged with clients too fearful to leave their homes, and others who have been beaten in respect of unpaid debts. Reports identify large sums of money being sought some as high as €30,000 with rolling interest charges, typically of €500 per day, being added. Family members in more affluent areas are more prone to being targeted to pay the debt. At least one shooting incident in this area is linked to such activity (UTV, 2015).

Examples of other linked criminal activities have identified large quantities of illegal tobacco being traded in the region (Wicklow News, 2015) along with instances of prescription medicines being sold illegally (Independent, 2015). The East Coast Regional linkages to the Silk Road website and its operations were made in court during 2015 (The Sunday Times, 2015).

## **Main Issues addressed by ECR DATF during 2015**

During 2015, the ECR DATF utilised a number of courses of action to gather drug related information from a number of sources, highlight the most pressing matters and responding appropriately to drug usage and issues in the East Coast Region. These new innovations were developed by workshop with members, agreed and then added to the Task Force agenda as a standard item to keep the focus on the various approaches progress. All expenses, as always were met through the Task Force Operational Budget and accounted for and audited, as usual (see Appendix I). The methods to address drug usage included:

### Information Hub

Following a workshop of Task Force members identifying specific Strategic Actions, it was agreed that there would be greater community consultation and that the profile of the ECR DATF would be raised in the area. As a direct result, the Task Force agreed that specific meetings with communities should be commenced to give information on the range of different projects and services on offer in the area and also to ask members of the public to identify drug and alcohol issues that they are aware of, what services they perceived to be lacking and what they would prioritise.

After a lot of negotiation, discussion and organisation, the Information Hub was launched on 15<sup>th</sup> September 2015. Invitations were issued to all projects, services and community groups and representatives across the East Coast Region. Advertising of the event was organised in a large number of local newspapers, newsletters (both community and churches) and across email networks of services and organisations which are directly or indirectly affected by drugs and alcohol. A large crowd attended the evening launch event which was chaired by Andrew Doyle, TD and a range of speakers explained what this evening and all future events were about and hoped to achieve. The first information event was held that night with a HSE speaker giving clear information on HIV and the recent rise of numbers recorded in the East Coast Region. After this discussion, a questions and answers session was held with all those in attendance. Afterwards, additional members of project and service staff were on hand to talk to people individually as required.

Further to the success of this event, a series of similar talks and discussions were similarly organised, advertised and carried out [See Appendix II] every week for the next eight weeks. To tie in with these events, a new Task Force leaflet of all services and contact information was produced and distributed. Task Force staff members were redeployed to attend and assist with these events. Costs were kept as low as possible with only room rental and refreshment costs incurred, on a weekly basis. However, some advertising costs were necessarily incurred.

A lot of positive outcomes have been achieved by this event. Members of the community have been given direct information on a range of agencies and services which they previously had either little or no information about and certain inaccuracies and misinformation has been addressed. In turn, information was supplied by community members to the staff working in the Hub which has been acted on and passed on to various services and agencies to assist them in carrying out their respective remits. A number of attendees have subsequently accessed a drugs awareness course in their community and a group has remained together to establish a new family support group in the Newtownmountkennedy area which has been facilitated and supported by the National Family



Support Network. Another group has formed in the area to research the needs of young people (those under the age of 18) and identify what gaps and blocks are occurring in order to gain access to appropriate services for this age cohort.

The Task Force Coordinator was invited to become a member on the Wicklow Child and Young Persons Services Committee [CYPSC] and the Prevention, Partnership and Family Support [PPFS] groups for this area. Ongoing liaison with both Bray Local DATF and South Western Regional DATF are required for this representative role. However, as a direct result, this Task Force is able to access a large number of both Parenting and Family Support programmes and courses across the region and this has greatly led to a decrease in duplicate funding proposals being submitted. There have been greater clarity and cohesion between this Task Force and Túsla and the myriad of funded child and family projects and resource centres ensuring a more coordinated service for the community. This Task Force is currently engaging and being a part of the development of the next 3 year Wicklow CYPSC Strategic Plan which is the first time drug and alcohol issues have been specifically named in this plan. It is, therefore, expected that a lot of new actions and partnerships will result.

The grant issue application process (including application form, terms and conditions, scoring matrix and letter of agreement and rejection) was reviewed and developed during the year. Subsequently a number of specific pieces of work were promoted and progressed. Grants were widely advertised across voluntary and community groups to develop innovative work in respect of a proven need and gap in services in specific areas. Further to this, a large number of applications were received, accessed under the criteria given and either accepted or rejected for the funding requested. A list of the successful groups is identified in Appendix III. Both prevention and education along with treatment and rehabilitation projects were considered during the year to address identified gaps in services and target specific needs and areas that have no other form of funding mechanism. Where possible, a large number of these initiatives were given added scoring where interagency and multi-agency work was clearly outlined and carried through.

One large Sports Partnership programme was piloted in 5 different areas across the region with a clear drugs and alcohol prevention approach and an activity led element. Following the initial events in all 5 regions, the five groups were then brought together to engage in a large multi-event sports programme in one location. Following this, all groups and group leaders were encouraged to fully follow up and further engage these young people in activities and events suitable to their age group and locale. This proved to be highly successful and encouraged linkages with workers as well as young people to give support and assistance to all. In some instances, it has proven necessary to engage with young people in specific risk communities (earlier than youth services are funded to intervene) and this has identified, enabled and engaged such young people in programmes in advance of transfer to organised youth services on reaching the agreed age e.g. Equestrian Vaulting initiative in the Ballyguile, Broadlough and Hillview social housing estates in Wicklow.

Further to the Wicklow emergency homeless shelter being changed to a longer term supported housing facility, the group running the service [Dublin Simon] agreed to provide ongoing counselling directly to the clients. However, as appropriate counselling space in the centre was proving difficult to access, this Task Force negotiated with a local project so that off-site counselling for current attendees and those moving on to private housing arrangements could be provided to this very

vulnerable group. This has proven to be vital in certain clients transitioning to their own stable housing tenancies and maintaining those tenancies.

Where overarching governing of the Task Force is involved, a revised Induction Handbook was put together by the Coordinator (adapted from the various DPU directives and documents issued) and agreed by the members. Subsequently all new members of the Task Force were formally met by the Chairman and Coordinator and issued with a copy in advance of attendance at any meeting. A discussion of the relevant sections was had at this meeting as part of new members' induction and also new members were encouraged to ask and clarify any issue they had prior to taking up a place on the Task Force.

Further to projects invited to the various presentations at the Information Hub, and discussions regarding transfer of clients across projects as appropriate, other multiagency events were circulated and encouraged. Logic Model Training was conducted with a large group of staff from different agencies and services across the East Coast Region. There was also a follow up to the Health Research Board workshop explaining the NDTRS forms and the process in filling them out. After the commencement notice of the 2015 Dormant Accounts Funding for DATFs, and the Pobal briefing (23/06/15) a large number of meetings were called where projects were invited and encouraged to identify initiatives, which could be progressed within the funding criteria listed. A short timeframe was then available for the Task Force staff to put together the proposal, have it agreed and submit to Pobal in the approved format for consideration.

