**Project Summary – Community Alcohol Detox 2020**

1. **Title of Initiative: Community Alcohol Detox Programme**
2. **Objective**

The Strategic Initiative aims to achieve a community-based response to alcohol misuse through a community alcohol detox. The project aims to respond to the local needs of people in the four Task Force areas and provide a model of best practice which is aligned to the principles of Sláintecare, the goals of ‘Reducing Harm Supporting Recovery' and the National Drug Rehabilitation Framework. The Community Alcohol Detox framework will strengthen the existing response to people seeking to address their alcohol use within a community setting and to embed best practice within services at a local level and work collaboratively across the four Task Forces.

1. **Activities Over Duration of Programme:**
   * Engagement of an Alcohol Link Worker.
   * Cross-Task Force project management group established in partnership with the HSE Addiction Services.
   * To map existing Task Force funded projects /services under the 4 Tiers and their capacity to work effectively under the NDRF.
   * Link individuals with appropriate services.
   * Communication to the general population via posters/leaflets with details of the project.
   * To identify as shared measurement tool that can be used across the projects/services.
   * Project / service staff trained in Motivational Interviewing and other identified relevant training.
   * Evaluation process to be agreed and an implementation plan for the recommendations of an evaluation to be designed.
2. **Service user involvement/engagement/co-production (Max 150\* words):**

The Community Alcohol Detox project will apply co -production principles to include service users in the design and development of their treatment plan .Engagement of service user in reviewing the delivery of quality services will employ a service user involvement mechanism that is informed by the Irish Human Rights and Equality Commissions Section 42 principles.

This CAD approach is unique in that it does not only target current service users of section 39 Task Force projects, it will also include those target groups who have not been able to access services or do not wish to access those services but may require information on alternative supports.

**Service User involvement will apply a range of methods:**

1. Review and feedback forms.
2. Questionnaires and Brief surveys – online and in hard copy.
3. Formal feedback groups in the projects/services.
4. Identified networks with peers who can participate in consultations.
5. Provide for service user consultations within services and a stand-alone consultation/s
6. **Collaboration/interagency working: Strategic Initiative works in a collaborative manner with other agencies?**

The Alcohol Link Worker will work with the Task Force staff and project staff to develop robust interagency protocols in line with the National Drug Rehabilitation Framework. This project aims to build on existing resources and expertise to respond to the issues of alcohol misuse and will work collaboratively with a variety of stakeholders. The CAD will work with the Task Force and Section 39 projects, Primary Care and community GPs to build a network of service that are invested in a collaborative approach. The investment in the training of staff and the strengthening of interagency work.

It will broker and in-reach arrangement with James's Hospital A&E to strengthen the referral from emergency hospital settings to community-based supports for individuals where problematic alcohol use is an issue.

It will liaise with service user networks such as the ‘Hepatitis C buddies’, the Community Peer training, UISCE, SERF, the Local Policing Fora etc.

1. **The evidence for this approach?**

* The CAD was developed through research of similar community alcohol detox projects in Ireland and the UK. The evidence base indicates that much of this harm is preventable. The introduction and development of comprehensive, integrated local alcohol treatment systems considerably benefit hazardous, harmful and dependent drinkers, their families and social networks, and the wider community.
* The approach is based on a model of practice that adheres to the principles of Sláintecare and the National Drug Rehabilitation Framework. Motivational Interviewing is one evidenced based intervention that projects will be trained in to successfully deliver the CAD. The service user engagement model of co-production has been successfully deliver the HSE Addiction Services and is recognised as an effective method for meaningful service user involvement in the Mental health services.