

**ANA LIFFEY
DRUG PROJECT
ANNUAL REPORT
2012**

Chairperson's Report



From the start, 2012, our 30th Anniversary Year, was an eventful year for the Ana Liffey Drug Project.

In December 2011, the drugs.ie service, Ireland's national drug and alcohol information and support service, had transferred across to Ana Liffey. We are proud to deliver this service, and the resources we have been able to allocate in this area have enhanced our internal expertise and capacity to deliver digital and online services.

In addition to this development, we also continued to focus on direct services to our clients across the country. The work of our Midlands team was enhanced in 2012 by the roll out of a clinical psychology service across the four counties to complement existing service delivery in the region. In May 2012, we established a presence in the Mid-West region, with the development of a team of five based in Limerick. All this work took place against the backdrop of continued service provision in Dublin, where service restructuring began in late 2012, and in the North East, where we continue to deliver a needle and syringe programme.

Thus, 2012 was a year in which Ana Liffey developed into a service with a true national remit, providing services in twelve of the twenty six counties.

We also launched our strategic plan in January 2012, which is the mandate for the Director to lead the work of the Ana Liffey until the end of 2014. Two significant innovative goals from the strategy which I would like to highlight here are the development of a Crisis Residential Unit for people experiencing problematic and/or poly-drug use and the development of a Medically Supervised Injecting Centre. The development of such services in Ireland would greatly improve the situation for many people we are currently engaged with. Significant steps are being made to progress these goals, and to make these services a reality for the people that need them.

It is important to note that the development of our services has occurred in an environment that continues to be demanding for the organisation, as prevailing economic conditions since 2007 have proved difficult for everybody. The Ana Liffey continues to manage and adapt to shifting client needs and continued funding pressures. We have been able to expand the scope and reach of our services because we have reacted in a dynamic and flexible way to the challenges we face; and because there is recognition of the value of the services Ana Liffey provides. We are no longer a local project based in the north inner city of Dublin. We are a national service with a consistent desire to reach out to our client group and find new and innovative ways to support them. Change is always challenging, but has enabled the organisation to utilise its resources more efficiently. Through changing and adapting we have protected and enhanced our services.

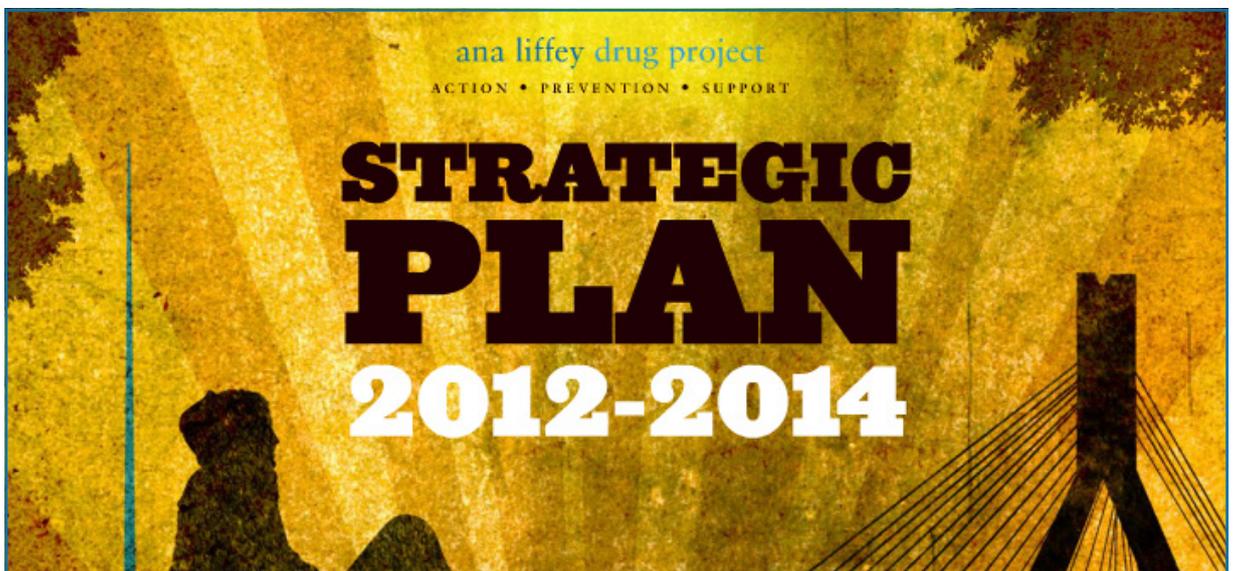
We also believe strongly in working in partnership. Ana Liffey is largely funded by the State, and we are grateful for the consistent and continued support. We have a duty to ensure that we provide value for money to our stakeholders; to this end, we work hard to reap the benefits of cooperation with our many partners across all sectors.