A large amount of other work was conducted by the ECR DATF during the year [see Appendix III], which included:

- Development and Progression of the Strategic Plan
- Department of Child and Youth Affairs review of funding including Task Force projects and Young Persons Facilities and Services Fund with report launch
- Minister Aodhán Ó'Riordáin's workshop day to present the merits of the model of drug treatment and approach used in Portugal along with the merits of Medically Supervised Injecting Centres
- Discussions across a range of services and committees resulting in formal letters issued to General Practitioners in the area regarding the prescribing of Pregabalin
- Support to project events and project information days
- Representation by various members on linked networks and support groups:
  - ◆ Chair as a member of National RDATEF Chairs Network
  - ◆ Chair as representative on OFD, NCCDATEF, NDS Steering Group
  - ◆ Coordinator as a member of National RDATEF Coordinators Network
  - ◆ Coordinator as a representative on NDRIC
  - ◆ Coordinator as a representative on Under 18 service exploratory group
  - ◆ Voluntary representatives as members of Dublin Cluster Network group
- Responses to the large volume of requests from the DPU, HSE, other agencies and organisations along with local projects and services.
- Development of a Regional Service Users Involvement approach to all aspects of work
- Linkages with other service plans and discussions including the Wicklow County Council LECP, Area Policing Plan, Family Support Network etc



## The impact of DATF Funded Projects in 2015

The **Wicklow Child and Family Project** operates under County Wicklow Partnership and is funded primarily by Túsla to provide supports and interventions to vulnerable families across the south of County Wicklow. Additional funding from the ECR DATF is provided to identify, assess and provide additional interventions to adults, families and children who are experiencing difficulties as a result of addiction issues specifically. A number of the key services they provide are:

- ✓ Individual therapeutic interventions to adults experiencing addiction
- ✓ Individual therapeutic interventions to adults affected by another family members addiction
- ✓ Child appropriate interventions where addiction problems exist in the family
- ✓ Child group activities and interventions to build on personal development and self awareness
- ✓ Child group activities to develop communication and teamwork to enhance self-confidence and self-esteem
- ✓ Family activities to strengthen relationships and address issues contribution to poor family dynamics
- ✓ Training for identified drugs and alcohol related needs across the funded projects and agencies to extend supports and networking of regional multiagency groups.
- ✓ Brief Intervention Counselling in two sites (Wicklow and Arklow) to meet the needs of individuals who are affected by addiction issues
- ✓ Oversee and manage premises used by a variety of funded projects, the Task Force and some other services to make it easier for the client to address their needs
- ✓ Liaise with the Housing services to provide services and facilities as needed.

The **Wicklow Travellers' Group Outreach Project** provides a range of services and supports to members of the Traveller community, both settled and non-settled, across the county. Full funding from the ECR DATF is given to deliver outreach interventions to this ethnic group providing drugs and alcohol prevention and education specific programmes and inputs. One full time and one sessional youth worker is funded under this initiative. A number of the key services supplied are:

- ✓ Targeting of young Travellers and their families with appropriate alcohol and drug awareness and education programmes suitable to their needs
- ✓ To provide a prevention and early intervention approach to this group
- ✓ To provide group diversionary activities to build on personal development and resilience in this group
- ✓ To deliver evidence based drugs education programmes for Travellers' as agreed with national bodies e.g. Pavee Point Services
- ✓ To provide opportunities to deliver drug and alcohol specific interventions alongside other services and providers to aid the abilities of Travellers to access other services
- ✓ To work with other services and organisations to ensure access to appropriate drug and alcohol services for this group
- ✓ To address underage and excess drinking and behaviours in this group.

The **ISPCC Childhood Support Service** in Wicklow works with children aged between 10 and 18 years old who are at risk of becoming involved in drug and alcohol usage using a prevention and early intervention approach. All funding for this project is provided by the ECR DATF, which is ultimately managed by the national ISPCC services. Outreach services are delivered across all of Wicklow working with young people and their families as appropriate. Three staff (2 WTE) are funded under this initiative. A number of the key services they provide are:

- ✓ Individual child specific therapeutic interventions targeted at their needs
- ✓ Improving child psychological resilience and developing protective factors
- ✓ Engagement over a period of 6 months to identify and address the presenting issues
- ✓ Engagement with parents and families to support and add to the impact of the intervention
- ✓ Evaluation of all interventions using the What Works Outcomes Evaluation Tool.

The **Living Life Counselling Services** provide low-cost affordable and accessible services to those persons in the community affected by addiction that are in receipt of low incomes. Additional funding from the ECR DATF is provided to assess, match with an appropriate counsellor and provide a series of counselling sessions to adults who are experiencing difficulties as a result of addiction issues. This service is offered in centres in Bray and Arklow. A number of the key services they provide are:

- ✓ Initial assessment to ascertain the need and length of intervention
- ✓ Liaison with other health care providers, as necessary and with client agreement
- ✓ Matching of clients requirements with staff skills
- ✓ Individual counselling as part of a series to address a drug and/or alcohol related issue
- ✓ Provide some under 18, family and couples counselling appropriate to need.

The **Crosscare Youth Outreach Drugs Education Project** provides drugs and alcohol awareness and education programmes to young people in out-of-school settings. The funding from the ECR DATF supports the salary of one youth worker to operate across the whole region to add a drugs and alcohol programme to groups and organisations engaging with young people in community settings. A number of the key services this project provides are:

- ✓ Delivery of drug and alcohol prevention programmes to different age and gender groups in community settings across the county
- ✓ To provide group diversionary activities to build on personal development and resilience in these groups
- ✓ To deliver evidence based drugs education programmes
- ✓ To provide opportunities to deliver drug and alcohol specific interventions alongside other interventions and activities
- ✓ To make appropriate referrals to other services and agencies for this age group
- ✓ To address underage and excess drinking and behaviours in this age group.



The **Tiglin Challenge Residential Housing** provides residential facilities and services to persons dependent on drugs and alcohol. It provides a 16 month programme aimed at recovery of the individual from drugs and alcohol. This is provided on two main sites, Devil's Glen and Greystones. The centre in Devil's Glen provides 33 male beds and 12 female beds for the initial phase I of the programme (typically 10-12 months) with the centre in Greystones providing step-down or phase II beds (typically 5-6 months). Additional funding from ECR DATF is given to deliver 5 specific beds to persons from this region. Among the key services they offer are:

- ✓ A facility dedicated to a holistic approach to the needs of the individual who wishes to exit addiction and engage in a recovery programme
- ✓ Rehabilitation of individuals from addiction and substance abuse
- ✓ Reducing dependence on substances and improving overall health and well being.
- ✓ Personal development of individuals through a life skills approach
- ✓ Re-entry of individuals into society after the process above
- ✓ Exiting clients are referred to aftercare with other project(s) depending on need.

