

Inchicore
Bluebell
**Community
Addiction Team**



IBCAT
Strategy 2018-2021

“Without it I
wouldn't be
here, it gives
me great
support.”

*Service User speaking
about IBCAT*



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Notes from the Chairperson

The Inchicore Bluebell Community Addiction Team has a commitment to quality. As a newly appointed Chairperson, I am proud to be part of a dynamic board of directors, management and staff who are passionate about creating the strategic vision for the future of the organisation.

The process we have undertaken over the last few months in developing the strategic plan has allowed me to work closely with the staff and gain an understanding of the depth of their skills and experience. It has motivated me to ensure that the board provides the framework that allows staff to flourish.

The development of that framework started last year with a robust review of our corporate governance to ensure funder confidence in our services. We engaged Governance Ireland who undertook a review of our governance structure and procedures. From that review, we undertook several actions which included the establishment of a finance, risk and audit sub-committee, and a quality assurance sub-committee. I would personally like to thank the board of directors who committed the additional time to these committees, as they form an important function of our governance structure.

In 2017, we also undertook three external quality assurance audits which allowed us to identify key areas of improvement. A key part of our strategy going forward is to continue to obtain external and internal validation and controls to assist us in the continual improvement of the standard we offer to our services users. We have also recently started inviting our service users to our board meetings, so we can hear first hand the impact we are creating, but also any areas of specific improvement we can make.

Like any report of this nature, it takes a commitment from many people to take time out of their normal busy schedules. I would like to take this opportunity to thank the board of directors, management and staff for all their input. What I like about this strategic report, is that there are some aspirational goals that may not seem achievable given limited resources. However, this drives innovation and focus and further brings us together as a galvanised unit.

To Chris Gordon who facilitated the process, I thank for your professionalism, and getting us all to step out of the corners and think big !

Jamie Regan
Chairperson



Director's Notes



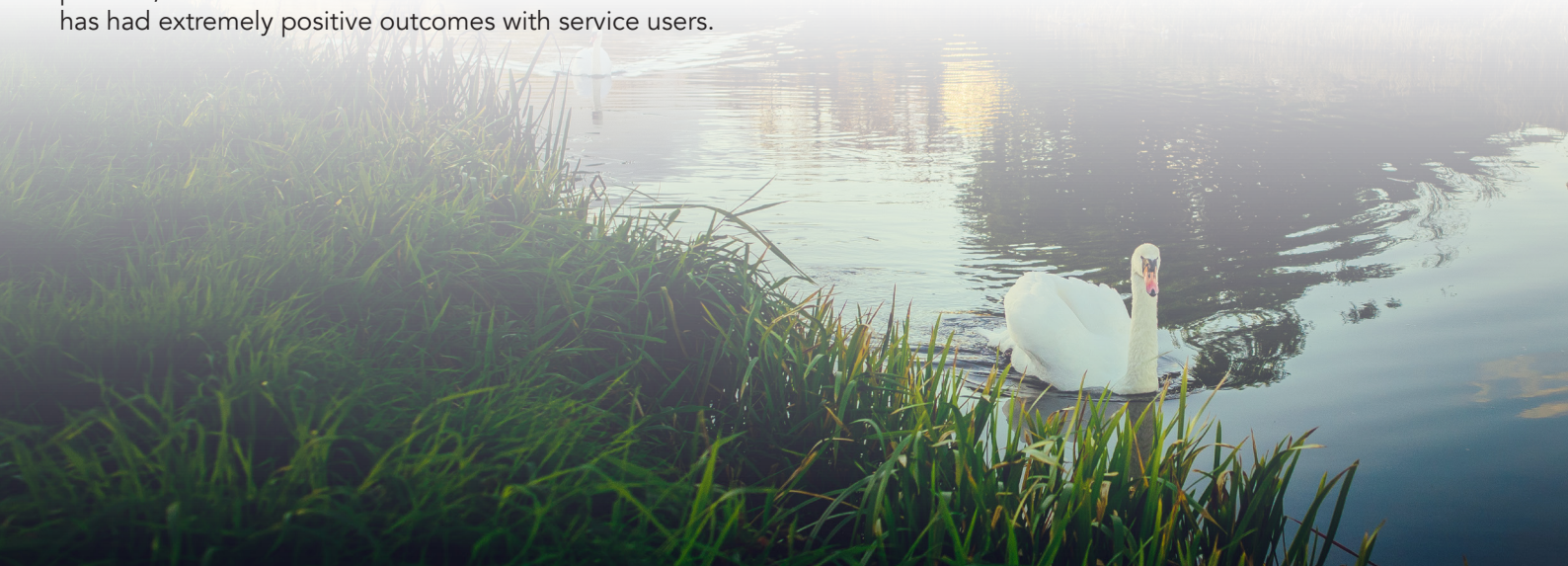
The past number of years has seen changes in the drug and alcohol sector especially around quality standards. Our ambition is to be above the standards required, to make sure that service users have every opportunity to reduce harm or make changes in their lifestyle choice.