November 2012 also saw a change at the head of the organization, when Dr. David Poole stepped down as the Chair of the Council of Management. I wish to recognize David's unparalleled commitment to the Ana Liffey, and to thank him on behalf of the whole organisation. As Chair, David was a constant governance presence; calmly guiding the ethos and work of the Ana Liffey from a small local drug

project to a national addiction service. David played a large part in ensuring that our clients have remained at the centre of the focus of the organisation. As we continued to grow during his tenure, the focus remained on working with people to address the serious health and social issues related to problematic drug use in communities across Ireland. As the new Chair of the organisation I hope to continue as David left off, working to ensure that we live in a society where all people affected by problem substance use are treated with dignity and respect and have access to quality services.

Finally, I want to thank those who work for Ana Liffey; without them, the organisation could not function. The staff and management of the Ana Liffey have always remained focused on our mission of working with people affected by problem substance use and the organisations that assist them. On behalf of the Council of Management I wish to thank our staff for their support throughout the year and for their ongoing dedication and professionalism in delivering services to our clients.

Deirdre McQuillan
Chairperson
October 2013



Ana Liffey's Strategic plan 2012 - 2014.

DRUGS.ie
Drug and Alcohol Information and Support

English | Gaeilge

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2

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Services
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Multimedia
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Government announcement

Poll
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News
13th November 2013
Alcohol is not a solution in which we should expect problems to dissolve
13th November 2013

Drugs.ie homepage.

Director's Report



2012 was the Ana Liffey's 30th Anniversary; the organization has been providing services in Dublin since its inception in 1982. The year had both ups and downs. On the positive side, we were able to achieve significant growth in our regional work. For example, having established two teams in the Midlands in 2011, we succeeded in establishing our Mid-West Team in May 2012. On the negative side, 2012 saw our fourth successive year of reductions in our core funding for our existing services, leaving us with 27% less funding for existing services than we had had in 2008. While we have always worked hard to do 'more with less', there comes a point when a different approach is needed.

Once funding for 2012 had been confirmed, we realised that we were facing into the position of a significant overspend by year end. We had to act decisively, or face much tougher decisions later. Committed to preserving front line staff and services, we undertook a significant restructure of our organisation's management structure during 2012 to make the necessary savings. As part of the restructure process, we also planned for the reconfiguration of our services, much of which would be implemented in 2013. Change is always challenging, and people always react to it in different ways. Some people embrace it immediately, seeking to make their own mark on the new reality. Others are slower to come to terms with it, taking their time to consider what the changes mean to them and how they can engage with the new reality. Our organisation was no different to any other in this regard, and I thank all our staff for their engagement with the change process and ongoing commitment to the organisation's goals. Ana Liffey is more effective, efficient and stronger for having gone through the process, and this will stand us in good stead for the future.



On-street promotion of the Outreach Service.



Outreach Needle and Syringe Programme.

Flexibility and an ability to change quickly in response to emerging needs and opportunities are the characteristics which make NGOs a valuable partner for statutory bodies in service delivery. It is, in part, our 'can do' attitude which allows us to work in innovative ways with our clients. Without that flexibility, we will lose our relevance to our clients and, with it, our value to our funders. I would like to take this opportunity to thank everybody involved for their support and willingness to work through this significant period of change in Ana Liffey's 30 year history. If we are to remain responsive it is inevitable that the Ana Liffey will continue to change and adapt. This is what keeps the Ana Liffey a relevant and an exciting organisation. In the future, we hope to deliver on innovations like Crisis Residential Services and Medically Supervised Injecting Centres. We can only do this by embracing change and staying relevant.

During 2012 we provided a variety of direct services to men, women and children affected by problematic drug use across twelve counties of Ireland. We maintained two buildings in Dublin; one building in Mullingar; one building in Limerick; one storage unit in Finglas; we maintained six vehicles on the road; and we worked out of various buildings which were provided by our partner agencies. In total, we worked with over three and a half thousand individuals.