The **Rehabilitation Integration Service** works on an outreach basis to connect with, assess needs and make appropriate referrals for persons with addiction and substance issues. All funding for this project is provided by the ECR DATF, which is ultimately hosted by the Tiglin Challenge organisation. Outreach services are delivered across all of Wicklow working with adults in addiction and their families, as appropriate. Two workers (2 WTE) are funded under this initiative. A number of the key services they provide are:

- ✓ Meetings and consultations with individuals
- ✓ Initial assessment to ascertain the individual's need
- ✓ Comprehensive assessment, discussion and case planning with individuals
- ✓ Liaison with all other projects and agencies to provide appropriate interventions and services
- ✓ Support role for individuals accessing a range of services and transitioning through their agreed care plan.



Figure 9: Beach Bear in Greystones

## Form A: NDS Supply Reduction Pillar

|  |   |   |
|--|---|---|
| <b>DRUGS AND ALCOHOL TASK FORCE:</b>         |   | <b>East Coast Regional</b>  |
| <b>Pillar * :</b>                            | <b>Supply Reduction</b>   |   |
| <b>DATF objective :</b>                      | <p>Ensure all Task Force members engage in the work of Supply Reduction</p> <p>Support agencies and services which deal directly with supply monitoring</p> <p>Monitor and communicate drug use levels and emerging trends</p> <p>Enhance communication across all areas</p> <p>Develop specific responses to the illegal supply of alcohol</p>               |   |
| <b>Outcomes :</b>                            | <p>All members are engaged in the 'Dial to Stop Drug Dealing' campaign</p> <p>All members ready to assist in the Garda Referral System (NDS 38)</p> <p>Engage in communication with the Gardaí and Customs Revenue Services</p> <p>Ensure that the Task Force can interface with the local JPCs</p> <p>Monitor and report on unsafe prescribing practices</p> |   |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name</b>   |
| Family Support                               | EC 2  | Wicklow Child & Family Project                                      |
| Treatment & Rehabilitation                   | EC 2  | Wicklow Child & Family Project                                      |
| Education & Prevention                       | EC 3  | Wicklow Travellers' Group Prevention and Education Outreach Project |
| Organisation facilitation                    | EC 4  | Operational Budget  |
| Education & Prevention                       | EC 6  | ISPCC Teen Focus  |
| Family Support                               | EC 6  | ISPCC Teen Focus  |
| Family Support                               | EC 7  | Living Life Counselling   |
| Education & Prevention                       | EC 12   | Crosscare Youth Services  |
| <b>Project changes/ terminations in 2015</b> |   |   |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name &amp; Reason</b>                                    |
|  |   |   |
|  |   |   |



## Form A: NDS Prevention Pillar

| DRUGS AND ALCOHOL TASK FORCE:                |  | East Coast Regional                           |
|--|--|---|
| <b>Pillar * :</b>                            | <b>Prevention</b>  |   |
| <b>DATF objective :</b>                      | <p>Strengthen and develop education prevention initiatives for all ages</p> <p>Strengthen interagency collaboration in the interest of the service user</p> <p>Take an active role in the promotion of healthier lifestyle choices</p> <p>Strengthen the links with national and government health strategies</p>  |   |
| <b>Outcomes :</b>                            | <p>To deliver a large interagency project across 5 identified towns within the area providing a specific alcohol prevention programme to adults and children which is activity based to enhance development of core structures within these areas and support an initial input which can be subsequently sustained over a further period.</p> <p>To target the needs of a specific group of early teenage girls living in families with addiction problems in the East Coast Region.</p> <p>To specifically target areas in the Region who have not previously received direct resources but where drug issues have been identified with innovative prevention programmes.</p> <p>To provide added resources to specific specialist projects which address the key DATF objectives</p> |   |
| <b>Category **</b>                           | <b>Project Code</b>  | <b>Project Name</b>                           |
| Education & Prevention                       | EC 2   | Wicklow Child & Family Project                |
| Family Support                               | EC 2   | Wicklow Child & Family Project                |
| Education & Prevention                       | EC 3   | WTG Prevention and Education Outreach Project |
| Organisation facilitation                    | EC 4   | Operational Budget                            |
| Education & Prevention                       | EC 4   | Operational Budget                            |
| Education & Prevention                       | EC 6   | ISPCC Teen Focus                              |
| Family Support                               | EC 6   | ISPCC Teen Focus                              |
| Family Support                               | EC 7   | Living Life Counselling                       |
| Education & Prevention                       | EC 12  | Youth Outreach Worker – Drugs Education       |
| Education & Training of Drugs Workers        | EC 12  | Youth Outreach Worker – Drugs Education       |
| <b>Project changes/ terminations in 2015</b> |  |   |
| <b>Category **</b>                           | <b>Project Code</b>  | <b>Project Name &amp; Reason</b>              |
|  |  |   |

## Form A: NDS Treatment Pillar

| DRUGS AND ALCOHOL TASK FORCE:                |   | East Coast Regional                |
|--|---|------------------------------------|
| <b>Pillar * :</b>                            | <b>Treatment</b>  |                                    |
| <b>DATF objective :</b>                      | <p>Assess to ensure adequate appropriate treatment is in place in the East Coast Region to respond to the diverse requirements of drug and alcohol service users</p> <p>Maintain adequate resources to meet the identified needs of drugs and alcohol service users in the East Coast Region</p> <p>Monitor and evaluate treatment in the East Coast Region</p> <p>Strengthen interagency collaboration to provide the service user with a continuum of care plan to meet his/her needs</p> <p>Develop and support service users forums</p> |                                    |
| <b>Outcomes :</b>                            | <p>Monitoring of new trends/behaviours/emerging needs</p> <p>Continue to identify needs of services and service users</p> <p>Source sound evidence based data e.g. HRB data</p> <p>To increase numbers accessing services</p> <p>Begin a clear process to engage with services users across all services</p>  |                                    |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name</b>                |
| Treatment & Rehabilitation                   | EC 2  | Wicklow Child & Family Project     |
| Family Support                               | EC 2  | Wicklow Child & Family Project     |
| Treatment & Rehabilitation                   | EC 4  | Operational Budget                 |
| Treatment & Rehabilitation                   | EC 7  | Living Life Counselling            |
| Family Support                               | EC 7  | Living Life Counselling            |
| Treatment & Rehabilitation                   | EC 13   | Tiglin Challenge                   |
| Treatment & Rehabilitation                   | EC 14   | Rehabilitation Integration Service |
| <b>Project changes/ terminations in 2015</b> |   |                                    |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name &amp; Reason</b>   |
|  |   |                                    |