During the research for this new strategic plan, we have engaged all levels of the organisation and wider stakeholders to assist and inform its design. We seek not to just maintain the already high standard of service delivery, but to also increase the quality of the services we deliver, whilst also increasing the variety of approaches that mirror the ever-changing environment of our service users.

Although we seek to improve the high-quality service that IBCAT provides, we also believe in an aspirational future for the IBCAT model. We feel it is of high quality and that it can be replicated in any community. The next three years plan is ambitious, however, I think it identifies and attempts to address fundamental gaps in service provision. It seeks to address all aspects of the journey of our service users to be fully reintegrated within our communities and society. This is a key aim and as an organisation we believe that development of social enterprise is integral to that. We believe strongly that our model of care is one of best practice, in line with Safer Better Healthcare standards and has had extremely positive outcomes with service users.

I would personally like to thank the new chair and board for putting their trust in the team and I to create this vision for the next three years and supporting us through the process. I would like to thank the staff team for their dedication and professionalism and their ability to adapt to any given situation whilst maintaining high standards. They truly are the soul of IBCAT. I would like to thank the service users for helping to co-design this plan and putting their trust in us to serve them. The project relies on our funding stakeholders; HSE, LDTF, DCYA, DOJ, TUSLA, Oblate Fathers, and Sisters of Mercy who continue to fund us and support us in our social mission. Thanks to Louise Devlin, Damien Murphy and Keri Goodliffe from the HSE, who have been a consistent source of support for the organisation. We look forward to achieving the vision of the strategic plan in partnership with the HSE and Drug Task Force colleagues. There are many more people to thank, you know who you are. We look forward to working with those who have been involved, supported and worked with us thus far and also look forward to welcoming new collaborators in the future.

Ní neart go cur le chéile
Stuart Fraser



About IBCAT

Vision

Our vision is that all those living with addiction will have access to a holistic addiction service locally.

Mission

Our mission is to provide a quality service to those living with addiction and to promote local responses to these issues.

Our Values

IBCAT is a value driven organisation.

We are committed to:

- change
- quality
- honesty
- service user involvement
- innovation
- integrity

These strong values are at the heart of all we do, because we believe in people's capacity to change.

We believe in making an impact that not only improves the health of the individual but has a lasting positive impact on the wellbeing of their families, friends and the communities in which they live. People who use our services are not just people with drug and alcohol problems, they are partners, fathers, mothers, sisters, grandmothers, children, brothers, friends, work colleagues and carers.

Our Purpose

- We support people to make lasting changes to their lives.
- We believe in people's capacity to change.
- We believe that recovery is possible for everyone and everyone should have the opportunity to reach their full potential.
- We believe that if people are wanting to maintain their lifestyle choice, we will assist to make it as safe as possible, with minimum impact to their family and community.