Across the country, we sought to increase pathways to treatment and options for our client group. In 2012, more people than ever before from more areas of the country accessed treatment through the Ana Liffey. We reached out to marginalised groups, some of whom were not previously engaged with services. We provided online supports to the nation via drugs.ie. We also provided sectoral supports to addiction services across the State. For more information please see the detailed infographic which includes headline statistics on the Ana Liffey's work in 2012

Finally, I would like to thank all those that support the Ana Liffey Drug Project in any capacity – your help truly assists us in our day-to-day work.

Tony Duffin
Director
October 2013

2012 Case study

Working with Anne-Marie and Brian

We came to work with Anne-Marie who had been referred by her HSE Social Work team. Anne-Marie was motivated as she was pregnant and had a drug problem. Anne-Marie started working with us, with a focus on reducing her drug use. Anne-Marie's worker at Ana Liffey carried out one-to-one sessions and encouraged her to complete drug diaries. She was already having pre-natal assessments with the local HSE Social Work team as she had previously had a child taken into care.

Anne-Marie wanted to introduce the father of her two children, Brian, to the Ana Liffey. At the time Brian was in prison. Our staff visited him a number of times in prison and began working with him. Brian continued to meet with us upon his release. Brian also had a drug problem and had been involved in crime.

We worked with Anne-Marie and Brian separately and as a couple. They both had shared goals of accessing treatment and keeping their baby in their care.

“Anne-Marie and Brian both completed their residential rehabilitation programme and graduated together.”

Anne-Marie and Brian both attended our locally provided information groups about Coolmine Therapeutic Community and they decided that they wanted to go there. They were determined to enter rehab with their baby. They completed assessments onsite with Ana Liffey staff and we liaised and advocated on their behalf with Coolmine, the local HSE Social Work Team, and the Courts. Anne-Marie and Brian undertook a Community Detox and achieved the levels of drug use required for entry to Coolmine. They were offered residential rehab places and began attending pre-entry groups in Coolmine to keep them engaged and to help maintain their motivation.

Anne-Marie gave birth to their son in September 2012; and under a week after the birth Anne-Marie, Brian and their baby were admitted to residential rehab.

Anne-Marie and Brian both completed their residential rehabilitation programme and graduated together. They are now in a private rented apartment, away from their area of origin, with support from a locally based Ana Liffey staff member.

Please note the names of the clients have been changed to protect their identities.

Treasurer's Report



I took over the role of Treasurer in November 2012, and would like to thank Deirdre McQuillan, the outgoing Treasurer, for her work. For the year ended 31st December 2012, an operating surplus of €17,473 was reported compared to a deficit of €1,406 in the previous year. This was derived from operating income of €1,896,806 against expenses of €1,879,333. In common with many organisations in the sector, the organisation faces increasing demands on its resources at a time when those same resources are subject to reduction. In response, a series of cost cutting measures were implemented across the organisation in order to ensure that we continue to meet client expectations despite reductions to recurring grants. Maximising service delivery while maintaining financial stability will continue to be a key issue for the organisation.

The income of the Ana Liffey Drug Project mainly comes from various statutory authorities including the Health Services Executive, the North Inner City Drugs Task Force, the Midlands Regional Drugs Task Force, the North East Regional Drugs Task Force, the Department of Health, the Department of Justice and Equality and Dublin City Council. During 2012 additional recurring grant funding was secured from the Mid-West Regional Drugs Task Force and the Health Services Executive for the Ana Liffey to work in the Mid-West Region.

Staff salaries and related payments are by far the largest expense of the Ana Liffey as client services are the main activity of the organisation. Certain clinical client services such as family therapy and clinical psychology are provided using agency staff. Other expenditure was connected to the project costs in relation to providing effective outreach and fixed site services throughout the country. Such expenditure includes motor and travel costs, client expenses including needle and syringe supplies, building related expenses and other support costs.

During the year the Ana Liffey Drug Project acquired three motor vehicles which are included in the Balance Sheet under Fixed Assets. Costs of running these vehicles are included in the operating expenses. The balance sheet also shows accruals relating to monies held for various projects ongoing into the next financial year. Net Assets of the organisation as at 31st December 2012 were €1,042,978 which were represented by:

Company General Fund	€632,651
Government Grant Capitalised	€410,327

The Government Grant related to a mortgage debenture granted through the Northern Area Health Board for 48 Middle Abbey Street which the organisation writes off at a rate of one twentieth per annum from the date of inception.