## Form A: NDS Rehabilitation Pillar

| DRUGS AND ALCOHOL TASK FORCE:                |  | East Coast Regional                |
|--|--|------------------------------------|
| <b>Pillar * :</b>                            | <b>Rehabilitation</b>  |                                    |
| <b>DATF objective :</b>                      | <p>Assess to ensure adequate appropriate rehabilitation services are in place in the East Coast Region to respond to the diverse requirements of drugs and alcohol service users</p> <p>Monitor and evaluate rehabilitation services in the East Coast Region</p> <p>Strengthen interagency collaboration to provide the service user with a continuum of care plan to meet his/her needs using the National Drug Rehabilitation Framework</p> <p>Develop and support service users forums</p> <p>Strengthen the links to 'wrap around' services</p> |                                    |
| <b>Outcomes :</b>                            | <p>Continue to monitor and report on new trends/behaviours/emerging needs</p> <p>Source sound evidence based data e.g. HRB data</p> <p>To increase numbers accessing services</p> <p>Ensure project targets are delivered</p> <p>Develop and support family support service</p>  |                                    |
| <b>Category **</b>                           | <b>Project Code</b>  | <b>Project Name</b>                |
| Treatment & Rehabilitation                   | EC 2   | Wicklow Child & Family Project     |
| Treatment & Rehabilitation                   | EC 4   | Operational Budget                 |
| Treatment & Rehabilitation                   | EC 7   | Living Life Counselling            |
| Treatment & Rehabilitation                   | EC 13  | Tiglin Challenge                   |
| Treatment & Rehabilitation                   | EC 14  | Rehabilitation Integration Service |
|  |  |                                    |
|  |  |                                    |
| <b>Project changes/ terminations in 2015</b> |  |                                    |
| <b>Category **</b>                           | <b>Project Code</b>  | <b>Project Name &amp; Reason</b>   |
|  |  |                                    |
|  |  |                                    |

## Form A: NDS Research Pillar

| DRUGS AND ALCOHOL TASK FORCE:                |   | East Coast Regional              |  |
|--|---|----------------------------------|--|
| <b>Pillar * :</b>                            | <b>Research</b>   |                                  |  |
| <b>DATF objective :</b>                      | <p>To Increase the availability and dissemination of local and national data on the issues affecting service users, existing services and trends affecting drug and alcohol use</p> <p>Ensure that data supplied and compiled is readily available and reviewed</p> <p>Participate in local and national research</p> <p>Identify and commission, if necessary, research that will add value and help inform service developments</p> |                                  |  |
| <b>Outcomes :</b>                            | <p>Highlight gaps and blocks affecting service users</p> <p>Participate in consultations regarding the next National Strategy</p> <p>Identify relevant data already available</p> <p>Assist with local research regarding needs of under 18 drug/alcohol users</p>  |                                  |  |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name</b>              |  |
| Research                                     | EC 4  | Operational Budget               |  |
|  |   |                                  |  |
|  |   |                                  |  |
|  |   |                                  |  |
| <b>Project changes/ terminations in 2015</b> |   |                                  |  |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name &amp; Reason</b> |  |
|  |   |                                  |  |



## Form A: NDS Coordination Pillar

|  |   |                                  |
|--|---|----------------------------------|
| <b>DRUGS AND ALCOHOL TASK FORCE:</b>         |   | <b>East Coast Regional</b>       |
| <b>Pillar * :</b>                            | <b>Coordination</b>   |                                  |
| <b>DATF objective :</b>                      | <p>Ensure the Task Force is informed in its work by the plans of other services and agencies in the East Coast Region</p> <p>Monitor membership on all Task Force groups</p> <p>Ensure that the Task Force works from a model of interagency and partnership to deliver on its actions</p> <p>Ensure that information is disseminated through the members of the Task Force and their organisations to the service users and the wider community</p> <p>Monitor trends and emerging issues</p> <p>Develop the capacity of the Task Force to coordinate integrated responses to drugs and alcohol use in the East Coast Region</p> <p>Deliver value for money projects</p> <p>Support and strengthen the structure of the Task Force</p> <p>Ensure that the Task Force demonstrates good corporate governance in all its dealings</p> <p>Raise the profile of the Task Force through enhanced communication and information dissemination</p> <p>Expand the work to include alcohol as required by the DPU</p> |                                  |
| <b>Outcomes :</b>                            | <p>Regular updates from Statutory members about their organisation's drug and alcohol plans in the East Coast Region</p> <p>Strengthened membership on the Task Force and review of membership on all committees</p> <p>Identify gaps and blocks to the work of the Task Force and put in place plans to address them</p> <p>Ensure the Task Force constantly updates its information</p> <p>Ensure there is no duplication in the projects and services delivered</p> <p>Ensure services are supported by the Task Force and work together to identify adequate resources to deliver the agreed service</p> <p>Meet the requests for information from other services and agencies e.g. DPU, HSE, projects</p> <p>Develop a plan to specifically address alcohol pending its inclusion in the next National Strategy</p>  |                                  |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name</b>              |
| Research                                     | EC 4  | Operational Budget               |
| <b>Project changes/ terminations in 2015</b> |   |                                  |
| <b>Category **</b>                           | <b>Project Code</b>   | <b>Project Name &amp; Reason</b> |
|  |   |                                  |



## National Drugs Strategy Action 42

A Service Users Involvement Training piece was developed (by the South and Southeast Regional DATFs) and all Regional DATFs were invited to a workshop run by these areas to explain and train in the approach identified in 2014. A specific manual was also developed and supplied to all attendees. Following this, there were a series of discussions where a number of approaches and developments were considered for this region. It was decided that an external worker would be funded to commence development of service user groups across the region. An advisory group comprising the Task Force, County Wicklow Partnership and the HSE was convened to aid and assist the initial contacts with potential group members. It was further decided that service suppliers would be contacted to act as gatekeepers in order to make contact with service users and a number of information sessions were held and conducted to explain the project, the approach and the methods to be used. This work is ongoing and service users identified will next be offered personal development inputs to assist them in this process.



Figure 10: Public Bench in Ashford



## Governance of the ECR DATF

Eleven meetings of the East Coast Regional Drugs and Alcohol Task Force (ECR DATF) were held during 2015. The dates were January 7, February 9, March 23, April 13, May 25, June 22, July 27, August 31, October 12, November 16 and December 14. A quorum was achieved in all but the March 23<sup>rd</sup> meeting. In addition to this, a work planning meeting was held on April 27, a Strategic Planning meeting on November 2<sup>nd</sup> and two special finance approval meetings on October 23<sup>rd</sup> and December 21<sup>st</sup>. This is recorded below:

| <i>Name</i>                              | <i>Sector</i> | <i>Agency</i>                     | <i>No. Of meetings</i> |
|--|---------------|-----------------------------------|------------------------|
| <b>Anthony Dunne</b>                     |               | <i>Chair</i>                      | 15                     |
| <b>John Craven<sup>1</sup></b>           | Statutory     | HSE Addiction Services            | 5                      |
| <b>Edwin Daly<sup>2</sup></b>            | Statutory     | Revenue Customs & Excise Services | 7                      |
| <b>Andrew Doyle TD</b>                   | Elected       | Oireachtas                        | 11                     |
| <b>Alison Fox</b>                        | Statutory     | Kildare and Wicklow ETB           | 11                     |
| <b>Pat Fitzgerald, Cllr<sup>3</sup></b>  | Elected       | Wicklow County Council            | 3                      |
| <b>Delores Goucher</b>                   | Community     | Wicklow town and environs         | 13                     |
| <b>Emma Hill<sup>4</sup></b>             | Community     | Carnew and environs               | 1                      |
| <b>Bernie Lillis<sup>5</sup></b>         | Statutory     | Dublin City Council               | 2                      |
| <b>Eamonn McCann</b>                     | Voluntary     | Wicklow Travellers' Group         | 13                     |
| <b>Aubrey McCarthy</b>                   | Voluntary     | Tiglin Teen Challenge             | 9                      |
| <b>Declan McCarthy, Insp<sup>6</sup></b> | Statutory     | An Garda Síochána                 | 2                      |
| <b>Mary Millett</b>                      | Community     | Co Wicklow Partnership            | 10                     |
| <b>Daire Nolan, Cllr<sup>7</sup></b>     | Elected       | Wicklow County Council            | 2                      |
| <b>Brian O'Keeffe, Insp<sup>8</sup></b>  | Statutory     | An Garda Síochána                 | 8                      |
| <b>John Snell, Cllr<sup>9</sup></b>      | Elected       | Wicklow County Council            | 4                      |
| <b>Maeve Shanley</b>                     |               | <i>Coordinator</i>                | 15                     |
| <b>Una Reynolds</b>                      |               | <i>Administrator</i>              | 13                     |