Our Core Principles

Evidence Based Practice

We in IBCAT, work with the acknowledged research and best practices in the area of treatment and rehabilitation. To this end, we adopt a range of models and practices that meet our service users with their individual needs based on recommended and researched approaches. All of our staff are qualified at Diploma level or above in addiction social care and child care as a mark of our commitment to best practice and quality standards. IBCAT staff are all trained in restorative practice and justice models. In addition, staff at IBCAT are taking part in leading drug worker regulation on a national level.

Continuum of Care

We believe in a holistic approach to meeting service user needs with our programmes. We deliver quality Tier 2 and Tier 3 treatment and rehabilitation programmes that form part of the continuum of care that service users require to live drug and alcohol free. Our holistic approach includes providing access to the complimentary services in the areas of childcare, education, employment, health, housing and training amongst others. While we work with partners to meet gaps in the continuum of care, we also strongly believe in providing opportunities where there are few options. IBCAT will explore social enterprise development options for employment for some of our service users to help support our service users through their challenges.

Access to Services

IBCAT believes that services should be available to all individuals who have problematic substance use. Our work includes meeting people where they are at, to stabilise and reduce potential harm. To this end, our services are open to low threshold services users through to supported recovery. We do so through shared care with our referral partners, our associated stakeholders and the commitment of staff and community within IBCAT.

Quality & Standards

IBCAT recognises the need for standards at all levels of the organisation. To that end, after meeting and exceeding our obligations under the QUADS (Quality Standards in Drug and Alcohol Standards), IBCAT will aim to complete the SBHC (Safer Better Health Care) standard in the coming year. In addition to the obligations in delivering high quality clinical support, the organisation is on the journey for completing the Good Governance Code standards. The organisation is committed to delivering services in a transparent and open manner with a focus on quality and standards.

Service User Involvement

IBCAT believes strongly in the voice of service users when providing support for substance misuse. Our commitment to 'Your Service, Your Say' principles, our service user feedback models and our approach to including service user representation is core to our values and our approach to treatment and rehabilitation.

Children First

IBCAT has offered complimentary family and children supports through our service for a number of years. Through our creche, early years and summer programmes, IBCAT has committed to early years development and works on best national and international standards in childcare. IBCAT adheres strictly to the National Guidelines for the Protection and Welfare of Children and works with leading researchers on further developing our standards and practices.



Overview of Services Provided

Our Three Pillars

ADULT ADDICTION SERVICES	CHILDCARE	COMMUNITY DEVELOPMENT
Cannabis Peer Support Group	Morning Programme Incorporating High Scope	Community Employment Work Placements Administration Support/ House hold, Addiction Practitioner development and childcare
Dual Diagnosis Group	Afternoon Programme	Students on Placement from Third Level Education
Family Support Group	Summer Programme	Harm minimisation/ Health Promotion
Women's Group	Triple P Programme	Cross Service Referral Pathways
SMART Recovery <ul style="list-style-type: none"> • Male Specific • Female Specific 	Play therapy	Lead on the Treatment and Rehabilitation Subcommittee of Task force
Progression Group	Cultural Awareness Group	CAN 2 educational development
Structured Daily Drop-In Service for Active Drug Users	Joint Family Work and care planning with Addiction Team	Social Enterprise
One to One Key working and Care Planning Services for Active Drug Users	Meitheal, case conferences and child protection	Social Franchise
Counselling Service	Family Outreach	Christmas Tree Commemoration
Stabilisation Day Programme		Respite Care
Benzodiazepine Support Group		
Shared Care Agreements with the local Primary Care Doctors Concerning Addiction		
After care service		
Art Psychotherapy Group		
Community Prison Links/ Restorative Justice Group		