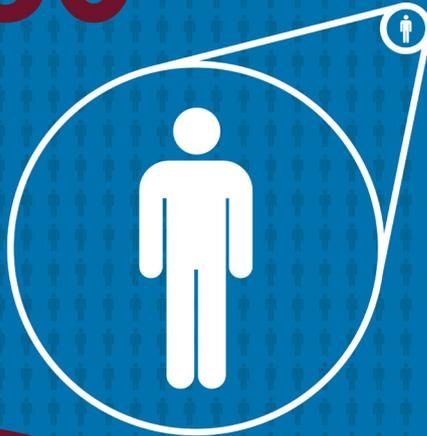
Overall, the Management of the organisation have maintained care over funds provided to ensure that they are spent in accordance with their purpose and in an efficient manner to ensure the sound financial standing of the organisation for the future.

I'd like to thank the various staff members who worked on finance matters; and to thank my colleagues on the Finance Sub-Committee for their hard work on the finances of the organisation during 2012.

Richard Guiney
Treasurer
October 2013

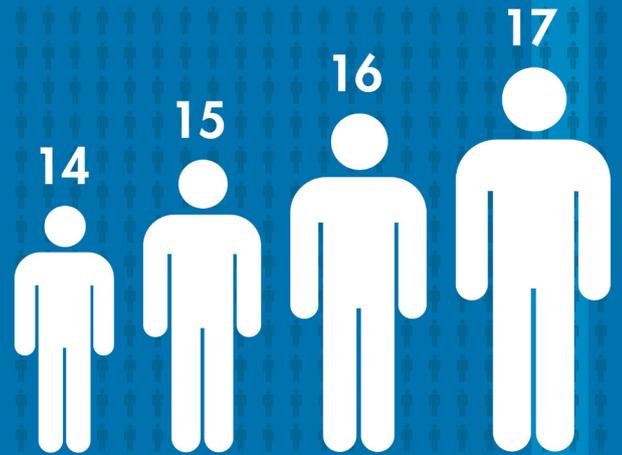
3,560

the number of clients we worked with in 2012



36

the number of active drug users aged between fourteen and seventeen years old that we worked with in 2012



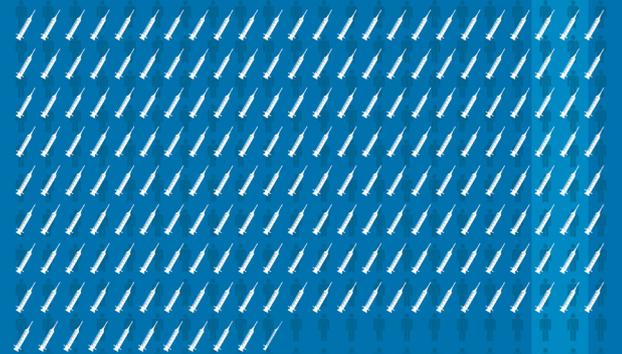
28,693

the number of client contacts in 2012



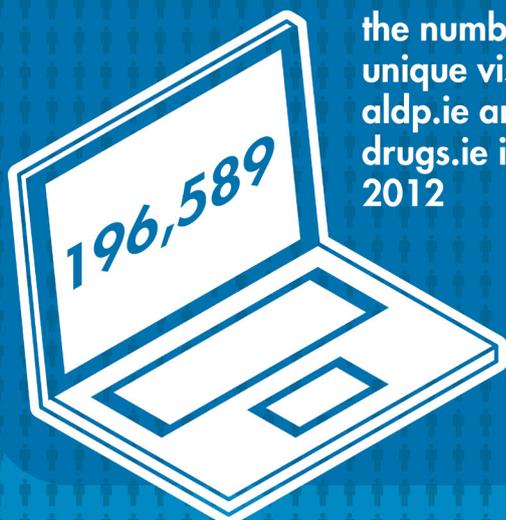
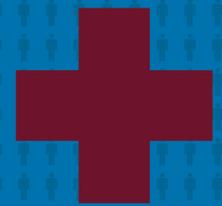
2,025

the number of Needle and Syringe Programme interventions in 2012



1,745

the number of medical interventions provided in 2012



the number of unique visits to aldp.ie and drugs.ie in 2012



€528

the cost per person to provide services in 2012



51,282

the number of staff hours available in 2012

Ana Liffey 2012 infographic





ana liffey drug project
ACTION • PREVENTION • SUPPORT

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