In addition, seven project review meetings were held in May 2015 where the projects funded through the new HSE Service Level Agreements process (HSE Section 39 Grant Aid Agreements and Service Arrangements) presented to Task Force representatives and HSE representatives and a guided review process was conducted in regard to the funding and activities of each. Oversight and governance of each was discussed and identified with full financial reporting and all policies and procedures requested. Projects were also asked to identify any new emerging issues, needs and gaps in service.

<sup>1</sup> John Craven was appointed by the HSE in April 2015

<sup>2</sup> Edwin Daly resigned in November 2015 and his replacement is awaited

<sup>3</sup> Cllr Pat Fitzgerald was nominated by Wicklow County Council from August 2015

<sup>4</sup> Emma Hill resigned in January 2015

<sup>5</sup> Bernie Lillis resigned in June 2015 and was not replaced by Dublin City Council

<sup>6</sup> Inspector Declan McCarthy transferred in February 2015 and was replaced in May 2015

<sup>7</sup> Cllr Daire Nolan was appointed by Wicklow County Council from August 2015

<sup>8</sup> Inspector Brian O'Keeffe was appointed by An Garda Síochána from May 2015

<sup>9</sup> Cllr John Snell was appointed by Wicklow County Council from August 2015

A specific Work Plan development meeting was conducted in April 2015 where the specific actions to be achieved in 2015 were discussed and agreed (Appendix 1). A further Strategic Planning meeting was organised in November 2015 to devise a specific plan for the Region to implement for the next 3 years as per the *Local and Regional Drugs Task Forces Handbook*, [February 2011, pg. 11-13]. This proved somewhat contentious but ultimately identified a number of areas of concern for the Task Force to address and also a number of instances where members were unclear of their role vis-à-vis the Task Force. With this in mind, it was decided to conduct an Operational Review to identify the governance structure of the Task Force and where gaps and blockages are occurring which stop the Task Force from carrying out its key functions under the guidance of the Local and Regional Drugs Task Force handbook and the agreed Operational Handbook 2015 of the ECR DATF. It was further agreed that this function would be tendered for and an outside agency would be engaged with the appropriate skills and experience for this specific piece of work. Thus, the ECR DATF would make no governance specific decisions until this was achieved.

A **Finance Subgroup** was convened on four occasions throughout the year, which comprised one meeting per quarter as identified. On each occasion, the books and accounts of the ECR DATF operations budget were closely scrutinised by the members and the coordinator was questioned regarding any and all queries. All financial procedures were found to be in order on each occasion. All financial requests and proposals were circulated and discussed at length by this group. As with all meetings, minutes were recorded, circulated to attendees and kept on file. A report from this group was made to the main Task Force membership at the following such meeting. Initial recommendations from this group were presented to the Task Force for a discussion and decision.

The **Treatment and Rehabilitation Committee** of the ECRDATF held bi-monthly meetings during 2015 on January 14<sup>th</sup>, March 11<sup>th</sup>, May 13<sup>th</sup>, July 8<sup>th</sup>, September 9<sup>th</sup> and November 11<sup>th</sup>. Attendance at meetings was as follows:

| <i>Name</i>                       | <i>Sector</i> | <i>Agency</i>                  | <i>No. Of meetings</i> |
|-----------------------------------|---------------|--------------------------------|------------------------|
| <b>Aubrey McCarthy</b>            |               | <i>Chair/Task Force member</i> | 5                      |
| <b>Martina Deasy</b>              | Voluntary     | Arklow Springboard             | 3                      |
| <b>Vicky Harris<sup>10</sup></b>  | Voluntary     | Dublin Simon Regional Manager  | 2                      |
| <b>Christine Keegan</b>           | Voluntary     | Wicklow Child & Family Project | 5                      |
| <b>Kirsty Kirkwood</b>            | Voluntary     | Living Life Counselling        | 4                      |
| <b>Francis Monds<sup>11</sup></b> | Voluntary     | Dublin Simon Wicklow Centre    | 2                      |
| <b>Mary O'Carolan</b>             | Voluntary     | Local Employment Services Bray | 1                      |
| <b>Phil Thompson</b>              | Voluntary     | Tiglin Challenge Ltd           | 3                      |
| <b>Angela Tierney</b>             | Statutory     | HSE Rehabilitation Manager     | 3                      |
| <b>Maeve Shanley</b>              |               | <i>Coordinator</i>             | 6                      |
| <b>Una Reynolds</b>               |               | <i>Administrator</i>           | 6                      |

<sup>10</sup> Vicky Harris was appointed to replace Francis Monds in May 2015

<sup>11</sup> Francis Monds resigned in March 2015 and was replaced by Vicky Harris



The [Prevention and Education Committee](#) of the ECRDTF held six meetings during 2015 on February 5<sup>th</sup>, March 25<sup>th</sup>, April 8<sup>th</sup>, June 3<sup>rd</sup>, October 7<sup>th</sup> and October 19<sup>th</sup>. Unfortunately, a number of meetings called during the year were cancelled due to a lack of a quorum being achieved. Attendance at meetings was as below.

| <i>Name</i>                             | <i>Sector</i> | <i>Agency</i>                  | <i>No. Of meetings</i> |
|---|---------------|--------------------------------|------------------------|
| <b>Mary Millett</b>                     |               | <i>Chair/Task Force Member</i> | 5                      |
| <b>Tony Dunne<sup>12</sup></b>          |               | <i>Chair/Task Force Member</i> | 1                      |
| <b>Fiona Creedon<sup>13</sup></b>       | Voluntary     | Crosscare Youth Services       | 2                      |
| <b>Delores Goucher</b>                  | Community     | Wicklow Town and environs      | 4                      |
| <b>Emma Hill<sup>14</sup></b>           | Community     | Carnew and environs            | 1                      |
| <b>Andrew Jackson<sup>15</sup></b>      | Voluntary     | ISPCC Teen Focus Project       | 2                      |
| <b>Julie Kennedy<sup>16</sup></b>       | Voluntary     | Foróige Youth Service          | 3                      |
| <b>Rhona McGinn<sup>17</sup></b>        | Voluntary     | ISPCC Teen Focus Project       | 0                      |
| <b>Peter O'Reilly</b>                   | Voluntary     | Wicklow Travellers' Group      | 6                      |
| <b>Caroline O'Sullivan<sup>18</sup></b> | Voluntary     | ISPCC Teen Focus Project       | 1                      |
| <b>Síobhan Quinn<sup>19</sup></b>       | Voluntary     | The WAY Project, Foróige       | 1                      |
| <b>Rosemary Yeates<sup>20</sup></b>     | Voluntary     | Crosscare Youth Services       | 2                      |
| <b>Maeve Shanley</b>                    |               | <i>Coordinator</i>             | 6                      |
| <b>Una Reynolds</b>                     |               | <i>Administrator</i>           | 6                      |

Planning for the announcement of the sharing of €1.2 million Dormant Accounts Fund which Minister Alex White had announced (December 2013) for alcohol related prevention activity took up considerable time during 2015. After the final announcement and information and briefing seminar by Pobal on June 23<sup>rd</sup>, a lot of time and energy went into getting opinions and collating ideas which would be appropriate under the conditions of funding and could reasonably be achieved in this region.