Overview of Services Provided

Range of Services Addiction

LOW THRESHOLD	PROGRESSION AND STABILISATION WORK	PRIMARY TREATMENT	COMMUNITY REINTEGRATION AND AFTERCARE
Structured Daily Drop in Service for Active Drug Users	Progression Group	Counselling Service	Community Prison Links/ Restorative Justice Group
Harm Minimisation	Stabilisation Day Programme	Key working (CBT, MI, BSFT)	After care service
Key working (Person Centred)	Benzodiazepine Support Group	Care Planning	Key Working / aftercare
Care Planning	Dual Diagnosis Group	Pre-entry Preparation and Referral to Residential Treatment	Social Care Referrals and assist
Outreach	Shared Care Agreements with the local Primary Care Doctors in relation to Addiction	Community Detox Support	
Daily meals / nutrition provided in drop in	Art Psychotherapy Group	Prison Links work and preparation for release.	
	Cannabis Group		
	Women's Group		
	Key Working / care planning		
	SMART Recovery <ul style="list-style-type: none"> • Male Specific • Female Specific 		

Principles of the Strategic Plan

This plan has adopted the following principles when being developed for IBCAT:

OPEN AND TRANSPARENT

All the information collected and used in this document was made available by all participants of the process at all points.

INCLUSIVE

We have aimed to get as broad a view of the project as possible.

DISCUSSION, DIALOGUE AND DEBATE

We have conducted this research and strategic document with the hope of encouraging discussion, dialogue and debate to encourage all viewpoints and possibilities

RIGOUR & REFLECTION

We have been intentionally reflective on our approach to make sure that we encourage all participants to engage fully in the process.

AMBITION & REALISTIC

We strive to aim high with our plan for the coming 3 years while remaining firmly grounded in the reality of the environment that we operate in.

COLLABORATION & BEST PRACTICE

It is always best to work with others in achieving similar goals. It is our intention to partner with others where possible and to learn from best practice both nationally and internationally.

Strategic Planning Process

Setting the scene

Consulting Stakeholders

Workshopping the outcomes

Developing the plan

Strategic Aims

The strategic aims can be collected into the following headings

1. To provide a safe environment where people affected by substance misuse can explore in a non-judgemental way, the issues that are impacting on their lives
2. To promote opportunities for individuals to move out of the cycle of addiction
3. To develop opportunities for children and young people to reach their full potential
4. To identify gaps in service provision and initiate local and national responses
5. To promote a better understanding of how the substance use problem impacts locally and increase the community awareness of drug and alcohol issues
6. To develop the corporate governance of the organisation in accordance with the strategic plan

Our objectives with each of the strategic aims is to:

- Strive for Best Practice
- Corporate Governance
- Develop Complementary Programmes
- Future Innovation & Growth



Strategic Aims

AIM 1:		
To maintain and improve on a safe environment where people affected by substance misuse can explore in a non-judgemental way, the issues that are impacting on their lives		
ACTION	KPI	TARGET DATE
Develop the stabilisation programme from four days to five days	Develop costed plan for increasing Stabilisation programme to 5 days	Q4 18
Open Stabilisation Programme to a broader remit of referral areas	Engage with relevant stakeholders to extend opportunities for clients to avail of the service in surrounding task force areas	Ongoing
Pre-Entry Stabilisation Programme due to waiting list or suitability	Service Agreement with all referring services	Q3 18
GP Methadone Prescribing and General Health Doctor on Site or Primary Care Hot desking to increase shared care	Explore doctor on site for minimum number of hours per month for hard to engage clients. Set up hotdesk in Primary Care Setting to provide shared care to clients who have GP but don't access services	Q1 19
Increase the organisation's capacity for research	Internal: Build on internal research capabilities through salesforce External: Keep in line with latest innovation in drug treatment Quarterly practice development days Continue to assess gaps and blocks in the communities we serve	Ongoing Ongoing Q3 18 Ongoing
Safer Better Health Care Governance	Implement best practice Safer Better Health Care compliance through completing recommendations from external audit through completing recommendations from external audit	Q2 19
To build on existing Service User input and to continue to develop effective Service User Involvement	Nominated Service user representatives for the service with quarterly meetings with Management	Q3 18

