TARGETING HARM

THE STRATEGIC PLAN OF THE ANA LIFFEY DRUG PROJECT 2015-2017
Chairperson’s Foreword

Welcome to the Ana Liffey Drug Project’s Strategic Plan for 2015-2017. This plan has been developed in a different macro environment to its predecessor. Whereas our plan for 2012-2014 was set out in a period of recession, the current plan resides in the more positive context of economic recovery. As an NGO with funding largely derived from statutory sources, the Ana Liffey suffered significantly in terms of funding during the downturn. This made it difficult to do the resource intensive aspects of organisational growth – establishing new services, for instance, simply because the money to do it isn’t available. However, straitened circumstances also help organisations become lean – they provide opportunities to think innovatively and work smarter. I am proud to say that the organisation has taken these opportunities and is in a strong position as we look to the future. The regulatory landscape has also changed. In this regard, I welcome the establishment of the Charities Regulatory Authority and we look forward to working with it in the future.

As Chairperson, I have three core issues which I believe are central to maintaining the strength of the organisation. First, to continue to strengthen and develop our governance practices and structures. Strong organisations have strong governance. I am glad to say that this is the case at the Ana Liffey and I look forward to a top-to-tail review of our current governance processes to ensure that we are meeting current good practice in the area as we sign up to the Governance Code.

Second, to continue to ensure that the organisation has clear, focused goals to work towards and that these are fully incorporated into work plans for the duration of the current plan. Success breeds success, and achievable goals are critical – both to ensure buy in for delivery from staff and volunteers at all levels of the organisation, and to ensure transparency. It is important that our funders and other stakeholders can see what the organisation stands for and what it does.

Finally, and perhaps most importantly, to preserve the ethos of the organisation. In my tenure on the Council of Management, both as member and now as Chair, I have been struck by how the
ethos of the organisation is cherished by all staff. Ana Liffey exists to provide valuable, helpful services to those who problematically use drugs, their families and broader communities. This is done through the prism of pragmatism. We do not condone nor condemn drug use. We are non-judgmental and client centred, believing in the potential of every individual. We believe in the value of harm reduction. Most importantly, we work very hard to keep the barriers to availing of our services as low as possible – we are a low threshold, inclusive service. These values pervade the Ana Liffey and make the organisation what it is.

I am glad to say that this strategic plan speaks to all three of the core issues I have identified. I have no doubt that by following the course that the Council of Management has set in approving this plan, the organisation will continue to develop from a position of strength, as it works towards a society where all people affected by problem substance use are treated with dignity and respect and have access to quality services.

Eddie Matthews
Chairperson
Council of Management
Director’s Report

Introduction
The Ana Liffey Drug Project is a national provider of psychosocial and medical services to active drug users and their families. It also has a role to play in broader society, through advocacy and openness. Our strategic plan for 2015-2017 sets out ambitious, but attainable goals across a range of areas. Ultimately, delivering on it will strengthen the organisation and enable us to provide better services to those who need them and better value for money to those who support us.

Developing the 2015-2017 Strategic Plan
The Strategic Plan 2015-2017 builds on the foundations of our last plan, reflecting a practical and ambitious outline for activity over the coming three years. The new plan represents a synthesis of many contributions. There has been a consideration of the lived experience of our service users and the challenges they face; a review of the sectoral context including economic, legislative and social issues; and a reflection on the various contributions made by stakeholder groups.

Consultation Process
The Senior Management Team, led by myself and supported by an external consultant, oversaw the plan’s development. This group established and managed a consultation process to ensure stakeholder input and took responsibility for developing a draft plan for the Council of Management and for the preparation of the final plan. This group met at scheduled intervals from March to October 2014 during the plan’s development.

Central to the process was ensuring that all stakeholders who wished to contribute were given the opportunity to do so. Importantly, the views of those who use our services were taken on board. In this regard, we held one-to-one meetings with those who wanted to have their say.

Two one-day facilitated workshops were carried out with staff members – one with Team Leaders in July and one with a representative staff group from across services and locations in August. Finally, a wide range of external stakeholders were
presented with draft goals and asked for their input during August and September. These included funders; other government departments; partner organisations; sector organisations and interest groups; academics; politicians; and international experts. Consultations were conducted by email survey.

A draft of the plan was prepared and presented to the Council of Management for consideration. The Council made further amendments before signing off at its meeting of 24th September 2014.

**Measuring Achievement**
It is important to be able to effectively monitor delivery of the plan. Overall responsibility for delivery of the plan lies with the Director. However, its achievement requires the focus and commitment of everyone in the organisation. All key tasks in the plan are owned by either the Director, the Head of Services or the Head of Finance and Administration. The plan can be further broken down into more finely detailed tasks, each of which is the responsibility of a Team Leader or Project Worker. The key issue is that at each level of the plan, named individuals are responsible for achieving SMART objectives relating to its delivery to facilitate easy monitoring and adjustment. An update on delivery of the plan is a standing item on the Council of Management’s agenda, to ensure that its delivery is monitored at all organisational levels. An interim review will be conducted in July 2016.