A number of meetings arranged in June and July 2015 in respect of the development and preparation of the Dormant Accounts Fund 2016 – Specific Measures 4 for Drug and Alcohol Task Forces. These were used to get input from the Task Force and committee members and much of the compilation work was achieved by the staff of the Task Force in order that the deadline for submission was met and the Task Force did not miss out on this opportunity for additional resources and added work across this region.

<sup>12</sup> Tony Dunne assumed the role of Chair on one occasion during the year

<sup>13</sup> Fiona Creedon replaced Rosemary Yeates in October 2015

<sup>14</sup> Emma Hill resigned in January 2015

<sup>15</sup> Andrew Jackson, Regional Manager was newly appointed and replaced Caroline O'Sullivan in October 2015

<sup>16</sup> Julie Kennedy temporarily replaced Síobhan Quinn during a period of maternity leave

<sup>17</sup> Rhona McGinn was temporarily replaced twice but ultimately by Andrew Jackson in October 2015

<sup>18</sup> Caroline O'Sullivan replaced the ISPCC representative until Andrew Jackson was in place in October 2015

<sup>19</sup> Síobhan Quinn was temporarily replaced by Julie Kennedy during a period of maternity leave

<sup>20</sup> Rosemary Yeates resigned in June 2015 and was replaced by Fiona Creedon in October 2015

## Staff of the ECR DATF

There were no changes in support staff available to the ECRDATF during 2015.

|                                    |                                   |
|------------------------------------|-----------------------------------|
| ECRDATF Coordinator                | Maeve Shanley                     |
| ECRDATF Administrator              | Una Reynolds [part time position] |
| ECRDATF Education Worker           | no post in place                  |
| ECRDATF Development Worker         | no post in place                  |
| ECRDATF Rehabilitation Coordinator | no post in place                  |

The [Administrator](#) position is funded through the Operational Budget of the ECRDATF [Project Code EC-4] and is hosted by the Dún Laoghaire Rathdown Community Addiction Team (DLRCAT). A specific desk and equipment is sited at their premises in Sandymount Industrial Estate and the position requires that the holder travels to meetings and other events to provide some of the services for the Task Force. The Administrator position is to provide 19.5 hours support per week to the Task Force and is paid at the rate of the first point of the Grade IV pay scale.

The [Coordinator](#) position is funded by the HSE with a permanent staff member who is under the HSE line management of Ms. Louise Devlin, Acting/Area Operations Manager, HSE Addiction Services, Bridge House, Cherry Orchard Hospital, Dublin 10. The HSE Addiction Service remains a regional service straddling across the new Community Healthcare Organisation (CHO) areas now denoted CHO-6 and CHO-7. Thus, at this time, the Coordinator is line managed through CHO-7 but is situated within the geographical area of CHO-6. All HSE Section 39 funded projects are funded through CHO-7 while the Chief Officer for CHO-6 is kept informed of this but does not currently direct the administration and disbursement of these funds.

A [Rehabilitation Coordinator](#) position for each Task Force area forms part of the HSE Service Plans for this year and this Task Force position awaits the filling of this position on complete delivery of this plan.

The Task Force membership comprise community, voluntary, statutory and elected representatives who give freely of their time and expertise to the ongoing support and development of a range of local plans and strategies to best address the problem of drugs including alcohol in the Dublin South, Dublin Southeast and Wicklow areas within the resources available.





Figure 11: Children's Playground, Newtownmountkenny



Figure 12: Children's Playground, Ashford



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# Appendix I: Operational Budget Audited Accounts

## EAST COAST REGIONAL DRUGS TASK FORCE

### ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2015

**COLLIGAN O'CEARBHAILL & CO., CHARTERED ACCOUNTANTS,  
BRI CHUALANN COURT, ADELAIDE ROAD, BRAY, CO. WICKLOW**

**EAST COAST REGIONAL DRUGS TASK FORCE**

**REPORT OF THE AUDITORS TO THE MEMBERS**

We have audited the financial statements on pages 3 to 6 in accordance with Auditing Standards.

In our opinion, the financial statements that have been prepared under the historical cost convention, give a true and fair view of the state of the task force at 31st December 2015 and of its surplus for the year then ended.

We have obtained all the information, which we considered necessary. Proper books have been kept and the balance sheet and income and expenditure accounts are in agreement therewith.

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COLLIGAN O'CEARBHAILL & CO.,  
CHARTERED ACCOUNTANTS,  
REGISTERED AUDITORS,  
BRI CHUALANN COURT,  
ADELAIDE ROAD,  
BRAY,  
CO. WICKLOW.



**ACCOUNTING POLICIES**

The significant accounting policies adopted by the union are as follows: -

**a) Basis of Financial Statements**

The financial statements have been prepared under the historical cost convention and in accordance with financial reporting standards promulgated in Ireland by Chartered Accountants Ireland.

**b) Grant Income**

Grants towards revenue and expenditure are released to the profit and loss account as the related expenditure is incurred.

**EAST COAST REGIONAL DRUGS TASK FORCE**

**INCOME AND EXPENDITURE ACCOUNT**

**FOR THE YEAR ENDED 31st DECEMBER 2015**

|  | <b>2015</b>          | 2014          |
|--|----------------------|---------------|
| INCOME                                     | €                    | €             |
| HSE grants received                        | <b>63,998</b>        | 56,686        |
| EXPENDITURE                                |                      |               |
| Direct costs                               | <b>31,015</b>        | 29,052        |
| Travelling                                 | <b>447</b>           | 385           |
| Staff training                             | -                    | 709           |
| Strategic Plan                             | <b>2,503</b>         | 2,400         |
| Printing, postage & stationery             | <b>330</b>           | 233           |
| Telephone                                  | -                    | 20            |
| The Hub                                    | <b>4,484</b>         | -             |
| Administration support charges             | <b>22,769</b>        | 19,723        |
| Audit fees                                 | <b>984</b>           | 984           |
| Bank charges                               | <b>111</b>           | 83            |
| General expenses                           | -                    | 55            |
| Computer costs                             | <u><b>640</b></u>    | <u>640</u>    |
|  | <b><u>63,283</u></b> | <u>54,284</u> |
| Excess of income over expenditure for year | <b>715</b>           | 2,402         |
| Surplus from previous year repaid to DPU   | -                    | -             |
| Accumulated reserves at beginning of year  | <b><u>5,346</u></b>  | <u>2,944</u>  |
| Accumulated reserves at end of year        | <b><u>6,061</u></b>  | <u>5,346</u>  |