Strategic Aims

AIM 2:

To increase and expand opportunities for individuals to move out of the cycle of addiction

ACTION	KPI	TARGET DATE
Research	Develop internal and external research capabilities with other national and international partners <ul style="list-style-type: none"> • Statutory Reporting Mechanisms • Internal Research 	Ongoing
Collaboration	Explore further collaborations with all stakeholders to reduce duplication of workload, maximise benefit to service users of holistic quality of care	Ongoing
NDRIC 's Continuum of Care	Develop internal and external pathways on the continuum of care Ensure that all partners and stakeholders of the continuum of care have referral pathways and MOU's are updated and maintained	Ongoing
Develop Client Shared Care Protocols	Develop client shared care with HSE Methadone Maintenance Clinic to IBCAT	Ongoing
Tier 4 Partners	Develop pathways from IBCAT to residential treatment services	Ongoing

AIM 3:

To develop opportunities for children and young people to reach their full potential

ACTION	KPI	TARGET DATE
Research and formulate a 13-19 yrs Youth Drug Treatment Service.	Commission a feasibility study with relevant partners with costings	Q4 18
Increasing childcare service space	Develop cost benefit analysis for additional space to run children programmes	Q4 18
Intergenerational work	Commission a feasibility study of intergenerational work in the area Seek grants to support the work	Q2 19
Research	Research youth needs in the area	Ongoing

Strategic Aims

AIM 4:

To identify gaps in service provision and initiate local and national responses

ACTION	KPI	TARGET DATE
Speech and Language Therapy Resources for young people	Increase access to speech and language therapy resources for young people	Ongoing
Task Force	Continue to develop best practice in reporting for the Canals Task Force through the Treatment & Rehabilitation Committee	Q1 19
Social Enterprise	Investigate a Social Enterprise Model for ensuring continuum of care in regards to employment opportunities. <ul style="list-style-type: none"> • Feasibility Study • Business plan 	Q4 19 Q4 20
Social Franchise	Replicable model of social franchise for IBCAT in other geographic locations Seek tenders where possible	Q4 18 Q1 20

AIM 5:

To promote a better understanding of how the substance misuse problem impacts communities, individuals and families. Whilst increasing the community awareness around the nature of addiction to promote more inclusive supports from communities.

ACTION	KPI	TARGET DATE
Research	Explore new research areas	Ongoing
Tier 1, 2 and 4 Referral Partners	Continue to grow and develop new Tier referral partners and introduce MOU's as per NDRIC protocols Look to develop cross task force referral pathways	Ongoing
Continue to develop job placements for service users (education)	Create partnerships and placements for community employment so that people can get job ready and have the experience of employment	Ongoing
To Develop and Effective Communication Strategy	Ensure continued update of communication and outreach to stakeholders, service users and communities Formalised communications plan in place	Q4 18

Strategic Aims

AIM 6:

To develop the corporate governance of the organisation in accordance with the strategic plan

ACTION	KPI	TARGET DATE
Achieve Good Governance Code	Complete the Good Governance Code	Q3 19
Achieve Fundraising Principles	Implement best practice of fundraising guidelines and codes of practice from Wheel, CII	Q2 19
Safer Better Health Care	To achieve 100% compliance following external review	Q4 19
To continue to work towards the National Drug Strategy and NDRIC Protocols	To continue to work to our service agreement provision and logic model targets	Q4 19
Improve Building Accessibility	Introduce wheelchair access for ground floor Kavanagh House	Q1 19
Advocacy & Lobbying	Develop Advocacy & Lobbying Policy & Strategy for IBCAT	Q3 19
IBCAT Rebrand	Develop a rebrand for IBCAT services	Q4 18
Staff Training and Development	Updates staff training plan developed including progression routes with social franchise	Q2 19
	Continue to develop links with 3rd level education to look at supported/ subsidised staff development in return for student placements	Q2 19



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