**Conclusion**
We are very busy in our everyday work; working with many people with multiple and complex needs. The strategic planning process afforded us the space to consider where we are going, the resulting Strategic Plan is a renewed starting point - it outlines where we are going. We will work hard, we will work together internally as a unit and in partnership externally to achieve these goals. We will do this to ensure that we continue to deliver on our Mission to reduce harm to individuals and society affected by problem substance use.

Tony Duffin  
Director
TARGETING HARM
## Goals

*We will improve to ensure continuing good service provision, governance and ethos.*

- Further develop communication procedures with relevant stakeholders to identify emerging drug trends and respond to the associated risks.

- Develop and implement an external Communication Plan that supports our strategy, represents the lived experience of our Service Users and challenges the stigma they encounter.

- Develop a Fundraising Strategy to provide income to supplement Ana Liffey’s revenues and support all services.

- Further develop a learning and development culture within the organisation.

- Further develop our systems to capture data and measure the impact of services and service outcomes to ensure evidence informed practice.

- Improve internal management processes and communication structures.

- Continue to monitor and implement good practice standards in governance and financial management.
Goals

*We will innovate to ensure we meet the needs of our Service Users through progressive initiatives.*

- Extend low threshold services nationally and deliver these services in partnership locally, in order to address the unmet needs of people experiencing problem substance use.

- Secure stakeholder support, plan and pilot the provision of Medically Supervised Injecting Centres.

- Secure resources for and pilot Low Threshold Residential Stabilisation Services.

- Expand and develop our range of innovative online intervention tools, information and support services for Service Users, families and peer organisations.

- In partnership, work to reduce the incidents of overdose at a local and national level.

- Define a low threshold model of intervention in partnership with DCU based on the experience and expertise of Ana Liffey and other relevant organisations.
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About the Ana Liffey

The Ana Liffey Drug Project’s primary activity is to provide low threshold harm reduction services to active drug users. By low threshold, we mean that the barriers to availing of our services are kept as low as possible. By harm reduction, we mean that we aim to reduce the harm that drug use causes to individuals, families and communities. In addition to our direct services, we also perform advocacy and support roles at an organisational level in the addiction sector in Ireland and beyond.

Vision
Our vision is for a society where all people affected by problem substance use are treated with dignity and respect and have access to quality services.

Mission
Our mission is to work with people affected by problem substance use and the organisations that assist them. We do this to reduce harm to individuals and society, and to provide opportunities for development of those individuals and organisations.

Values
*The Ana Liffey neither promotes nor denounces substance use but seeks to respond to problems associated with it.*

What this means:
- We support people to reduce harm
- We respond to people’s needs
- We recognise the potential of the people we work with
- We provide evidence based responses
- We are innovative.

*The Ana Liffey believes in rights and responsibilities.*

What this means:
- We believe in supporting people to know their rights
- We believe in encouraging people to take responsibility
- We treat all people who come into contact with Ana Liffey with dignity and respect.
The Ana Liffey is pragmatic.

What this means:
• We turn words into actions
• What matters is what we do
• We identify, take and manage risks
• We are solution focused
• We deliver on our commitments.

The Ana Liffey aims to make a positive contribution to society.

What this means:
• We actively engage in the promotion of a partnership approach
• We are open and accountable
• We are a quality led organisation and a leader in good professional practice
• We have a local, national and international perspective.
Further information
We invite you to visit aldp.ie for further information, like us on facebook.com/analiffey or follow us on twitter.com/AnaLiffey

Range of Services
At Ana Liffey we provide contact, assessment, intervention, and referral services to a range of service users from various locations across Ireland. We also work with other services to support improvements in service delivery. Partnership is a key element of how we work; in all our services we seek to work together with other organisations to ensure that vulnerable people affected by problem substance use experience a seamless continuum of care. We currently provide services in the Dublin, Midlands and Midwest Regions. Service delivery in each area is tailored to the presenting need.

Examples of the types of intervention the Ana Liffey currently provide include:

Key Working and Case Management
We provide support services and one-to-one advocacy, supporting our service users to make positive changes in their lives.

Medical Services
We provide nursing services on a fixed site and outreach basis. Our Nurse Qualified Project Worker is integrated into their project team. We also facilitate access to weekly GP services through our partnership work with Safetynet.

Group Work
We run a range of tailored groups in each local area focusing on harm reduction, relapse prevention and peer education and support.

Inreach Services
We work in partnership with other organisations to bring services to our service users. We welcome other agencies into our services to work onsite alongside our teams.
**Assertive Outreach**
We provide street based outreach on a regular basis, or in response to, requests from stakeholders. There are a number of reasons people may not wish to or be able to access centre-based services; by conducting outreach we can ensure that these people are not excluded from receiving a service.

**Needle and Syringe Programme (NSP)**
We provide NSP services on an outreach basis to our service users.

**Prison Work**
We provide group work and one-to-one interventions in prison. We also provide community-based support to people leaving prison.

**Online and Digital Services:**
We provide a range of online information and tools through our two websites aldp.ie and drugs.ie.