**EAST COAST REGIONAL DRUGS TASK FORCE**

**BALANCE SHEET AS AT 31st DECEMBER 2015**

|                            |       |              | 2015         | 2014         |
|----------------------------|-------|--------------|--------------|--------------|
|                            | Notes | €            | €            | €            |
| <b>CURRENT ASSETS</b>      |       |              |              |              |
| Debtors                    | 1     | -            | 1,233        |              |
| Cash at bank               |       | <u>7,045</u> | <u>5,097</u> |              |
|                            |       |              | 7,045        | 6,330        |
| <b>CURRENT LIABILITIES</b> |       |              |              |              |
| Accruals & Creditors       | 2     |              | <u>(984)</u> | <u>(984)</u> |
| <b>NET CURRENT ASSETS</b>  |       |              |              |              |
|                            |       |              | <u>6,061</u> | <u>5,346</u> |
| Represented by:            |       |              |              |              |
| Accumulated reserves       |       |              | <u>6,061</u> | <u>5,346</u> |

## EAST COAST REGIONAL DRUGS TASK FORCE

### NOTES ON THE ACCOUNTS FOR THE YEAR ENDED 31st DECEMBER 2015

| <b>1</b> | <b>DEBTORS</b>    | <b>2015</b> | <b>2014</b>         |
|----------|-------------------|-------------|---------------------|
|          |                   | €           | €                   |
|          | Grant under-spend | -           | <b>1,233</b>        |
|          | Sundry debtor     | <u>-</u>    | <u>-</u>            |
|          |                   | <u>-</u>    | <b><u>1,233</u></b> |

| <b>2</b> | <b>CREDITORS</b>     | <b>2015</b>       | <b>2014</b>       |
|----------|----------------------|-------------------|-------------------|
|          |                      | €                 | €                 |
|          | Accruals & creditors | <b><u>984</u></b> | <b><u>984</u></b> |

### **3 CONTINGENT LIABILITY**

The Task Force Committee believe they may incur further costs in relation to project EC1 which has now ceased. They believe these costs will be in the region of €500.

### **4 APPROVAL OF ACCOUNTS**

The accounts were approved by East Coast Regional Drugs Task Force on 03/05/16



## Appendix II: Grant and Resource aided Work 2015

# THE EAST COAST REGIONAL DRUGS TASK FORCE RECENTLY LAUNCHED THEIR NEW INFORMATION HUB

*The Hub will be open every Tuesday morning from 9.30am to 11.30am in the Newtown Community Centre, Newtownmountkennedy, Co. Wicklow*

### *We will have the following weekly talks:*

- 6<sup>th</sup> October 2015** - Services provided by Tiglin Residential Treatment Centre - Tiglin Representative
- 13<sup>th</sup> October 2015** - Services provided by the CE Rehabilitation Scheme, Tiglin Day Service, Arklow - CE Tiglin Representative
- 20<sup>th</sup> October 2015** - Services provided by ISPCC Teen Focus - Rebecca Harris
- 27<sup>th</sup> October 2015** - Community based Family Support Services - Christine Keegan
- 3<sup>rd</sup> November 2015** - Specific services provided to the Traveller Community - Peter O'Reilly
- 10<sup>th</sup> November 2015** - Specific services to targeted youth across County Wicklow - Fiona Creedon
- 17<sup>th</sup> November 2015** - Counselling services provided by Living Life Counselling - Kirsty Kirkwood

*The hub provides information on the various different support options open to individuals or families trying to cope with the effects of addiction in the Newtownmountkennedy, Newcastle, Kilcoole and Ashford areas. Come along and have a cuppa and a chat, listen to the guest speaker, pick up some support literature and if you like, have a friendly informal, private and confidential chat with one of our staff who will be happy to help.*

Please Contact us by email if you would like some more information at [ecrdtf@gmail.com](mailto:ecrdtf@gmail.com)

| <i>Code</i> | <i>Agencies Involved</i>  | <i>Purpose/Outcome</i>   | <i>Grant</i> |
|-------------|---|--|--------------|
| 01/15       | Túsla<br>Wicklow Child &<br>Family Project  | a- Working with siblings (9) from 4 families with addiction issues providing a specific focused intervention to address poor social skills, difficulties in groups, self-care and awareness.<br>b- Working with a specific group of 5 aged 10 to 14 years where addiction is present in the family<br>Negative behaviours have been identified in all young people identified  | €1,266.81    |
| 02/15       | Foróige WAY<br>Project<br>Garda Diversion<br>Programme  | To specifically target 12 young people (10 male and 2 female) who are regularly involved in drug and alcohol misuse and anti-social behaviour in their community with a healthy alternative and direct emphasis on all aspects of anti-social behaviour including drug and alcohol use.  | €1,885.71    |
| 03/15       | Fishing Futures<br>Project<br>CEART WTG<br>Tiglin Centre<br>The Foróige WAY<br>Project<br>BBH Community<br>Wicklow    | Provide drug education and awareness raising along with an activity teaching the skills of angling, group activity and hobby/interest to a number of identified males. Two groups will avail of this separately – one aged 14 to 17 and a second aged 18 to 40. Groups will include a mix of communities from the Tiglin centre, Travellers Centre and local young people.   | €2,490.00    |
| 04/15       | Chillax Youth<br>Group Carnew<br>Youth Café   | A ten week series of workshops giving drugs and alcohol information with specific classes on creating alcohol free cocktails culminating in a community party and BBQ (entirely alcohol free) for up to 150 people.  | €2,095.99    |
| 08/15       | Wicklow Child &<br>Family Project<br>Arklow<br>Springboard  | To provide a specialised programme for families who have been identified to either of the Family Support Programmes as requiring intervention and inputs to address family relationships which have been damaged as a result of addiction.   | €5,000.00    |
| 09/15       | ECRDATAF<br>County Wicklow<br>Partnership Ltd<br>School Completion<br>Programme<br>Hillview<br>Community<br>Committee | Provide a tailored education and prevention programme to 8 to 13 year olds to help combat the negative effects of alcohol and drug misuse that contribute to the high incidence of ESL and anti-social behaviour in this identified group who are not being given access to other mainstream services and supports. CAIRDE Programme delivery along with a horse vaulting activity delivered to 16 children from this high deprivation area. | €8,646.71    |
| 10/15       | County Wicklow<br>Partnership Ltd<br>BBH Youth Group<br>Hillview<br>Community<br>Committee                            | Provide a tailored education and prevention programme to six young females aged 13 to 16 who are or at risk of engaging in alcohol/drug misuse along with risky sexual behaviours. School problems have been identified as a direct result.  | €1,412.50    |
| 11/15       | The Foróige WAY<br>Project<br>CEART WTG<br>ISPPC  | Fifteen young people (13 male and 2 female) aged 14 to 17 years identified by the agencies will engage in a drug education programme along with a Build-a-Bike activity with a road safety course and bike camp.   | €5,517.00    |



|       |   |   |                  |
|-------|---|---|------------------|
| 12/15 | ECRDATAF<br>County Wicklow<br>Partnership Ltd<br>HSE<br>Tiglin<br>CEART WTG | To identify, engage with and commence pre-develop work with at least 3 groups of Service Users with a view to building capacity, personal development and engagement with Task Force structures to add a clear voice from this vulnerable group in response to NDS Action 42. | €2,700.00        |
| 13/15 | ECR DATAF<br>Wicklow Child &<br>Family Project<br>Dublin Simon              | Additional counselling and care plan management of persons accessing the Homeless Shelter in Wicklow and carry on supports and completed counselling to help establish and maintain secure accommodation and career progression in the community                              | Nil              |
|       |   | <b>Total €</b>  | <b>31,014.72</b> |

### Appendix III: ECR DATF Work Plan 2015

|   | <i>Objective</i>  | <i>Key Performance Indicators</i>   | <i>Specific Actions to achieve</i>   |
|---|---|---|--|
| 1 | To coordinate the implementation of the National Drugs Strategy in the context of the needs of the region/local area.                   | The number of Task Force meetings and subgroup meetings held; broad-based representation from statutory, community, elected and voluntary sectors;                | 8 Task Force meetings to be held in 2015 with additional meetings as required<br>4 Finance Sub-Group meetings to be held with additional meetings as required<br>6 Prevention & Education group meetings to be held with additional meetings as required<br>6 Treatment & Rehabilitation group meetings to be held with additional meetings as required<br>Review of membership to be held [see point 8]                                   |
| 2 | To implement the actions in the National Drugs Strategy where Task Force have been assigned a role (Nos. 3, 4, 19, 28, 29, 30, 41, 42). | The number of assigned NDS actions that are partially, substantially and fully implemented  | NDS-3: To request representation on the local JPC (again)<br>NDS-4: To request representation on the local LCDC (again)<br>NDS-19: To be addressed through the P&E group<br>NDS-28: To be addressed through the P&E group<br>NDS-29: To be addressed through the P&E group<br>NDS-30: To be addressed through the P&E group<br>NDS-41: To be addressed through the T&R group<br>NDS-42: To be addressed through individual project liaison |
| 3 | To promote the implementation of evidence-based regional drug and alcohol strategies and to exchange best practice                      | Regional drug strategies developed through a co-ordinated approach, utilising a sound evidence base; regular information sharing with other bodies                | To progress our current Local Strategy<br>To promote interagency cooperation through attendance and participation in work within the JPC and LCDC structures [see point 2]<br>To participate in local childcare committees and other similar structures  |
| 4 | To support and strengthen community based responses to drug and alcohol misuse  | Communities to be engaged in information gathering, planning and establishment of responses to drug misuse; the Task Force has an appropriate number of community | Review of membership to be held [see point 8]<br>To enhance communication on how all agencies are currently working in relation to drug issues in the area   |



|   |   | representatives   |   |
|---|---|---|---|
| 5 | To maintain an up-to-date overview on the nature and extent of drug misuse in the region  | Existing information sources used to monitor trends in the nature and extent of drug misuse in the region   | To prepare and agree a template for notification of emerging issues and trends to ensure the Task Force is informed in a timely manner<br>To review community consultation on issues relating to the work of the Task Force [see point 4]   |
| 6 | To identify and report on emerging issues and advocate for the development of policies or actions needed to address them  | Annual plan in place containing strategic objectives and actions to address emerging issues, including a procedure for reporting gaps and blocks and a procedure for reporting to the NCC via Network reps. | To prepare and agree a template for notification of emerging issues and trends to ensure the Task Force is informed in a timely manner<br>To draft a plan to address issues as they arise   |
| 7 | To monitor, evaluate and assess the impact of the funded projects and their continued relevance to the Regional Drugs Task Force strategy and to recommend changes in the funding allocations as deemed necessary | Projects recommended for funding are relevant to the Regional Drugs Task Force strategy and are evaluated annually  | To monitor monthly spend for all funded projects and address issues as they arise<br>To assess all new proposals submitted in respect of the area plan and resource requirements  |
| 8 | To complete a Governance Review   | Sign off on all policies and procedures.<br>Sign off on Terms of Reference<br>New members and new ideas are brought to the meetings and the work of the Task Force continues to be relevant to the Region.  | To review current membership and its capacity/commitment to progressing the work of the Task Force<br>To review role adequacy, role legitimacy and role support for all Task Force members<br>To expand membership to ensure as fully a representation as possible<br>To review adherence to all policies and procedures and terms of the Task Force<br>To convene a Governance Group to oversee this work and report to the Task Force |
| 9 | To address Gaps and Blocks in Service provision   | Progress the need for an under-18 treatment service<br>Progress on capturing the provision of alcohol specific services in the area<br>Progress interagency cooperation and specific joint initiatives      | Set up a working committee to assess needs of the U-18 group<br>Set up a committee to assess alcohol provision in the area<br>Offer additional resources to encourage greater interagency initiatives [see point 10]  |

|    |   |   |   |
|----|---|---|---|
| 10 | To enhance Interagency Cooperation and Initiatives                            | <p>Membership of JPC and LCDC groups in this area [per point 2]</p> <p>Membership of other relevant groups in this area</p> <p>Support of projects and agencies working on initiatives in this area</p> <p>Progress of the rollout of the National Drug Rehabilitation Framework across the services in this area</p> | <p>To work in these forums to record issues and responses between the Task Force and the JPC and LCDC</p> <p>To assist with broader community responses within the forum of relevant area action groups</p> <p>To offer incentivised resources to all projects to deliver additional/enhanced services in this way</p> <p>To invite a Rehabilitation Coordinator from another area to explain the role</p> <p>To assess if an existing worker in this area could take on this role and/or to apply for additional funding to progress this</p> <p>To progress all rehabilitation work under the NDRF protocols and policies as they are circulated within the resources available to the Task Force</p> |
| 11 | To manage an efficient Reporting Mechanism                                    | Consultation and submission of replies to all enquiries   | <p>To reply to all reasonable information requested by the Minister or his representatives</p> <p>To reply to all reasonable information requested by the Department of Health Drug Policy Unit Principal Officer or her representatives</p> <p>To reply to all reasonable information requested by the HSE Addiction Services Manager or her representatives</p>   |
| 12 | To assist in the development of the New National Drug Strategy [2017 onwards] | Consultation and submission of collective view  | To avail of each and every opportunity to contribute to and assist with the development of a new and enhance Drug Strategy  |
| 13 | To address Special Issues   | Progress achieved in identifying emerging issues and addressing   | <p>To progress the inclusion of alcohol in our brief</p> <p>To progress the lack of coordinated services in the North Wicklow area.</p> <p>To monitor the recording of use of prescription drugs particularly those with the possibility of habit formation e.g. pregabalin</p> <p>To identify alternative pathways where service provision has broken down</p>   |
| 13 | To monitor the Workplan   | Progress achieved   | To review per quarter   |